

## 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	31/10/2020 15:25
Date Of Accident	29/10/2020 15:35
Exact Location Of Accident	ANG MO KIO AVENUE 10
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	YN5494E
<b>Insured/Policyholder</b>	
Name Of Registered Owner	KEPPEL CONTAINER LINE PTE LTD
Co Reg No	199404996N
Email Address	LOGISTIC@KEPPELCONTAINER.COM
Mobile Phone No	
Alternative Phone No	OFFICE-90044960

### Vehicle Particulars

Manufacturer	MITSUBISHI
Model	FUSO FM65FM2RDEB
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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	SOMPO INSURANCE SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D20MTHCVE001538
Cover Note Number	

### Driver

Name of Driver	SEAH TANG CHEW
NRIC No	S1187673J
Date Of Birth	22/08/1956
Occupation	OUTDOOR
Date Of Driving Pass	19/07/1984
Driving Experience	36 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91878228
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	APT BLK 12 MERPATI ROAD #04-121
Postcode	
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	RAINING
Road Surface	WET

#### 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	MACPHERSON NEIGHBOURHOOD POLICE POST
Police Station Address	<b>ROAD:</b> BLK 54 PIPIT ROAD #01-82/84 , <b>POSTCODE:</b> 370054 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-7449999 - <b>FAX NO:</b> 65476366
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO THE ATTACHED.

#### 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	PC2028C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	BUS
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

SKETCH PLAN

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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.

KEPPEL CONTAINER LINE PTE LTD  
GOODS RECEIVED CONTENTS UNCHECKED  
NOT RESPONSIBLE FOR PAYMENT

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 Pg. 1

### SKETCH PLAN

PC 2028C

FN 51942

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report.

Insurance Co. Sompo  
Vehicle No. 4N54944 Date of Accident 29/10/2020  
☒ Reporting Only  
☐ Own Damage Claim  
☐ Third Party Claim  
☐ Other Workshop

## DECLARATION

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

KEPPEL CONTAINER LINE PTE LTD  
GOODS RECEIVED CONTENTS UNCHECKED

~~NOT RESPONSIBLE~~  
Policyholder's Signature

Date & Time:

NT  
Driver's Signature

(If driver is not the policyholder)

Date &amp; Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:





**SINGAPORE  
POLICE FORCE**



T/20201029/2105

Police Station Of Origin:  
MacPherson NPP  
54 Pipit Road #01-82/84 SINGAPORE  
370054  
Tel No: 1800-7449999

1 of 3

Report No. T/20201029/2105

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 29/10/2020 19:35	Vide Report No.:	Station Diary No.: 45
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**Informant's Particulars**

Name of Informant: SEAH TANG CHEW	Address: APT BLK 12 MERPATI ROAD #04-121 SINGAPORE 370012		
ID Type / ID No.: NRIC NO / S1187673J	Contact No.: Home/Office: Mobile: 91878228		
Nationality: SINGAPORE CITIZEN	Email:		
Sex: Male	Age: 64	Date of Birth: 22/08/1956	Type of Informant: Driver
Race: Chinese	Language:		Institution / School Name:
Occupation: KEPPLE CONTAINER	Driving Licence Information: Class: 3,4,5		Date of Expiry:

**General Information of the Accident**

Type of Accident: Non-Injury	Drink Drive: No	Date/Time of Accident: 29/10/2020 15:35	Type of Location: Car Park
Location: ANG MO KIO AVENUE 10			
Weather: Heavy rain	Road Surface: Wet	Road Speed Limit:	
Traffic Flow:	Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Moving Vehicle Against - Parked Vehicle			Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
PC2028C	Van				Slightly Damaged	0
YN5494E	Lorry				No Damage	0

**Details of Person Involved**

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



**SINGAPORE  
POLICE FORCE**



T/20201029/2105

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MacPherson NPP  
54 Pipit Road #01-82/84 SINGAPORE  
370054  
Tel No: 1800-7449999

2 of 3  
Report No. T/20201029/2105

**CONTINUATION OF REPORT**

<b>Driver</b>			
Name	SEAH TANG CHEW		ID No. S1187673J
Related Vehicle	NIL		Contact No. 91878228
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

**Brief Details.**

On the above mentioned time and date, I was waiting at the side of the road as I was waiting to enter into the loading bay at the said location. My vehicle was at stationary there for around 3-4 mins and another driver came to approach me at the driver seat and informed me that i was reversing and hit his vehicle. I was unable to get his particulars as it was raining heavily. I am lodging this report for record purposes.

