

# 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 ..... 26/06/2021 13:02 (SGT)  
Date of Accident ..... 25/06/2021 09:05 (SGT)  
Exact Location of Accident ..... BKE, Singapore  
Additional Location Information ..... Towards PIE  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... YL6210L

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... Tungsan Food Industries Pte Ltd  
Company Reg No ..... 199002472E  
Email Address ..... sales@tungsanfood.com  
Mobile Phone No ..... (Phone) +65-62576897  
Alternative Phone No ..... (Office) +65-62576897

### VEHICLE PARTICULARS

Manufacturer ..... Mitsubishi  
Model ..... Fb511b0srdea  
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 ..... 2835

### INSURANCE COMPANY

Name of Insurance Company ..... China Taiping Insurance (Singapore) Pte. Ltd.  
Type of Coverage ..... ThirdPartyFireTheft  
Fleet Policy ..... No  
Policy Number ..... DMCVSNW00013602106  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... Lai Huey Siang  
Passport No/FIN ..... G8180781M

Date Of Birth .....	06/01/1978
Occupation .....	Outdoor
Date Of Driving Pass .....	05/10/2013
Driving experience .....	7 YEARS AND 8 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-93628087
Alt. Phone Number .....	-
Email Address .....	sales@tungsanfood.com
Address .....	428 Woodlands Street 41 #07-240
Address complement .....	-
Postcode .....	730428
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 .....	Chain Collision
Weather Conditions .....	After rain
Road Surface .....	Wet

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? .....	No
Number of vehicles involved in the accident .....	3
Was anybody injured in the Accident? .....	No
Was any injured conveyed to hospital by ambulance? .....	-
Was any other vehicle or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	1
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? .....	Yes
Police Station Name .....	Traffic Police
Police Station Phone No .....	(Phone) +65-65470000
Alt. Police Station Phone No .....	(Fax) +65-65474900
Police Station Address .....	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

Please refer to sketch plan.

#### 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 .....	GBG368D
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle

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) .....	-

## DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number .....	GBE1861A
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle
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) .....	-

26-06-21;10:54 ;  
26-06-21;10:47 ;T & B Motor Repairs Services PTUNGSAN - MAY SAN ;+65 6554 2640

# 1/ 2  
# 1/ 1

SKETCH PLAN

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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 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/are 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 located outside of Singapore, for one or more of the above Purposes.

**TUNGSAN FOOD INDUSTRIES PTE LTD**  
唐山食品工业私人有限公司  
56 Senoko Drive,  
Singapore 758235  
Tel: 6257 6897 (10 lines) Fax: 6257 8634  
www.tungsanfood.com

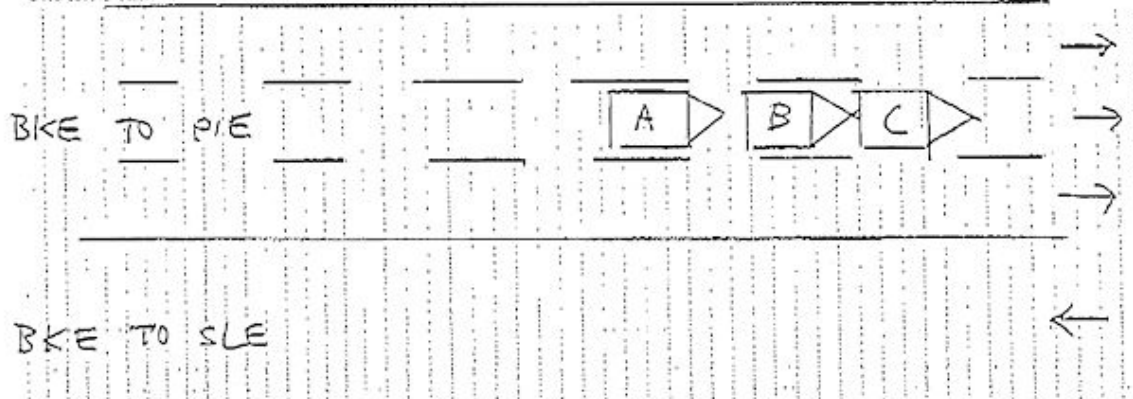
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Angie Soh

Sketch Plan



A: YLG210L  
B: GBG368D  
C: GBE1261A

TIME: 0905HR  
DATE: 25/06/2010

26-06-21;10:54 ;  
 26-06-21;10:48 ; T & B Motor Repairs Services PTUNGSAN - MAY SAN ; +65 6554 2640

# 2/ 2  
 #. 1/ 1

## Describe Circumstances of the Accident

ON 0905HR 25/06/2021 I WAS DRIVING  
 YL6210L ALONG BKE TOWARD PIE. THE VEHICLE  
 INFRONT OF ME GBG 368D SUDDENLY JAM BRAKE,  
 I COULD NOT STOP IN TIME AND HIT ONTO THE FRONT  
 VEHICLE. WHEN I CAME DOWN TO CHECK, I REALISED  
 I AM INVOLVED IN A CHAIN ACCIDENT. THERE IS  
 ANOTHER VEHICLE GDE 1861A INVOLVED IN THE  
 ACCIDENT.


## Declaration

We declare the above is a true and correct report.

 26/6/21  
**TUNGSAN FOOD INDUSTRIES PTE LTD**  
 唐山食品工业私人有限公司  
 56 Senoko Drive  
 Singapore 758235  
 Tel: 6257 6897 (10 lines) Fax: 6257 8634  
 www.tungsanfood.com

Policyholder's Signature / Date &  
 Time

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

  
 Witnessed by Reporting Control  
 Personnel

Angie Soh



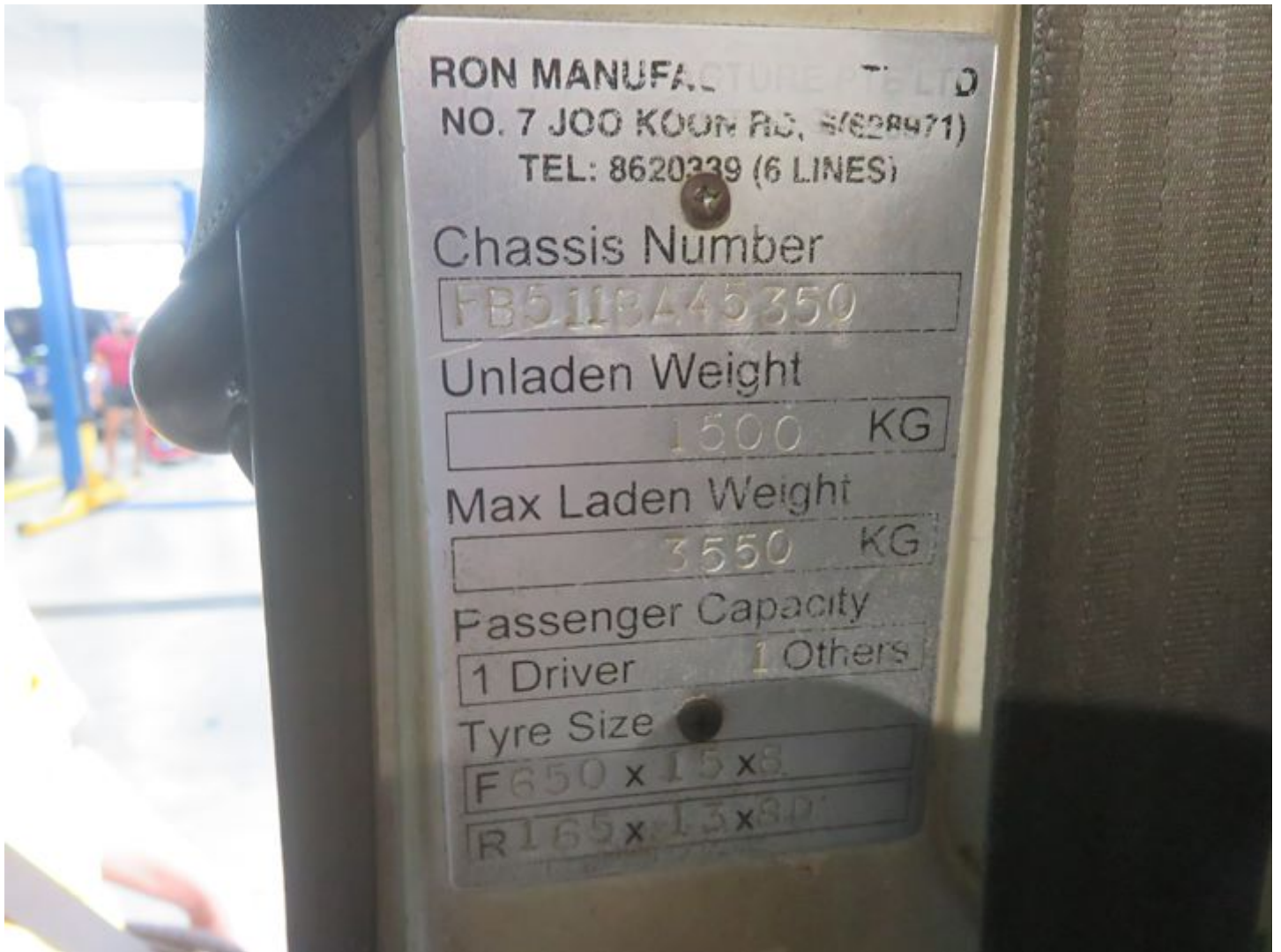


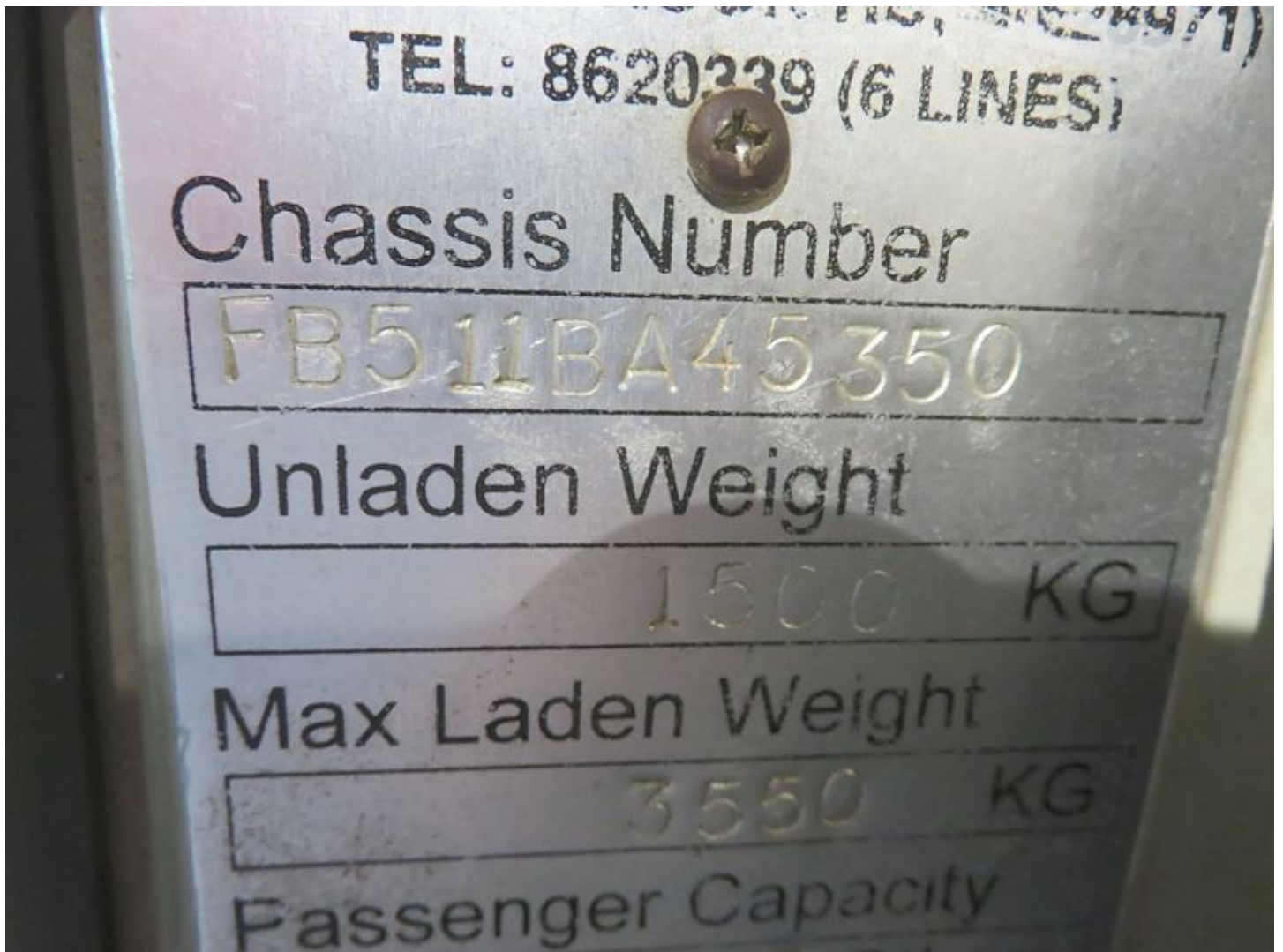














# **SINGAPORE POLICE FORCE** **ACKNOWLEDGEMENT SLIP**

Ref: Report No: P/2010625/0000

I, Off Aunon  
(Recipient's Name, Contact No. / NRIC or Passport No. / Rank and No.)

of TP HQ  
(Address / Police Station / NPC / NPP)

hereby acknowledge receipt of the below mentioned items of:

- 1 one memory card 32GB "Tung"
- 2 \_\_\_\_\_
- 3 \_\_\_\_\_
- 4 \_\_\_\_\_
- 5 \_\_\_\_\_
- 6 \_\_\_\_\_
- 7 \_\_\_\_\_
- 8 \_\_\_\_\_
- 9 \_\_\_\_\_
- 10 \_\_\_\_\_

from Lai Hui Sang / 68180781 M  
(Name, NRIC or Passport No. / Rank and No.)

of 40 56 Senoko Drive (756775)  
(Address / Police Station / NPC / NPP)

on 25/06/21 at 10 20 hrs  
(Date) (Time)

Witnessed by / \* Handed over by:

(\* Delete if applicable)

[Signature]  
(Signature)

(Name, NRIC or Passport No. / Rank and No.)

Received by:

[Signature]  
Signature

(Name, Contact No. / NRIC or Passport No. / Rank and No.)

Other Remarks: TL 62102



TRAFFIC INVESTIGATION BRANCH  
TRAFFIC POLICE  
10 UBI AVENUE 3  
SINGAPORE 408865  
Fax: 65474749

### CASE CARD

REPORT NO.: F/201106/7/0060  
Traffic Accident along HCE (P15) D-ELM HP 26  
involving vehicles GAE 1861A, GAG 368D, YL62102  
on \_\_\_\_\_ at about \_\_\_\_\_ am/pm.

With reference to the above, you are advised to lodge an accident report online via the SPF Electronic Police Centre website (<http://www.police.gov.sg/epc>) within 24 hours.

You are required to be present at Traffic Police on \_\_\_\_\_  
at about \_\_\_\_\_ am/pm to see the Investigation Officer to assist in the investigation  
to the traffic accident.

2. Please bring along your :-

- a) Identity card/Passport/Work Permit
- b) Driving Licence/Vocational Licence
- c) Vehicle Insurance/Medical Certificate
- d) Any video footage
- e) Any other relevant documents/Witnesses (if any)

3. If you are unable to keep to the appointment, kindly contact the Investigation Officer:

Name: JO Wei Li

Contact: 6547 6344

Alternate contact:  
IBCC: 65476391

Email: [SPF\\_YP\\_Invest\\_Branch@spf.gov.sg](mailto:SPF_YP_Invest_Branch@spf.gov.sg)





中国太平保险(新加坡)有限公司  
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Commercial

MZ300/C

R SN

AN0388A

Cov. Type:F

**CERTIFICATE OF INSURANCE**  
Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)  
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960  
Road Transport Act, 1987 (Malaysia)  
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE No.

DMCVSNW00013602106

Engine No.: 4M40GK6321

Cha. No.: F8511BA45350

1. Index Mark and Registration  
Number of Vehicle

YL6210L

2. Name of Policy Holder

TUNGSA FOOD INDUSTRIES PTE LTD

3. Effective date of the Commencement of  
Insurance for the purposes of the Regulations,  
Ordinance or Enactment24/02/2021  
(00:00:00)

4. Date of Expiry of Insurance

23/02/2022

5. 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.

6. 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 or pleasure purposes.

The Policy does not cover

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

\* 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.

**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:

Authorised Officer

Authorised Signatory

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

☎ 6389 6111

☎ 6222 1033

🌐 www.sg.cntaiping.com