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 instrained 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 07/05/2021 18:07 (SGT) Date of Accident 06/05/2021 18:00 (SGT) Exact Location of Accident Clementi Ave 6, Singapore Additional Location Information TWDS CLEMENTI LOOP Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBG6984K

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner TAN F & L TRADING Company Reg No 53290394C Email Address tantrading69@hotmail.com Mobile Phone No (Phone) +65-93895598 Alternative Phone No +65-93895598

VEHICLE PARTICULARS

Manufacturer

Toyota Model Hiace 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? Yes Vehicle Category Goods vehicle Transmission Auto CC 2982

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number DMCVSWW00081392000 Cover Note Number

DRIVER

Name of Driver KHO SEOW WEE NRIC No. S7239206Z

Date Of Birth 20/10/1972 Occupation Outdoor Date Of Driving Pass 20/10/2018 Driving experience 2 YEARS AND 7 MONTHS Gender Mobile Number (Phone) +65-93855198 Alt. Phone Number Email Address danielkho88@hotmail.com Address blk 457 ang mo kio ave 10 #05-1510 Address complement Postcode 560457 Is the driver the policyholder? Nο If No. Relationship of the Driver with the Insured **Employee** Does Driver Own Other Vehicles? 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 Collision - Head to Rear Weather Conditions Clear Road Surface \/\e_t OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? 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 PASSENGER 1 Name NIL Gender Male DETAILS OF POLICE ACTION Was the accident reported to the police? Police Station Name Ang Mo Kio South Neighbourhood Police Centre Police Station Phone No (Phone) +65-18004519999 Alt. Police Station Phone No (Fax) +65-65535679 Police Station Address 81 Ang Mo Kio Ave 3 Singapore 569929 Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO POLICE REPORT T/20210507/2082. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Nο Was there any audio recorded? No **DETAILS OF OTHER VEHICLE PROPERTY 1**

SHB9999D

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model Vehicle Variant	-
	-
	-
Vehicle Category	Taxi
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	_
Nature Of Damage	_
Details of property damaged in accident	_
No. Of Passenger (Including Driver)	_
5	



中国太平保险 (新加坡)有限公司

CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD

Motor Commercial

MZ300/C

N SN

AN0679A

Cov. Type:C

CERTIFICATE OF INSURANCE

otor Vehicles (Third-Purly Risks and Compensation) Act (Chapter 199) Motor Vehicles (Third-Purly Risks and Compensation) Rules, 1960 Foxed Transport Act, 1967 (Malaysia) Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE No.

DMCVSNW00081392000

Engine No.: 1KD2643582

1. Index Mark and Registration

GBG6084K

Cha. No.: KDH2015024085

Number of Venicle

AUTOSAFE

2. Name of Policy Holder

TAN F&L TRADING

Effective date of the Commencement of Instrumor for the purposes of the Regulations, Ordinators or Enactment

Excess Sect 1. EX ON WINDSCREEN.

\$\$350.00 \$\$100.00

4. Date of Expiry of Insurance

02/10/2021

5. Porsons or Classes of Persons ontitled to erive!

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 Vanide or has been so permitted and is not disqual fied by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations às to use:"

Use in connection with the Policyholder's business.
 (2) Use for the carriage of passangers (other than for hire or reward) in connection with the Policyholder's business.
 (3) Use for social, domestic or pleasure purposes.

Use for hire or reward or racing, pace-making, reliability trial or speed testing.
 Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

HIRE PURCHASE CO.: HL BANK AS HP OWNER

* 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 (Melaysie), 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 Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: ABWIN PTE LTD Authorised Officer

Authorised Signatory

6222 1033

www.sg.entaiping.com

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E) 📆 3 Anson Road #16-00 Springleaf Tower Singapore 079909

O6389-6111

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	/	1					
He declare the forest	New Perticulars.	are true in ev	very respect.			<i>\(\rangle \)</i>	
Are declare the forest Reg. No. 53290394C)	are true in ev	very respect.			Ms	
DECLARATION Are declare the form of the control of)	are true in ex	very respect.			M	

GIARMC SketchPlanForm_V3

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 5. Any false reporting may be referred to the Police for investigation.
- 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.
- 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:
 - 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, involces, 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:
 - 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

TAN F & (ii) for FRIA DENIS requirements under any regulations, laws or court orders.

(Reg. No. 53290394C) 10 Kaki Bukit Ave 4, #04-66 Premier@Kaki Bukit, Singapore 415874. Tel: 9389 5598

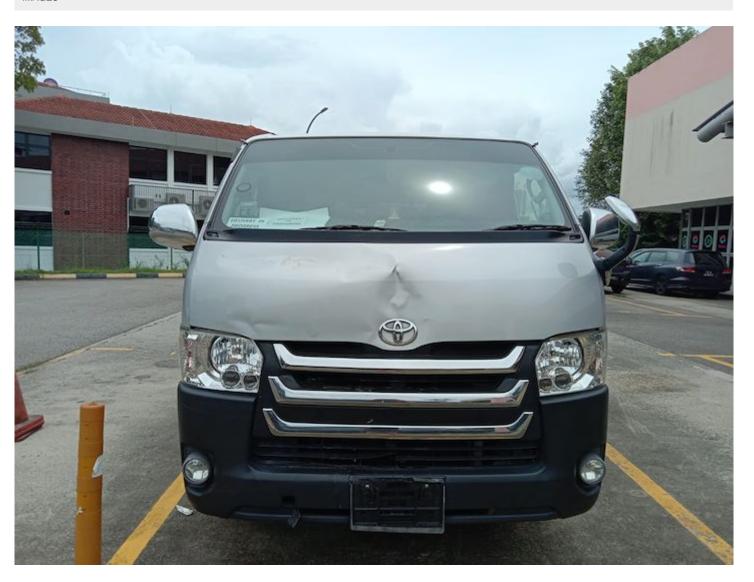
> Policyholder's Signature Date & Time:

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

Reporting Centre Personnel's Signature

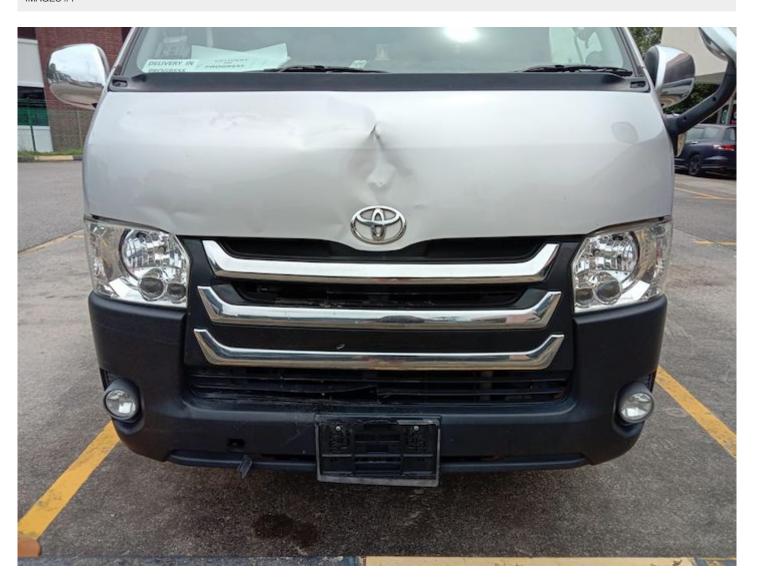
Name: NRIC/FIN No.:

GIARMC SkatchPlanForm_V3





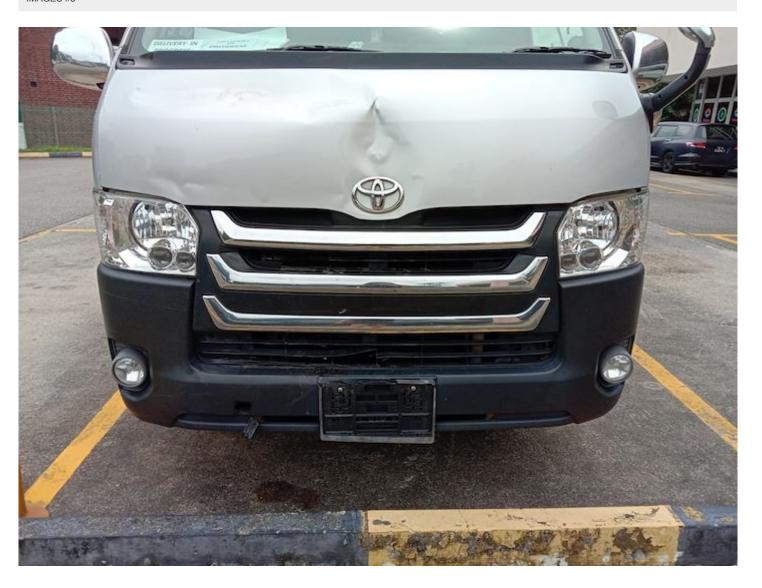
















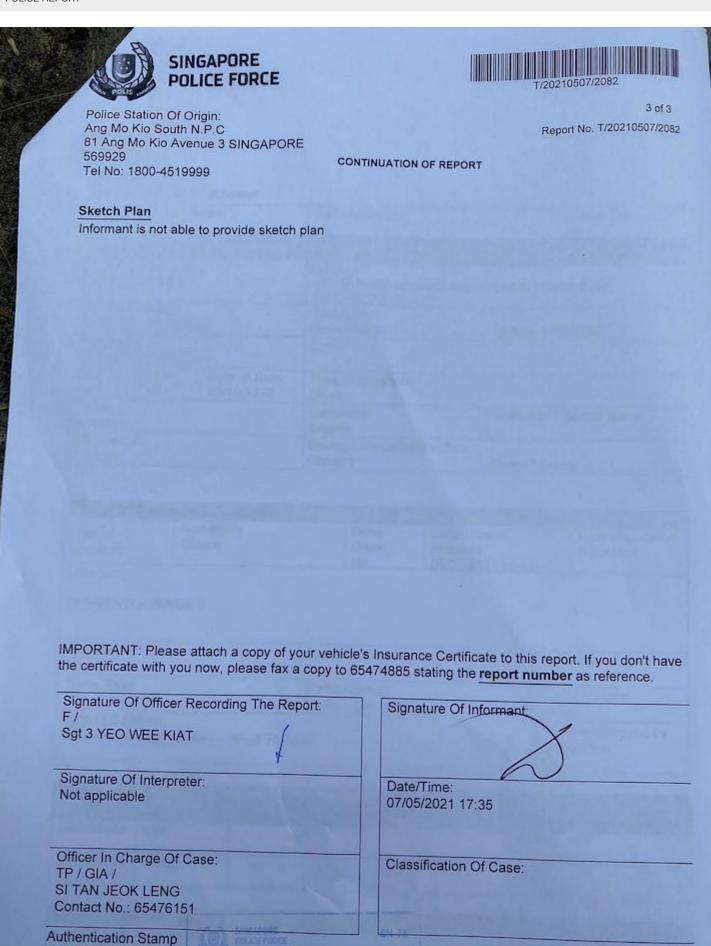












NP168



SINGAPORE POLICE FORCE

Police Station Of Origin: Ang Mo Kio South N.P.C 81 Ang Mo Kio Avenue 3 SINGAPORE 569929

Tel No: 1800-4519999



2 of 3

Report No. T/20210507/2082

CONTINUATION OF REPORT

Driver	SHEET WILLIAM STATE	No. of Concession, Name of Street, or other Persons, Name of Street, or ot	GENERAL PROPERTY.	TEN COL	Majisi	国际工程等区别产品的
Name	KHO SEOW WEE			ID No.		S7239206Z
Related Vehicle	GBG6984K (Van)			Conta	ct No.	93855198
Hospital/Clinic	NIL			Class Driving Licent Expiry	g ce &	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of		NIL	
Driver				NO E		
Name	Tan Kin Hock			ID No		S6800146C
Related Vehicle	SHB9999D (TAXI)			Conta	ct No.	NIL
Hospital/Clinic	NIL		Class Drivin Licent Expiry	g	Class: NIL Date of Expiry: NIL	
Date Treatment	NIL	-	Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of	Injury	NIL	

Brief Details.

On 07/05/2021 at about 1800hrs, I was driving my vehicle GBG6984K along Clementi Avenue 6 towards PIE. At the junction of Clementi Loop, a taxi SHB9999D in front of my vehicle jammed brake as he wanted to avoid the camera beside the traffic light although his taxi had passed the stopped line at the junction. I then rear ended his taxi but police and ambulance were not called in. We exchanged particulars and moved off. My vehicle has an in-car camera and had captured the incident.

I am lodging this report as instructed by my insurance company for their action as I believed the taxi driver had jammed his brake on purpose resulting in the collision.





1 of 3

Report No. T/20210507/2082

Police Station Of Origin: Ang Mo Kio South N.P.C 81 Ang Mo Kio Avenue 3 SINGAPORE 569929

Tel No: 1800-4519999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:	Vide Report No.:	Station Diary No.:
07/05/2021 17:35		76

07/05/20	21 17.55				
Informa	nt's Particu	ulars			
Name of Informant: KHO SEOW WEE			Address: APT BLK 457 ANG MO KIO A SINGAPORE 560457	VENUE 10 #05-1510	
ID Type /	/ ID No.:) / S723920	06Z	Contact No.: Home/Office:	Mobile: 93855198	
Nationality: SINGAPORE CITIZEN Sex: Age: Date of Birth: Male 48 20/10/1972		EN	Email:		
			Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: DRIVER			Driving Licence Information: Class: 3	Date of Expiry:	

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 06/05/2021 18:00	Type of Location: T-Junction
CLEMENTI A Weather:	VENUE 6	Road Surface:	F	Road Speed Limit:
		Wet		
Cloudy				
Cloudy Traffic Flow:		Traffic Control: Traffic Light - World		Fraffic Volume: Heavy

Details of V	ehicle Invo	lved				
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
GBG6984K	Van				Slightly Damaged	1
SHB9999D	TAXI				Slightly Damaged	1

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