**SINGAPORE  
POLICE FORCE**

T/20201029/2105

Police Station Of Origin:  
MacPherson NPP  
54 Pipit Road #01-82/84 SINGAPORE  
370054  
Tel No: 1800-7449999

3 of 3

Report No. T/20201029/2105

## 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:  
G /  
Sgt 1 MOHAMMAD FARIZUAN BIN  
NASRUDDIN

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / GIA /  
Staff Sgt WONG SIEU LUI  
Contact No.: 65476151

Authentication Stamp  
NP168

Signature Of Informant:

Date/Time:  
29/10/2020 19:35

Classification Of Case:







Sompo Insurance Singapore Pte. Ltd.

50 Raffles Place #05-07/08  
Singapore Land Tower Singapore 048623  
Tel: 6461 6555 Fax: 6221 3302 | www.sompo.com.sg  
Co. Reg No.: 198905490E | GST Reg. No.: M200903196

## Certificate of Insurance

ROAD TRAFFIC ACT (CHAPTER 276) (REPUBLIC OF SINGAPORE)  
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)  
ROAD TRANSPORT ACT 1987 (MALAYSIA)  
ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA)  
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (MALAYSIA)

- Cert No./Policy No. : D20MTHCVE001538
1. Registration No. : YN5494E
2. Insured Name : KEPPEL CONTAINER LINE PTE LTD
3. Commencement Date : 08 JULY 2020 00:00
4. Expiry Date : 07 JULY 2021 23:59
5. Coverage : Market value at time of loss - Comprehensive
6. Excess : \$1000 - All Claims
7. Persons or Classes of Persons entitled to drive\*
- Whilst the vehicle is being used in connection with the Insured's business -
    - The Insured.
    - Any other person provided he is in the Insured's employ and is driving on his order or with his permission.
  - Whilst the vehicle is being used for social, domestic or pleasure purposes -
    - The Insured.
    - Any other person who is driving on the Insured's order or with his 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.
- And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.
8. Limitations as to use\*
- Use in connection with the Insured's business.
  - Use for the carriage of passengers (other than for hire or reward) in in connection with the Insured's business.
  - Use for social, domestic or pleasure purposes.
- The Policy does not cover
- Use for racing, pacemaking, reliability trial or speed-testing.
  - Use whilst drawing a greater number of trailers in all than is permitted by law.
  - Use for the carriage of passengers for hire or reward.
9. ExcelDrive Workshops & Accident Reporting
- It is a condition precedent to liability that the Policyholder shall, together with the Motor Vehicle, call at the Company's Accident Reporting Center and report the accident within 24 hours of the accident or by the next working day thereof.
- It is compulsory to have the accident repairs to the insured vehicle carried out at ExcelDrive Workshops, otherwise claim is not payable.
- In an emergency and for directions to the Company's Accident Reporting Centers, please contact our Emergency Hotline : (65) 6461 6555
- Visit [www.sompo.com.sg](http://www.sompo.com.sg) for list of ExcelDrive Workshops and Accident Reporting Centers.

I/We HEREBY CERTIFY that the 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)

Sompo Insurance Singapore Pte. Ltd.

Date/Time of Issue : 18 JUNE 2020 09:39

\*Limitation rendered inoperative by section 8 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

## IMPORTANT NOTICE

- Insureds are hereby warned that under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap 189), it shall be unlawful for any person to use or cause or permit any other person to use a motor vehicle without a valid policy of insurance under the Act.
- Insureds are further warned that on the sale of a motor vehicle or if for any reason the Insurance is terminated during its currency, they must surrender the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189)
- The Policy will cease to be valid once the motor vehicle has been sold to another person. It is not transferable to a new owner of the Vehicle.
- Please note that this insurance is subject to the premium being paid and received in full by the Company (a) before the inception date where the Policy is to be issued to an individual; or (b) within the period specified in the Premium Payment Warranty applied to the Policy in all other instances.
- Insurance coverage under this Policy is subject to the terms and conditions as stipulated in the Motor Insurance Policy

Intermediary Code & Name : 11K09405 & KEPPEL CONTAINER LINE PTE LTD CI Code: 29D DQDOHB4\_PMOQBA4

Accident Photo





Accident Photo



Accident Photo





Accident Photo



CHASSIS NUMBER	
FELIUS BENATO 00058	
U.W :	7600
M.L.W :	10000
TYRE :	(F) 11R 22.5
SIZE :	(R) 11R 22.5
PASSENGER CAPACITY :	
1 DRIVER	2 OTHERS

Accident Photo

