

## SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

### ACCIDENT STATEMENT

|                            |                                 |
|----------------------------|---------------------------------|
| Date Of Report             | 24/10/2020 10:23                |
| Date Of Accident           | 16/10/2020 08:40                |
| Exact Location Of Accident | AT WOODLANDS INDUSTRIAL PARK E5 |
| Country/State of Loss      | SINGAPORE                       |

### DETAILS OF OWN VEHICLE

|                             |                           |
|-----------------------------|---------------------------|
| Vehicle Registration Number | SML2181E                  |
| <b>Insured/Policyholder</b> |                           |
| Name Of Registered Owner    | SWEE SENG LEASING PTE LTD |
| Co Reg No                   | 2XXXXX948K                |
| Email Address               | IREAN.ANG@SSSGROUP.SG     |
| Mobile Phone No             |                           |
| Alternative Phone No        | OFFICE-64663808           |

### Vehicle Particulars

|  |                        |
|--|------------------------|
| Manufacturer   | HONDA                  |
| Model  | VEZEL-1.5 1.5X CVT (A) |
| Exact Purpose for which vehicle was being used at time of accident           |                        |
| Are you claiming under your own insurance policy for repair to your vehicle? | NO                     |
| If No, Please state action to be taken                                       | REPORTING ONLY         |
| Vehicle Category   | PRIVATE CAR            |

### Insurance Company

|                           |   |
|---------------------------|---|
| Name of Insurance Company | CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. |
| Type Of Coverage          | COMPREHENSIVE                                 |
| Fleet Policy              | YES   |
| Policy Number             | DMHCSNW00002422001                            |
| Cover Note Number         |   |

### Driver

|                      |                        |
|----------------------|------------------------|
| Name of Driver       | KOH BOON LENG          |
| NRIC No              | SXXXX434B              |
| Date Of Birth        | 12/08/1965             |
| Occupation           | INDOOR                 |
| Date Of Driving Pass | 28/11/1986             |
| Driving Experience   | 33 YEARS AND 10 MONTHS |
| Gender               | MALE                   |
| Mobile Number        | (LOCAL) +65-96250219   |
| Fax Number           |                        |
| Contact Number       |                        |
| EEmail Address       | NOEMAIL                |

|   |                                       |
|---|---------------------------------------|
| Address   | APT BLK 612 ANG MO KIO AVE 4 #02-1131 |
| Postcode  | 2056                                  |
| Was driver an employee of the Insured's Company     | NO                                    |
| If No, Relationship of the Driver with the Insured  | OTHER - HIRER                         |
| Vehicle Registration Number of Driver's Own Vehicle | -                                     |
|   | -                                     |
|   | -                                     |
| Insurance Company of Driver's Own Vehicle           | -                                     |
|   | -                                     |
|   | -                                     |

#### General Information of the Accident

|                    |              |
|--------------------|--------------|
| Type Of Accident   | NO COLLISION |
| Weather Conditions | CLEAR        |
| Road Surface       | DRY          |

#### Other Information

|   |     |
|---|-----|
| Was any foreign vehicle involved in this accident?  | NO  |
| Number of vehicles (including own vehicle) involved in the accident                         | 2   |
| Was any body injured in the Accident?   | NO  |
| Was any injured conveyed to hospital by ambulance?  | NO  |
| Was any other material or property damaged?   | YES |
| I have been approached by unknown person(s) soliciting/offering accident claims assistance. | NO  |
| Number of Passengers (Including Driver)   | 1   |

#### Details of Police Action

|   |  |
|---|--|
| Was the accident reported to the police?  | YES  |
| If Yes, Please state which Police Station |  |
| Police Station Name                       | WOODLANDS DIVISION HQ  |
| Police Station Address                    | <b>ROAD:</b> 1 WOODLANDS STREET 12 , <b>POSTCODE:</b> 738622 , <b>COUNTRY:</b> SINGAPORE |
| Police Station Contact                    | <b>TEL NO:</b> - <b>FAX NO:</b>  |
| Was notice of intended Prosecution given? | NO   |
| If Yes, against whom?                     |  |

