

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 21/07/2021 11:59 (SGT)
Date of Accident 10/07/2021 04:40 (SGT)
Exact Location of Accident Bukit Batok, Singapore
Additional Location Information U6 (SURFACE CARPARK GANTRY)
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number YQ1075S

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner UNI-TAT ICE & MARKETING PTE LTD
Company Reg No -
Email Address CHIAKC@ICEMAN.COM.SG
Mobile Phone No (Phone) +65-67448484
Alternative Phone No +65-67448484

VEHICLE PARTICULARS

Manufacturer Hino
Model XZU700R
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 4009

INSURANCE COMPANY

Name of Insurance Company MSIG Insurance (Singapore) Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number B 400000964 MKF
Cover Note Number -

DRIVER

Name of Driver WANG RUI
Work Permit No GXXXX352Q

Date Of Birth	02/01/1980
Occupation	Outdoor
Date Of Driving Pass	28/04/2014
Driving experience	7 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90394287
Alt. Phone Number	-
Email Address	CHIAKC@ICEMAN.COM.SG
Address	51 UBI AVE 1 #01-26
Address complement	-
Postcode	408933
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 Property
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	1
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO STATEMENT

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	-
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	NA / Unknown
Name of Driver	-
Contact Number	-
Address	-
Address complement	-

Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	GANTRY
No. Of Passenger (Including Driver)	-

Describe Circumstances of the Accident

Our Vehicle YQ10755 was making the Delivery so early at 04 45 am at Bukit Batok (16 cpts) (Cupfruit C Bkt 150/153, Bukit Batok Street 1)

When our Driver Wong Rui completed his Delivery, he wanted to exit the carpark, there was a hump ~~in~~ behind the Exit Barrier.

The Driver reversed his engine and the side mirror Assembly caught in the Barrier and slight damage to the Barrier.

We did not report the Accident Case immediately within 24 hrs due to the other party wanted private settlement.

We communicated by email and phone and today, 19/7/2021, the other party called and wanted compensation of more than \$1000 without any quotation and receipt.

We cannot agree to their demand as we required official receipt for the repair.

We also suggested to send our own contractors to repair the Barrier at our cost but the other party reply No!

Declaration

I/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

Witnessed by Reporting Centre Personnel

SKETCH PLAN

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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' 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.



Policyholder's Signature / Date & Time

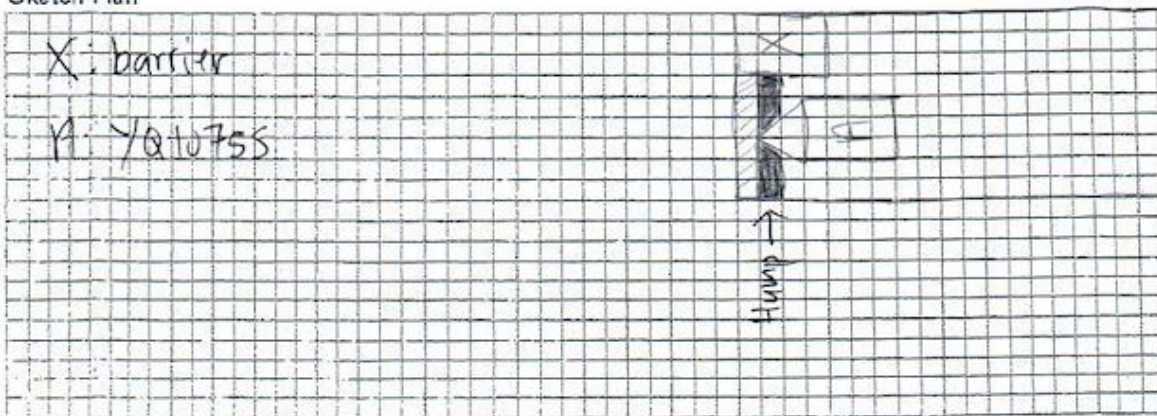
[Signature]

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

[Signature]

Witnessed by Reporting Centre Personnel

Sketch Plan



bukit batok ub carpark



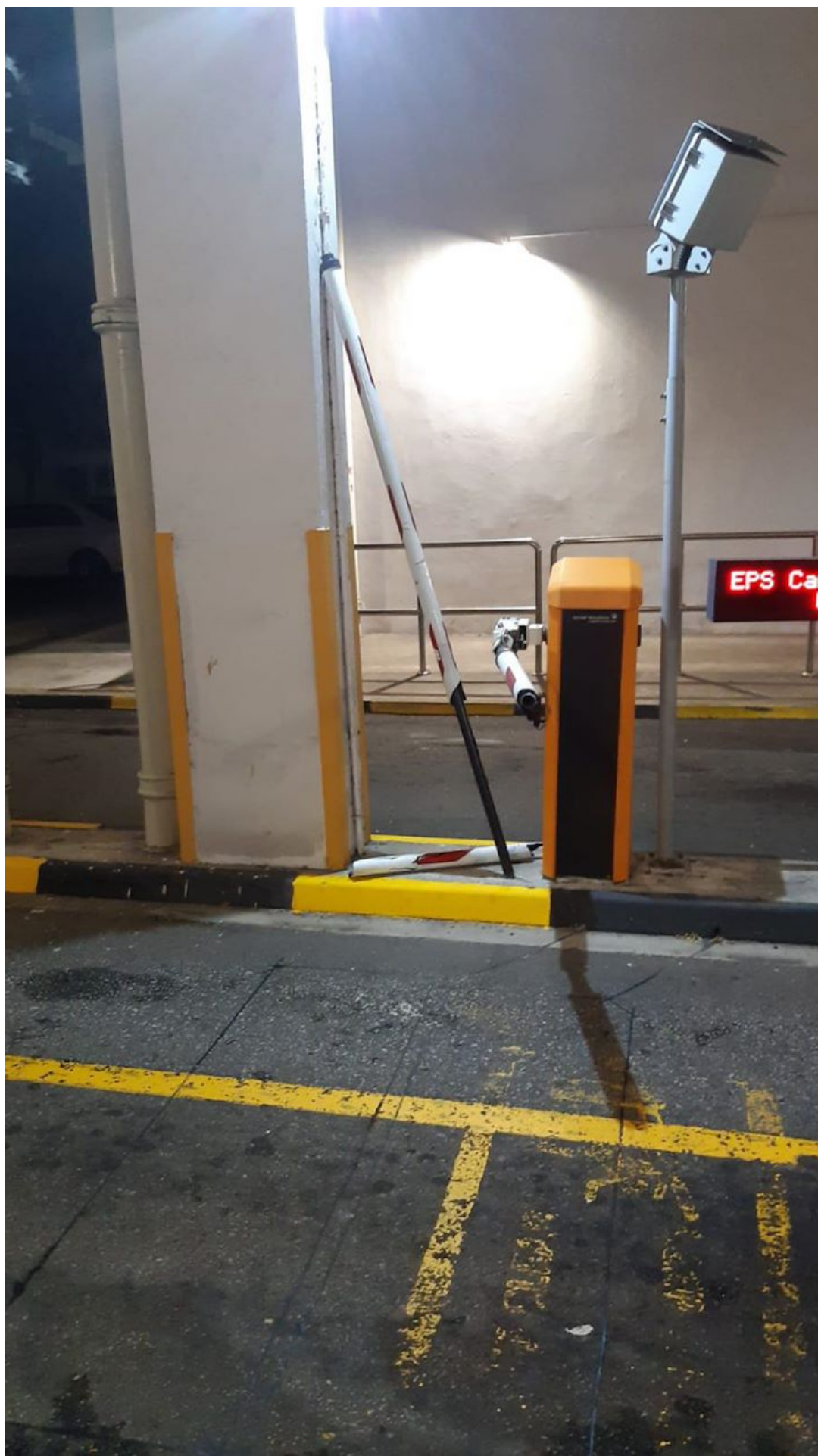












**Car Park No:**

U6 (Surface Car Park)

Address:

Blk 150/158 Bukit Batok Street 11

Short-Term:

Whole day

Free Parking:

Sundays & Public Holidays from 1:00pm - 10:30pm

Night Parking:

Yes

Parking System:

Electronic Parking



y Car Park(s):

319 m

