

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	28/10/2020 11:47
Date Of Accident	27/10/2020 11:00
Exact Location Of Accident	ALONG BEDOK NORTH AVE 3
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YN7127C
Insured/Policyholder	
Name Of Registered Owner	MONZONE AIR CONDITIONING PTE LTD
Co Reg No	200102928W
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-63651315

Vehicle Particulars

Manufacturer	HINO
Model	XZU710R-HKFMS3-4.0 D (M)
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?	YES
If No, Please state action to be taken	
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSNA00090332000
Cover Note Number	

Driver

Name of Driver	LI SHOULONG
Work Permit No	G8149941T
Date Of Birth	30/06/1989
Occupation	OUTDOOR
Date Of Driving Pass	20/08/2013
Driving Experience	7 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98857688
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 529 JURONG WEST ST 52 #18-373
Postcode	640529
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	JKS8925 (PRIVATE CAR)
Number of vehicles (including own vehicle) involved in the accident	3
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	JURONG WEST NPC
Police Station Address	ROAD: 700 CORPORATION ROAD , POSTCODE: 649818 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

ON 27/10/2020 AT ABOUT 1100HRS, I WAS DRIVING MY VEHICLE BEARING THE PLATE NUMBER YN7127C FROM BEDOK NORTH AVE 3 TOWARDS BEDOK RESERVOIR RD AND I WAS AT THE MOST LEFT LANE AND I WAS TRAVELLING AT ABOUT 40KM/H SUBSEQUENTLY THE VEHICLE IN FRONT BEARING THE PLATE NUMBER JKS8925 DID BRAKE HOWEVER THERE IS NO BRAKE LIGHT SHOWED THUS ONCE I SAW THE VEHICLE STOPPED I DID AN E-BRAKE HOWEVER DID NOT STOP IN TIME AND MY VEHICLE COLLIDED ONTO IT. I WISH TO STATE THAT IT WAS A 3 CAR CHAIN COLLISION.

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	JKS8925
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)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SMQ3156X
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

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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.

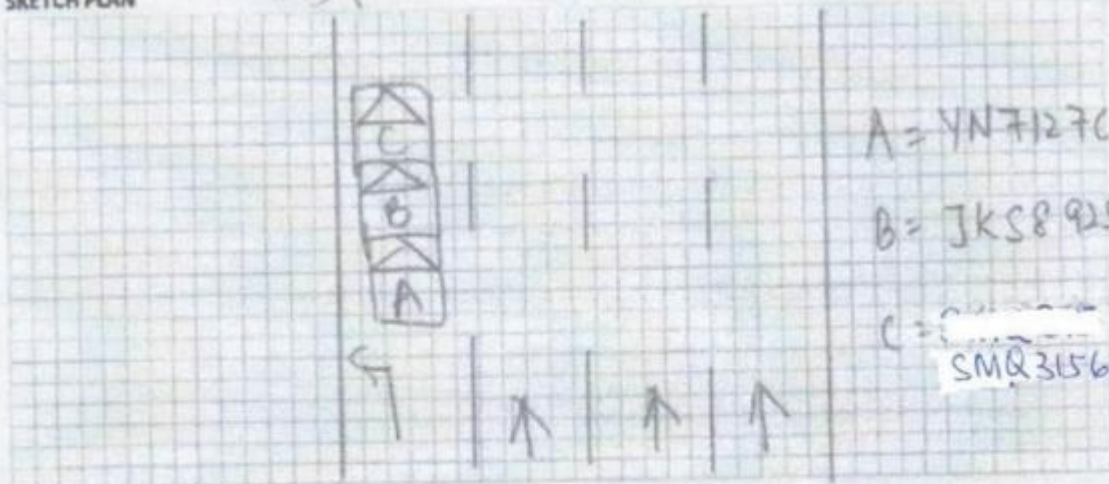
Policyholder's Signature:
Date & Time:



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

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO POLICE REPORT T/20201027/2106.

I wish to state that it was a 3 car chain collision.

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/TIN No.:



**SINGAPORE
POLICE FORCE**



T/20201027/2106

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

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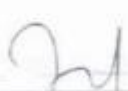

Report No. T/20201027/2106

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: J / Sgt 2 MUHAMMAD SHAKIR ZUFAYRI BIN AZMAN	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 27/10/2020 18:01*
Officer In Charge Of Case: TP / GIT /	Classification Of Case:
Contact No.: SN 126	
Authentication Stamp NP168  Singapore Police Force	

Accident Sketch Plan



SINGAPORE POLICE FORCE



T/20201027/2106

1 of 3

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

Report No. T/20201027/2106

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 27/10/2020 18:01		Vide Report No.: G/20201027/0090		Station Diary No.: 137	
Informant's Particulars					
Name of Informant: LI SHOULONG			Address: 529 Jurong west st 52 #18-373 SINGAPORE 640529		
ID Type / ID No.: FIN NO / G8149941T			Contact No.: Home/Office:		Mobile: 98857688
Nationality: CHINESE			Email:		
Sex: Male	Age: 31	Date of Birth: 30/06/1989	Type of Informant: Driver		
Race: Chinese			Language: Chinese		Institution / School Name:
Occupation: driver			Driving Licence Information: Class: 3,4,5		Date of Expiry:

General Information of the Accident				
Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 27/10/2020 11:00	Type of Location: Bend
Location: BEDOK NORTH AVENUE 3				
Weather: Cloudy		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
JKS8925	Car				Seriously Damaged	0
YN7127C	Lorry	HINO	HINO XZU710R- HKFMS3	White	Slightly Damaged	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

Accident Sketch Plan



**SINGAPORE
POLICE FORCE**



T/20201027/2106

2 of 3

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

Report No. T/20201027/2106

CONTINUATION OF REPORT

Driver			
Name	LI SHOULONG	ID No.	G8149941T
Related Vehicle	NIL	Contact No.	98857688
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3,4,5 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	Ngik Nguan Bing	ID No.	NIL
Related Vehicle	NIL	Contact No.	96603281
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 27/10/2020 at about 1100hrs, I was driving my vehicle bearing the plate number YN7127C from Bedok North Ave 3 towards Bedok Reservoir Rd and I was at the most left lane and I was travelling at about 40km/h subsequently the vehicle in front bearing the plate number JKS8925 did break however there is no break light showed thus once I saw the vehicle stopped I did an e-break however did not stop in time and my vehicle collided onto it.

VISIT PASS
Immigration Regulations

28-07-2019

Name:
LI SHOULONG

FIN
Q8149941T

Date of Birth
30-05-1989

Sex
M

Nationality
CHINESE

MULTIPLE JOURNEY VISA ISSUED

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED
OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.

Download SGWorkPass
App to check status



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS

EXPIRY DATE

Class 3	Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver, and other motor vehicles with unladen weight \leq 2500kg	28 Sep 2017
Class 4	Motor vehicles which are constructed to carry load or passengers and the unladen weight $>$ 2500kg	
Class 5	Motor vehicles which are not constructed to carry load or passengers and the unladen weight \leq 7250kg	22 Mar 2018
	Motor vehicles not constructed to carry any load and the unladen weight $>$ 7250kg	

License No: Q8149941T



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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