#### Circumstances of Accident

ON 16/10/20 AT ABOUT 0840HRS I WAS AT WOODLANDS INDUSTRIAL PARK E5. TO COLLECT SOMETHING AT UNIT 141. AFTER COLLECTION, THERE WAS A DELIVERY VEHICLE PARKED RIGHT BESIDE ME, UNLOADING, SO I HAD TO REVERSE MY VEHICLE (SML2181E) TO GO OUT. AS I WAS REVERSING SLOWLY ALONG THE DRIVE WAY, I TURN LEFT AFTER PASSING THE DELIVERY VEHICLE. SUDDENLY I CAUGHT A GLIMPSE OF A VEHICLE ON MY RIGHT SIDE MIRROR AND BRAKED QUICKLY. THEN I MANOEUVURED MY VEHICLE SLOWLY OUT. AT THAT MOMENT I FELT RELIEVED THAT I DID NOT KNOCK INTO THE VEHICLE AND FELT A LITTLE UPSET THAT THE VEHICLE B WAS PARKED ALONG A DRIVEWAY WITH NO HAZARD LIGHT. RELIEVED, I CONTINUED ON MY JOURNEY. IT WAS ONLY ON 23/10 THAT I RECEIVED A CALL FROM THE LEASING COMPANY OF MY VEHICLE THAT THERE HAS BEEN A REPORT THAT I HAD ACTUALLY KNOCKED VEHICLE B. \*PLS REFER TO POLICE REPORT NO: L/20201025/7020.

#### Attachment(s)

|   |     |
|---|-----|
| Are accident photos available for attachment? | YES |
| Was there any video captured by Car Camera?   | NO  |
| Was there any audio recorded?                 | NO  |

#### DETAILS OF OTHER VEHICLE PROPERTY 1

|                             |             |
|-----------------------------|-------------|
| Vehicle Registration Number | SKB6128K    |
| Vehicle Make/Model/Colour   |             |
| Details Of Properties       |             |
| Vehicle Category            | PRIVATE CAR |
| Name of Driver              |             |

NRIC/Passport Number

Contact Number

Address

Postcode

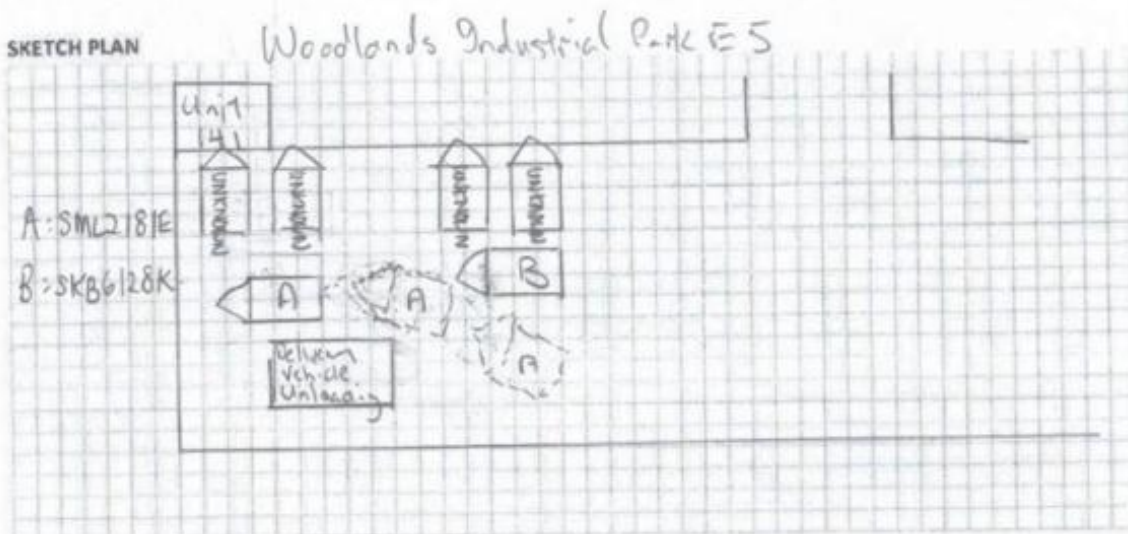
Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

# Accident Sketch Plan

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 16/10/20 at about 0840 HRS I was at Woodlands Industrial Park E5. to collect something at unit 141. After collection, there was a delivery vehicle parked right beside me unloading, so I had to reverse my vehicle (SML2181E) to go out. As I was reversing slowly along the drive way, I turn left after passing the delivery vehicle. Suddenly I caught a glimpse of a vehicle on my right side mirror and braked quickly. Then I manoeuvred my vehicle slowly out. At that moment I felt relieved that I did not knock into the vehicle and felt a little upset that the vehicle B was parked along a driveway with no hazard light. Relieved, I continued on my journey. It was only on 23/10 that I received a call from the leasing company of my vehicle that there has been a report that I had actually knocked vehicle B.

## DECLARATION

I/We declare the foregoing particulars are true in every respect.

✓  
Policyholder's Signature  
Date & Time:

✓  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

✓  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

## Accident Sketch Plan

### SKETCH PLAN

#### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties.
7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

#### 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "insurers"), the insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
  - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) investigating the accident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

X  
  
Policyholder's Signature  
Date & Time:

X  
  
Driver's Signature  
(if driver is not the policyholder)  
Date & Time:

  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:



# Accident Sketch Plan



中国太平保险(新加坡)有限公司  
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Hire Car

MZ406

R SN

AN0420A

Cov. Type: C

## CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)  
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1990  
Road Transport Act, 1987 (Malaysia)  
Motor Vehicles (Third-Party Risks) Rules, 1998 (Malaysia)

|  |                            |  |
|--|----------------------------|--|
| CERTIFICATE No.  | DM-HCSNW00002422001        | Engine No.: L1585581327<br>Chs. No. RU11311318   |
| 1. Trade Mark and Registration Number of Vehicle   | SML2181E                   | AUTOSAFE   |
| 2. Name of Policy Holder   | SWEET SENG LEASING PTE LTD |  |
| 3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment   | 09/05/2020                 | Excess Sect 1: S\$500.00<br>Excess Sect. 1 (Outside Singapore): S\$1,000.00<br>EX ON WINDSCREEN: S\$100.00 |
| 4. Date of Expiry of Insurance   | 08/05/2021                 |  |
| 5. Persons or Classes of Persons entitled to drive*<br>Any person who is driving on the Policyholder's order or with the Policyholder's permission. Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.  |                            |  |
| ANY EMPLOYEE OF THE COMPANY  |                            | ANY AUTHORISED DRIVER  |
| 6. Limitations as to use:<br>(1) Use for the carriage of passengers or goods in connection with the Policyholder's business.<br>(2) Use for social domestic pleasure purposes and business purposes of any person to whom the vehicle is hired.<br>The Policy does not cover:<br>(1) Use for racing, pace-making, reliability trial or speed-testing.<br>(2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.<br>(3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired. |                            |  |
| HIRE PURCHASE CO.: DBS BANK LTD AS HP OWNER<br>* Limitations rendered inoperative by Section 3 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Malaysia), are not to be included under these headings.   |                            |  |

I/We hereby Certify that this policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please see reverse



Issued By: INXPRESS INSURANCE AGENCY PTE LTD  
Authorised Officer

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

*杨亚美*  
Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)  
3 Anson Road #16-00 Springleaf Tower Singapore 079909

6389 6111

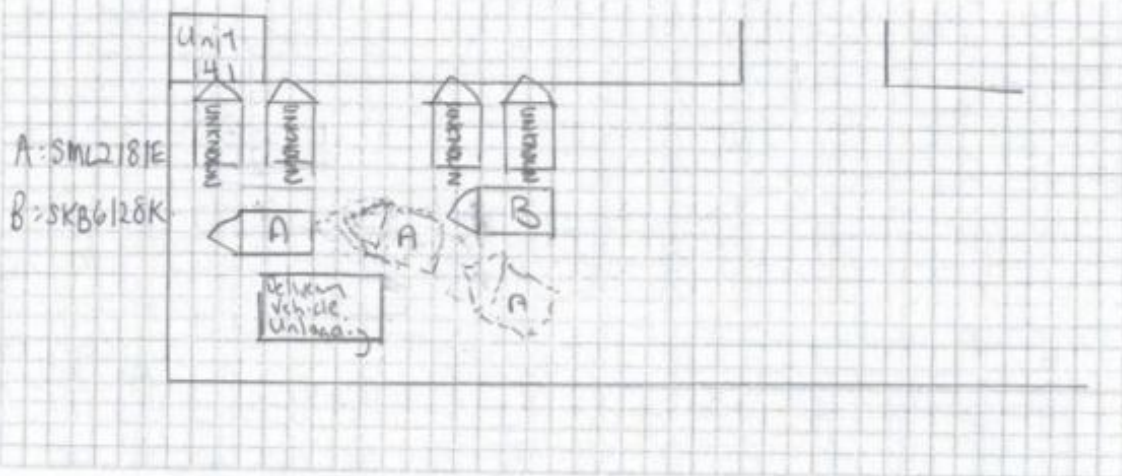
6222 1033

www.sg.cntaiping.com

# Accident Sketch Plan

## SKETCH PLAN

Woodlands Industrial Park E5



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 16/10/20 at about 0840HRS I was at Woodlands Industrial Park E5. to collect something at unit 141. After collection, there was a delivery vehicle parked right beside me unloading, so I had to reverse my vehicle (SML2181E) to go out. As I was reversing slowly along the drive way, I turn left after passing the delivery vehicle. Suddenly I caught a glimpse of a vehicle on my right side mirror and braked quickly. Then I manoeuvred my vehicle slowly out. At that moment I felt relieved that I did not knock into the vehicle and felt a little upset that the vehicle B was parked along a driveway with no hazard light. Relieved, I continued on my journey. It was only on 23/10 that I received a call from the leasing company of my vehicle that there has been a report that I had actually knocked vehicle B.

\*Pls refer to Police Report No: L/20201025/7020.

## DECLARATION

I/We declare the following particulars are true in every respect.

Policyholder's Signature  
Date & Time:

Driver's Signature  
(if driver is not the policyholder)  
Date & Time:

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

# Accident Sketch Plan



**SINGAPORE  
POLICE FORCE**



L/20201025/7020

1 of 2

## POLICE REPORT (NP299)

Report No. L/20201025/7020

Police Station Of Origin  
Woodlands Division HQ  
1 Woodlands Street 12 SINGAPORE 738622  
Tel No:1800-4660000

|  |   |                   |
|--|---|-------------------|
| Date/Time Report Made<br>25/10/2020 21:02                    | Vide Report No.   | Station Diary No. |
| Name Of Informant<br>KOH BOON LENG                           | Address<br>612 ANG MO KIO AVENUE 4 #02-1131 SINGAPORE<br>560612 |                   |
| ID Type / ID No.<br>NRIC NO / S1707434B                      | Contact No.<br>Home/Office: Mobile:<br>96250219                 |                   |
| Nationality<br>SINGAPORE CITIZEN                             | Email Address<br>eddiekbl@singnet.com.sg                        |                   |
| Occupation<br>Not working                                    | Sex<br>Male   | Age<br>55         |
| Institution/School Name                                      | Date of Birth<br>12/08/1965                                     | Race<br>Chinese   |
| Date/Time Of Incident<br>16/10/2020 08:40 - 16/10/2020 08:40 | Location Of Incident<br>WOODLANDS INDUSTRIAL PARK E5            |                   |

### Brief details.

Police Report of a Traffic Accident (NP168)

Ref : TP/IP/45761/2020

On the above day and time, I went to the above venue at unit 141 to pick up an item. As I was leaving, there was a delivery vehicle unloading right beside my vehicle(SML 2181E), and I had to reverse my vehicle to go out. I reversed very slowly along the driveway and turned slight left after passing the delivery vehicle. Suddenly I caught a glimpse of a vehicle close to me from my right side mirror and very

|  |  |
|--|--|
| Signature Of Officer Recording The Report:<br>Not applicable | Signature Of Informant:<br>The identity of the person making this report has been authenticated by SingPass. No signature is required. |
| Signature Of Interpreter:<br>Not applicable                  | Date/Time:<br>25/10/2020 21:02   |
| Officer In-Charge Of Case:                                   | Classification Of Case:  |

Authentication Stamp



## Accident Sketch Plan



**SINGAPORE  
POLICE FORCE**



L/20201025/7020

2 of 2

**POLICE REPORT (NP299)**

**CONTINUATION OF REPORT**

Report No. L/20201025/7020

quickly braked my vehicle. I then slowly manoeuvred my vehicle to turn out. During this time, my car reverse sensors also did not alert me to anything that was too close to my vehicle. At that moment, I remembered feeling a little upset that a vehicle was parked along a driveway and no hazard light was switched on to warn other motorists, but also felt relieved that I did not knock into the vehicle. Relieved, I continued on my journey. It was on 23/10 that I received a call from the leasing company from whom I leased the vehicle from, informing me that there's a report that I had knocked that vehicle. From 16/10 to 23/10 I did not notice any signs/damage on my car that alert me that I had knocked into anything. Nonetheless, after receiving the call, I went to check again and there was no signs/damage. On 24/10, I went to the leasing company authorised car workshop to file an accident report as well as to check for any damage, and they found no damage at all. Even now, I am really puzzled about this accident as I did not realise or am aware that I had knocked into that vehicle.

|  |  |
|--|--|
| Signature Of Officer Recording The Report:<br>Not applicable | Signature Of Informant:<br>The identity of the person making this report has been authenticated by SingPass. No signature is required. |
| Signature Of Interpreter:<br>Not applicable                  | Date/Time:<br>25/10/2020 21:02   |
| Officer In-Charge Of Case:                                   | Classification Of Case:  |
| Authentication Stamp   |  |

## Driving License



## Driving License



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



## Addendum Sheet



### GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00 Singapore 048580  
Tel (65) 6224 0010 Fax (65) 6224 0030  
Operating Hours : Monday to Friday, 09:00 – 17:00  
UEN: S66550020G / GST Reg. No.: M400017735

**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

## ADDENDUM

### (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: MA1220093211 Vehicle Registration No: SML2181E  
Name (as shown in NRIC): KOH BOON LENG NRIC/FIN/Passport No: S1707434B  
(\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
Address: APT BLK 612 ANG MO KIO AVE 4 #02-1131 Singapore (2056)  
Contact (Tel): \_\_\_\_\_ Mobile No.: 9625 0219  
Email Address: \_\_\_\_\_  
Date of Accident: 16 OCT 2020 Time of Accident: 0840 A.M.  
Place of Accident: AT WOODLANDS INDUSTRIAL PARK E5  
Insurance Company: CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD.

### (B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

- ① To amend Details of Police Action Accident Reported to the Police from NO to YES.
- ② To insert Police Report.
- ③ To amend Sketch Plan / circumstances of Accident, Pls refer to Police Report No: L/20201025/7020.

x

Policyholder / Driver's Signature  
Date:

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:  
Date: