

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 Submission 15/05/2021 11:41 (SGT)
Date of Accident 07/05/2021 14:17 (SGT)
Exact Location of Accident Woodlands Ave 12, Singapore
Additional Location Information WOODLANDS AVE 12 TOWARDS YISHUN
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number YN5283Y

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner Chlor-Al Chemical Pte Ltd
Company Reg No 197602462D
Email Address enquiry@chlor-al.com.sg
Mobile Phone No (Phone) +65-90604078
Alternative Phone No (Office) +65-62683000

VEHICLE PARTICULARS

Manufacturer UDTrucks
Model PKC8ELNHEP
Variant -
Exact purpose for which vehicle was being used at time of accident Employment
Are you claiming under your own insurance policy for repair to your vehicle? No - Reporting only
Vehicle Category Commercial vehicle
Transmission Manual
CC 10830

INSURANCE COMPANY

Name of Insurance Company QBE Insurance (Singapore) Pte Ltd
Type of Coverage ThirdParty
Fleet Policy No
Policy Number 8-V0010297-MVA-R006
Cover Note Number -

DRIVER

Name of Driver PHANG CHEE YAN
Work Permit No G8033234W

Date Of Birth	18/10/1989
Occupation	Outdoor
Date Of Driving Pass	29/08/2011
Driving experience	9 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90604078
Alt. Phone Number	-
Email Address	YEAN168888@GMAIL.COM
Address	BLK 476C UPPER SERANGO VIEW
Address complement	#04-542
Postcode	533476
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	No Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	AH TAO
Gender	Male

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 7/5/2021 AT 1417HRS, I WAS DRIVING YN5283Y TOWARDS YISHUN FOR DELIVERY GOODS. ALONG WOODLANDS AVE 12, THERE WAS A TAXI SHD289T STOPPED IN FRONT AND I FOLLOW TO STOP. I CONFIRM THAT I DID NOT COLLIDED ON THE TAXI BUT DRIVER OF SHD289T CAME DOWN AND TOOK PHOTO AND ASSUME THAT I HAD COLLIDED ON HIS TAXI. THERE WAS NO DAMAGES AND THERE WAS A DISTANCE BETWEEN BOTH OF OUR VEHICLES.

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	SHD289T
Vehicle Manufacturer	-
Vehicle Model	-

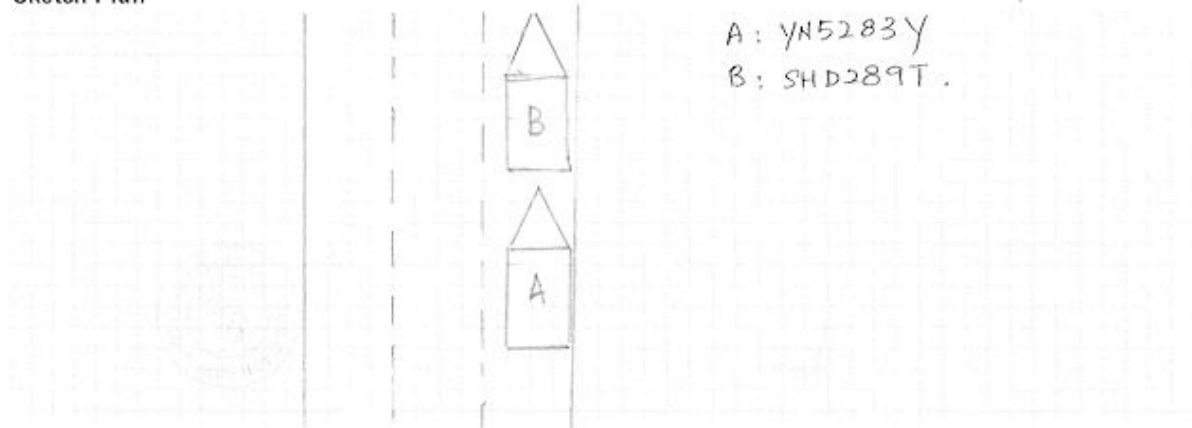
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	NO DAMAGE
Details of property damaged in accident	NO COLLISION
No. Of Passenger (Including Driver)	-

SKETCH PLAN**IMPORTANT NOTICE**

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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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.


 15/5/2021 10:50
 

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

2021年5月7日 (2:17pm)

我駕YN 5183Y 去 Yushun 送貨, 在 woodlands ave 12 有一輛

Taxi 停車, 我也停下, 我確定沒有撞到!

(SHD 289T)

Taxi uncle 下車拍照, 說我撞到他的車!

Taxi 車後面都沒有損壞.

我的 lorry 和 Taxi 還有一段距離

Declaration

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



Witnessed by Reporting Centre Personnel









QBE Insurance (Singapore) Pte Ltd

Part of QBE Insurance Group - Unique Entity No. 188401363C

1 Wallich Street, #35-01 Guoco Tower, Singapore 078881
 Tel: 65-6224 6533 Fax: 65-6533 3270
 GST Registration No.: M200644018
 www.qbe.com/sg

**Certificate of Insurance**

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULE, 1960
 ROAD TRANSPORT ACT, 1987 (MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate No. **8-V0010297-MVA-R006** Account Name **ALG INSURANCE AGENCY PTE LTD** MCI Type **MZ300**

- 1 Index Mark and Registration Number of Vehicle or Chassis No: **YN5283Y**
- 2 Name of Policyholder **CHLOR-AL CHEMICAL PTE LTD**
- 3 Effective date of Commencement of Insurance for the purpose of the Regulations **19/05/2021**
- 4 Date of Expiry **18/05/2022**
- 5 Person or Classes of Person entitled to drive*

(a) 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 the 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

- 6 Limitations as to use*
 - (a) Use in connection with the Policyholder's business.
 - (b) Use for the carriage of passengers (other than for hire or reward)
 - (c) Use for social, domestic and pleasure purposes.
 The Policy does not cover:-
 - (1) Use for hire or reward or 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.
- 7 Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risk 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 the Policy to which this certificate relates is issued in accordance with the provisions of the Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

QBE Insurance (Singapore) Pte Ltd

Authorized Signature

Date of Issue: 03/05/2021