

# 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 ..... 27/08/2021 13:00 (SGT)  
Date of Accident ..... 26/08/2021 15:10 (SGT)  
Exact Location of Accident ..... CTE, Singapore  
Additional Location Information ..... TUNNEL TOWARDS ANG MO KIO  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... GBG6063T

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... FVWARD BADMINTON CENTRE P/L  
Company Reg No ..... 2XXXXX997E  
Email Address ..... fward88@yahoo.com.sg  
Mobile Phone No ..... (Phone) +65-91881711  
Alternative Phone No ..... +65-91881711

### VEHICLE PARTICULARS

Manufacturer ..... Fiat  
Model ..... Fiorino  
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 ..... 1248

### INSURANCE COMPANY

Name of Insurance Company ..... China Taiping Insurance (Singapore) Pte. Ltd.  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... DMCVSNW00081132000  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... WELLY TJIA BENG LEE  
NRIC No ..... SXXXX550H

|  |                                  |
|--|----------------------------------|
| Date Of Birth .....  | 31/01/1959                       |
| Occupation .....   | Outdoor                          |
| Date Of Driving Pass .....   | 24/04/1981                       |
| Driving experience .....   | 40 YEARS AND 4 MONTHS            |
| Gender .....   | Male                             |
| Mobile Number .....  | (Phone) +65-91881711             |
| Alt. Phone Number .....  | -                                |
| Email Address .....  | fward88@yahoo.com.sg             |
| Address .....  | BLK 126 BUKIT MERAH VIEW #09-370 |
| Address complement .....   | -                                |
| Postcode .....   | 151126                           |
| 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 .....   | Collision - Head to Rear |
| Weather Conditions ..... | Raining                  |
| Road Surface .....       | Wet                      |

#### 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 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

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 ..... | SMU5040L             |
| Vehicle Manufacturer .....        | Toyota               |
| Vehicle Model .....               | Vios                 |
| Vehicle Variant .....             | -                    |
| Vehicle Colour .....              | -                    |
| Vehicle Category .....            | Private car          |
| Name of Driver .....              | MS LIEW HUNG TZE     |
| NRIC No .....                     | SXXXX196C            |
| Contact Number .....              | (Phone) +65-97201578 |
| Address .....                     | -                    |

|   |   |
|---|---|
| Address complement .....                      | - |
| Postcode .....                                | - |
| Insurance Company Name .....                  | - |
| Nature Of Damage .....                        | - |
| Details of property damaged in accident ..... | - |
| No. Of Passenger (Including Driver) .....     | 1 |

**SKETCH PLAN****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 willful 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. 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/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.

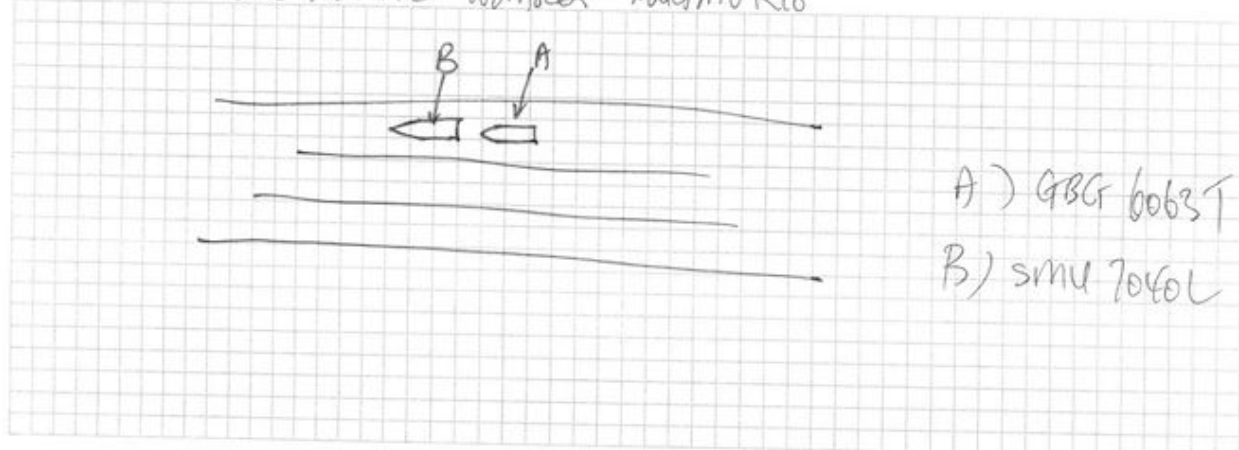
Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date & Time 12-10

Witnessed by Reporting Centre Personnel

Sketch Plan

CTH TUNJAL TONABOR AUGMO KIO



## Describe Circumstances of the Accident

I was driving towards AMK through CTZ Tunnel. At about 3.10pm  
 It was raining  
 At about 5km Mark, the car in front of car B brakes.  
 Car B brakes. I too brake, but it just skidded.  
 With the screeching sound, unfortunately was not able  
 to avoid the collision.

## 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































## INFORMATION RESOURCES

WHILST EVERY ENDEAVOR IS MADE TO ENSURE THAT INFORMATION PROVIDED IS UPDATED AND CORRECT. THE AUTHORITY DISCLAIMS ANY LIABILITY FOR ANY DAMAGE OR LOSS THAT MAY BE CAUSED AS A RESULT OF ANY ERROR OR OMISSION.

Business Profile (Company) of FVWARD BADMINTON CENTRE PTE. LTD.  
(200513997E)

Date: 30/05/2021

The Following Are The Brief Particulars of :

UEN : 200513997E  
 Company Name : FVWARD BADMINTON CENTRE PTE. LTD.  
 Former Name if any :  
 Incorporation Date : 07/10/2005  
 Company Type : EXEMPT PRIVATE COMPANY LIMITED BY SHARES  
 Status : Live Company  
 Status Date : 07/10/2005

## Principal Activities

Activities (I) : SPORTS AND RECREATION INSTRUCTION (85410)  
 Description : BADMINTON RELATED ACTIVITIES AND EQUIPMENT  
 Activities (II) : WHOLESALE TRADE OF A VARIETY OF GOODS WITHOUT A DOMINANT PRODUCT (46900)  
 Description :

## Capital

| Issued Share Capital<br>(AMOUNT) | Number of Shares * | Currency           | Share Type |
|----------------------------------|--------------------|--------------------|------------|
| 4                                | 4                  | SINGAPORE, DOLLARS | ORDINARY   |

\* Number of Shares includes number of Treasury Shares

| Paid-Up Capital<br>(AMOUNT) | Number of Shares | Currency           | Share Type |
|-----------------------------|------------------|--------------------|------------|
| 4                           |                  | SINGAPORE, DOLLARS | ORDINARY   |

COMPANY HAS THE FOLLOWING ORDINARY SHARES HELD AS TREASURY SHARES

| Number Of Shares | Currency |
|------------------|----------|
|------------------|----------|

Authentication No. : T21396948D

Page 1 of 3



## INFORMATION RESOURCES

WHILST EVERY ENDEAVOR IS MADE TO ENSURE THAT INFORMATION PROVIDED IS UPDATED AND CORRECT. THE AUTHORITY DISCLAIMS ANY LIABILITY FOR ANY DAMAGE OR LOSS THAT MAY BE CAUSED AS A RESULT OF ANY ERROR OR OMISSION.

Business Profile (Company) of FVWARD BADMINTON CENTRE PTE. LTD.  
(200513997E)

Date: 30/05/2021

|                           |   |
|---------------------------|---|
| Registered Office Address | 126 BUKIT MERAH VIEW<br>#09-370<br>SINGAPORE (151126) |
| Date of Address           | 02/01/2009  |
| Date of Last AGM          | 25/05/2021  |
| Date of Last AR           | 29/05/2021  |
| FYE As At Date of Last AR | 31/12/2020  |

## Audit Firms

## NAME

## Charges

| Charge No. | Date Registered | Currency | Amount Secured | Chargee(s) |
|------------|-----------------|----------|----------------|------------|
|------------|-----------------|----------|----------------|------------|

## Officers/Authorised Representative(s)

| Name  | ID        | Nationality/Citizenship | Source of Address | Date of Appointment |
|---|-----------|-------------------------|-------------------|---------------------|
| Address   |           | Position Held           |                   |                     |
| JESCENE CHENG SOON YEE  | S7681573I | SINGAPORE CITIZEN       | OSCARS            | 07/10/2005          |
| 126 BUKIT MERAH VIEW<br>#09-370<br>SINGAPORE (151126)                 |           | Director                |                   |                     |
| CHEW KOK YEW  | A40984477 | MALAYSIAN               | ACRA              | 01/09/2020          |
| 31 JALAN SAMARINDA 6, TAMAN SATU<br>KRUBONG<br>75260 MELAKA, MALAYSIA |           | Chief Executive Officer |                   |                     |
| WELLY TJIA BENG LEE   | S2175550H | SINGAPORE CITIZEN       | ACRA              | 02/01/2009          |
| 126 BUKIT MERAH VIEW<br>#09-370<br>SINGAPORE (151126)                 |           | Secretary               |                   |                     |

## Shareholder(s)

| Name                     | ID        | Nationality/Citizenship                        | Source of Address | Address Changed |
|--------------------------|-----------|--|-------------------|-----------------|
| Address                  |           | Place of Incorporation/<br>Origin/Registration |                   |                 |
| 1 JESCENE CHENG SOON YEE | S7681573I | SINGAPORE CITIZEN                              | OSCARS            | 26/04/2019      |

Authentication No. : T21396948D

Page 2 of 3

## INFORMATION RESOURCES

WHILST EVERY ENDEAVOR IS MADE TO ENSURE THAT INFORMATION PROVIDED IS UPDATED AND CORRECT. THE AUTHORITY DISCLAIMS ANY LIABILITY FOR ANY DAMAGE OR LOSS THAT MAY BE CAUSED AS A RESULT OF ANY ERROR OR OMISSION.

Business Profile (Company) of FVWARD BADMINTON CENTRE PTE. LTD.  
(200513997E)

Date: 30/05/2021

## Shareholder(s)

| Name  | ID                 | Nationality/Citizenship<br>Place of incorporation/<br>Origin/Registration | Source of<br>Address | Address Changed |
|---|--------------------|---|----------------------|-----------------|
| Address   |                    |   |                      |                 |
| 126 BUKIT MERAH VIEW<br>#09-370<br>SINGAPORE (151126) |                    |   |                      |                 |
| Ordinary(Number)                                      | Currency           |   |                      |                 |
| 4   | SINGAPORE, DOLLARS |   |                      |                 |

## Abbreviation

UL - Local Entity not registered with ACRA

UF - Foreign Entity not registered with ACRA

AR - Annual Return

AGM - Annual General Meeting

FS - Financial Statements

FYE - Financial Year End

OSCARS - One Stop Change of Address Reporting Service by Immigration & Checkpoint Authority.

## Note :

- The information contained in this product is collated from lodgements filed with ACRA, and/or information collected by other government sources.
- The list of officers for this entity is available for online authentication within 30 days from the date of purchase of this Business Profile. Please scan the QR code available on the last page of this profile to access the authentication page. For more information, please visit [www.acra.gov.sg](http://www.acra.gov.sg).

FOR REGISTRAR OF COMPANIES AND BUSINESS NAMES  
SINGAPORE

RECEIPT NO. : ACRA210529070938 (Free Business Profile by ACRA)

DATE : 30/05/2021

This is computer generated. Hence no signature required.



Authentication No. : T21396948D

Page 3 of 3