

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 ability
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 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	31/08/2016 16:51
Date Of Accident	30/08/2016 18:30
Exact Location Of Accident	ALONG AYE TOWARDS TUAS
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	XB9737D
Insured/Policyholder	
Name Of Registered Owner	SANTE ACCESS SYSTEM PTE LTD
Co Reg No	199306365G
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-68630345

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	FV517JD2RDEB-11.9 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?	No
If No, Please state action to be taken	Third Party
Vehicle Category	Commercial Vehicle

Insurance Company

Name of Insurance Company	Overseas Assurance Corporation Ltd
Type Of Coverage	Third Party
Fleet Policy	No
Policy Number	2016-V0046339-VCV-R010
Cover Note Number	

Driver

Name of Driver	TAN BOON CHYE
NRIC No	S2658978I
Date Of Birth	05/04/1966
Occupation	Outdoor
Date Of Driving Pass	19/02/1993
Driving Experience	23 Years And 6 Months
Gender	Male
Mobile Number	(Local) +65-91696655
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL

Address
 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- Chain Collision
 Weather Conditions Clear
 Road Surface Dry

Other Information

Was any foreign vehicle involved in this accident? No
 Was any body injured in the Accident? Yes
 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 Nanyang N.p.c
 Police Station Address **ROAD: 2 JURONG WEST AVE 5 , POSTCODE: 649482 , COUNTRY:**
 Singapore
 Police Station Contact **TEL NO: 1800-7929999 - FAX NO:**
 Was notice of intended Prosecution given? No
 If Yes, against whom?

Circumstances of Accident

ON THE ABOVE MENTIONED DATE AND TIME, I WAS DRIVING MY VEHICLE 'A' (XB9737D) ALONG AYE TOWARDS TUAS ON THE LEFT MOST LANE. FRONT VEHICLE 'C' (SJK6797P) SLOWED DOWN, I FOLLOW SUIT. SUDDENLY, I FELT A HUGE IMPACT FROM MY REAR AND PUSHED MY VEHICLE FORWARDS, CAUSING MY VEHICLE COLLIDED ONTO 'C'. WHEN I GET OUT FROM MY VEHICLE, I REALISED VEHICLE 'B' (GBC5496E) HAS HIT ONTO MY REAR. NO ONE WAS INJURED. AS PER ATTACHED POLICE REPORT NO.: T/20160524/2169

Attachment(s)

Are accident photos available for attachment? Yes
 Was there any video captured by Car Camera? No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GBC5496E
 Vehicle Make/Model/Colour
 Details Of Properties
 Name of Driver
 NRIC/Passport Number
 Contact Number
 Address
 Postcode
 Insurance Company Name
 Nature Of Damage
 No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SJK6797P

Vehicle Make/Model/Colour

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Details of Witness

Name

Phone Number

Email Address

DETAILS OF INJURED PERSON 1

Name TAN BOON CHYE

Approximate Age

Injuries Sustain

Injured person in which vehicle? XB9737D

Were seat belts worn? Yes

Was injured conveyed to hospital by ambulance? No

Address

Postcode

SKETCH PLAN

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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.
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.



[Handwritten Signature]
4.50 pm
31/8/16

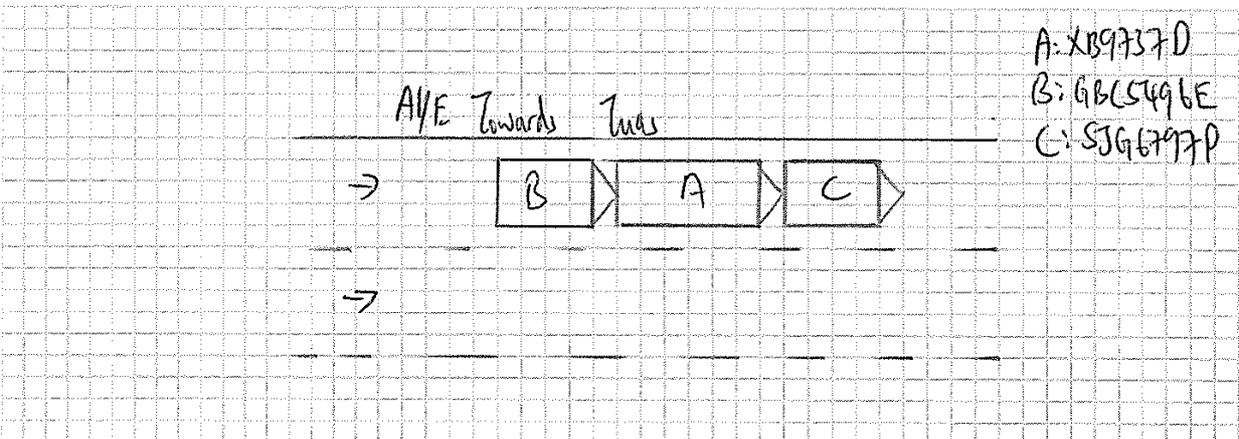
[Handwritten Signature]
Witnessed by Reporting Centre Personnel

Policyholder's Signature / Date & Time

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

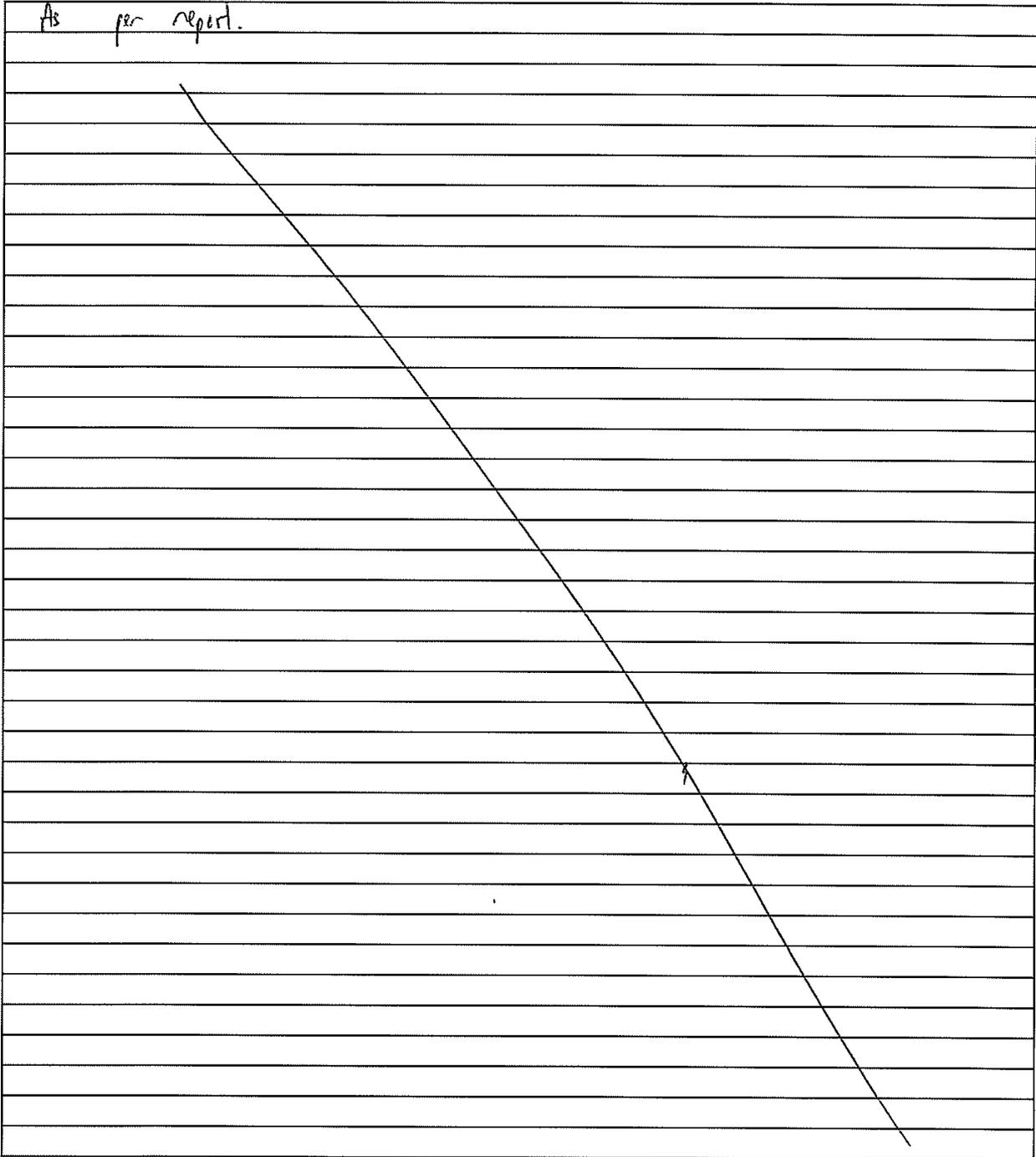
Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

As per report.

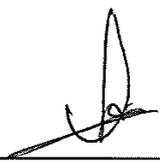


Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

 4.50pm
31/8/16

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

 William CO
Motor Claims Officer
DID : 6804 0037
Fax : 0853 0425
w.mandoso@uolthel...

