# 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 witholding 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.

- 4. The issue and acceptance of this is form by instraince 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 Submission 22/01/2021 17:39 (SGT) Date of Accident 22/01/2021 15:00 (SGT) Exact Location of Accident 25 Gul Ln, Singapore 629419 Additional Location Information Country/State of Loss Singapore

## **DETAILS OF OWN VEHICLE**

Vehicle Registration Number GBC1321C

### INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner Mopi Pte Ltd Company Reg No 1XXXXX919Z Email Address raymond@mopi.com.sg Mobile Phone No (Phone) +65-98267151 Alternative Phone No (Office) +65-67425677

## VEHICLE PARTICULARS

Manufacturer Toyota Model Dyna Variant Exact purpose for which vehicle was being used at time of **Employment** accident Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party Vehicle Category Commercial vehicle

## INSURANCE COMPANY

Name of Insurance Company QBE Type of Coverage Comprehensive Fleet Policy Policy Number 8-V0004831-MVA-R008 Cover Note Number

## DRIVER

Name of Driver Ong Yu Xuan NRIC No SXXXX682C Date Of Birth 07/02/1994 Occupation Outdoor

Date Of Driving Pass 28/11/2013 Driving experience 7 YEARS AND 2 MONTHS Gender Mobile Number (Phone) +65-92962534 Alt. Phone Number Email Address Yuxuan151@gmail.com Address Block 836 Yishun Street 81 Address complement #04-356 Postcode 760836 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured **Employee** Does Driver Own Other Vehicles? No Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver GENERAL INFORMATION OF THE ACCIDENT Type of Accident Collided into Parked Vehicle Weather Conditions Drizzling Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? Was any other material or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No **DETAILS OF POLICE ACTION** Was the accident reported to the police? No Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT On 22/01/2021 at about 1500hrs, I stopped my vehicle (A: GBC1321C) at the driveway of 25 Gul Lane warehouse waiting for loading/unloading bay. Suddenly, a vehicle (B: XE117L/ trailer no. TRC8960Y) which stopped in front of me made a reversed. I immediately sounded my horn to alert him but to no avail. Thus, the vehicle B reverse and hit onto front portion of my vehicle twice. Nobody was injured in this accident. ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

No
Was there any audio recorded?

No

## **DETAILS OF OTHER VEHICLE PROPERTY 1**

 Vehicle Registration Number
 XE117L

 Vehicle Manufacturer

 Vehicle Model

 Vehicle Variant

 Vehicle Colour

 Vehicle Category
 Goods vehicle

 Name of Driver

 Contact Number

 Address

 Address complement

Postcode	-
nsurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	Trailer No. TRC8960Y
No. Of Passenger (Including Driver)	_

#### SKETCH PLAN

### IMPORTANT NOTICE

- 1. Roase report correctly the datails of the accident to speed up the claims process.
- 2 This Formmust be completed by the Policyholder and/or the Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wallul asseptes entation of withholding of material facts may allow insurance companies to repudiate policy liability.
- 4. The issue and acceptance of this Formby insurance comparies 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 lodgement of this report to the insurers, you needly 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)

Lunders and, acknowledge, agree and consent that

- (a) My insurer, my workshop and the General insurance Association of Singapore ("CIA") may fare permitted to oceant, use, disclose and/or process my personal data/personal information set out in this from) and any other personal information provided by me or cossessed 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 insurers), who have insured vehicle(c) involved in this accident shall be collectively referred to as the "Insurers" I the Insurers tew yers flew firms, the Monetory Authority of Singapore and any relevant government agency/authority (such as the police), for the purposers) of
- ii) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations religing to the claims.
- (ii) investigating the accident anster my claims.
- (a) carrying out and/or dealing with my instructions of responding to any enquires by me.
- (w) administering my claims (including the mailing of correspondence, statements, rivoices, reports or notices to me, which could involve disclusure 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 his accident and the histories faw yers/aw times, neyfare perioded 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 trickiding their law yers/law firms), which may be siled outside of Singapore for one or more of the above Purposes

Policy holder's Signature. Tens

Sketch Plan

22/1/21 ्, की ver's Signature (If driver is not the policyholder) / Cate

Winessed by Perporting Centre

( 7/16 (1966))

Describe Circumstances of th	NOTA-		and the t	, and sure of the first terretain and the sure of the first terretain and the sure of the
	16(1887	'.0'	_ #CC #4.	The le foliat
	and the condition and referred a section of the sec		. H. Seroki on motor-distributed disconding from	/ 
VICTOR CO. C.	· · · · · · · · · · · · · · · · · · ·			
Approximate the second control of the basis of self-self-self-self-self-self-self-self-		and a service of the	and the state of the state of the second state of the sta	The state of the s
and the second s	to at Anatomia Continue Contin			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
	to the author of a constant of the author of			and a superior of supply of the object of the superior in the superior in the superior superior of the superio
anguage and a second and	Notes that the second of the second			
				anniante aliane. Lambe materiale and feller for the Color of the Color
			.,	er e
				at communication to the feetile of t
and the second s	en e		,	The second secon
	d - Hote dilaces in to book of the at to		- 10 16/10 10:20 10	THE THIS COUNTY IN COLUMN TO CASE A RECOLUMN CONTRACTOR OF COLUMN
, , , , , , , , , , , , , , , , , , ,				
		,		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
anne de la companya del companya de la companya del companya de la				Windowski in the contrast and the contrast in
				A Company of the Company of the Street Manager Company of the Comp
William As being the control of the	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			The control of the second state of the second secon
		,.,		
				entropy of the second of the s
		,,_,_,_,		- Annual Control of the Control of t
and the second s	00.000 e mane x 00 ma 00 x 0 00 e 0 x 0 1 x 0 m x 0 x 0 x 0 x 0 x 0 x 0 x 0 x 0 x			anay mayyayayyyyyyyyyyyyyyyyyyyyyyyyyyyy
propagation and management of the section of the se			Control of the Contro	et was to make de la celeta de la 1885 de l'arreste de la servicio de la companya de la celeta de la companya de la celeta de la companya de la celeta della celeta de la celeta de la celeta de la celeta de la celeta della cele
\$				
	***************************************	- 1811, 1-185,111, 1-181,1119,111,111		
a.a. 1944 a.a. 1944 a. 1944 a. 1949 44 - 1944 44 a. 1944			***************************************	омення в наменение в вывыше в поменения поменения поменения в поменения в населения выполнения в населения в н
nanananan (1941). Maranan mananan da manta ta mana Alaman (1941). Mananan mananan mananan mananan mananan manan				
				A STATE OF THE STA
MINORITARY - 1-4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1				
The state of the s				Turkania a kaanna saana kania a makasi saka ka makasi ka
and a state of the			teritoria del como esta esta esta esta esta esta esta esta	
Declaration				
We declare the foregoing particulars	are truë in ever	y restat	***.	/j <sup>aj</sup>
	* . ***	,		Appen .
				And the state of the
- K/2) 9/	4			and a supple from
At 1				and the second s
7(ハノフ 主新会業	× 9)	44	22/1/21	
franklige frankl		(F)		
UKyholder's Signalure/Kais-8 (3) ime	uswers Sighali Alfons	ure(K d∷ ′	791 TE NO! ! SE PUIC, 10 4 8	rhokier) / Daie - Winessey by Reporting Centre - Personnal
	<i>७११ ७</i>	(	C214.40	7 (20 × 0 × 10 × 10 × 10 × 10 × 10 × 10 × 1
*			3	And the second s