Witnessed by Reporting Centre Personnel

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S2658978I



Name
TAN BOON CHYE

陳 文 財
Race
CHINESE

Date of Birth **05-04-1966** Sex **M**

Country of Birth
MALAYSIA

S2658978I

REPUBLIC OF SINGAPORE DRIVING LICENCE

S2658978I

TAN BOON CHYE

Issue Date: 05 Apr 1966

Expiry Date: 17 Aug 2011

002462514G

AP0093588



NRIC No. S2658978I



Blood Group **A+** Date of issue **29-11-2001**

APT BLK 627 SENJA ROAD #11-180
SINGAPORE 670627

NRIC No: S2658978I Date: 11/11/2010 No: 6667126

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

		EFFECTIVE DATE
Class 2B	Motorcycles =< 200 cc	08 Jun 1989
Class 3	Motor Cars =< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg	08 Jun 1989
Class 4	*Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg	19 Feb 1993
Class 5	Motor vehicles not constructed to carry any load and the unladen weight > 7250kg	20 Oct 1993



NP 428A



For Customer Service please visit
1 Pickering Street
#01-01 Great Eastern Centre
Tel: (65) 6248 2888 Fax: (65) 6327 3080

Certificate of Insurance

ORIGINAL

Road Transport Act 1987 (Federation of Malaysia)
The Motor Vehicles (Third-Party Risks) Rules, 1959 (Federation of Malaysia)
The Motor Vehicles (Third-Party Risks and Compensation) Act. (Cap.189 of the Revised Edition) (Republic of Singapore)
The Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960. (Republic of Singapore)

FORM M2300

Policy No. : 2016-V0046339-VCV-R010 Risk# : 0001
Policy Type : Commercial Vehicle Cover : Third Party Only

DESCRIPTION OF VEHICLES:
Vehicle Registration : XB9737D
Vehicle Make & Model : MITSUBISHI FV517P2RDEB

Name of Insured : SANTE ACCESS SYSTEM PTE LTD
Period of Insurance : 20-07-2016 (0000HRS) to 19-07-2017

PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE *
Any person who is driving on the Policyholder's order or with their 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.

LIMITATIONS AS TO USE
(1) Use in Connection with the Policyholder's business.
(2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
(3) Use for social, domestic and pleasure purposes.
The policy does not cover :-
(1) Use for racing, pace-making, reliability trial or speed-testing.
(2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.
(3) Use for the carriage of passengers for hire or reward.

Limitations 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.

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)

Signed for and on behalf of the Corporation

Authorised Signature



**SINGAPORE
POLICE FORCE**



T/20160524/2169

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

2 of 3

Report No. T/20160524/2169

CONTINUATION OF REPORT

Brief Details.

On 17/05/2016 at about 1720hrs, I was driving my lorry (Mitsubishi, Green colour, bearing vehicle registration number: XB9737D) along Woodlands Avenue 12 T- Junction of Woodlands Avenue 1. However, the traffic light suddenly turned red, hence I made an emergency brake. As a result, my lorry skidded due to the wet floor, and because of this, the rear of my lorry collided with the taxi travelling on the 4th lane. This is a 4 lanes road, I was driving on the 3rd lane.

At that point of time, no one was injured. No government property was damaged. No traffic police attended also.

The taxi driver is Raj Kecmaran, Blk 740 Woodlands Circle #02-405, HP: 8377 9258. It is a taxi driver from Transcab. The taxi's registration number is SHD5402A.

Vide to TP/IP/26189/2016, I am lodging this NP168 under IO Toh Hoe Sian Jenn, DID: 6547 6185.



**SINGAPORE
POLICE FORCE**



T/20160524/2169

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

3 of 3

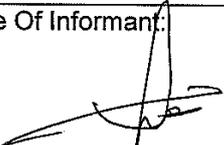
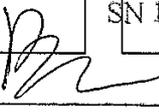
Report No. T/20160524/2169

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 / BENJAMIN TOH 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 24/05/2016 18:43
Officer In Charge Of Case: TP / GIA / Sr Staff Sgt ESTHER CHONG Contact No.: 65476368	Classification Of Case: SN 127
Authentication Stamp NP168 	Signature:  Singapore Police Force

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



GENERAL INSURANCE ASSOCIATION OF SINGAPORE
RECORDS MANAGEMENT CENTRE

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

ADDENDUM

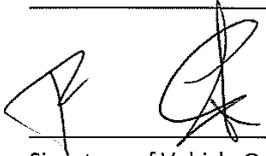
(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : M6E116108175 Vehicle Registration No : XB9737D
 Name(as shown in NRIC): Tan Boon Chye
 (*Vehicle Driver / ~~Vehicle Owner~~) (*) Please delete as appropriate
 NRIC/Passport No : S26589781
 Address : -
 Contact (Tel) : - (H/P) : -
 (Email) : _____
 Date of Accident : 30/08/2016 Time of Accident : 1830 hrs
 Place of Accident : Along AYE Towards Tuas
 Insurance Company : Overseas Assurance Corporation 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:

To attach police report No. : 7/20160524/2069



Signature of Vehicle Owner / Driver

Date: