SA1C219K000A / Auto Insure Pte Ltd [608586] ENTRY DATE & TIME: 20/09/2021 18:47 (SGT) SUBMITTED BY: LIM WEI LING VERSION: 1 (20/09/2021 18:47 (SGT))

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 20/09/2021 18:47 (SGT) Date of Accident 15/09/2021 08:30 (SGT) Exact Location of Accident Upper Bukit Timah Rd, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number **GBA3111P**

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner GARLAND CONSTRUCTION COMPANY Company Reg No 30275700K **Email Address** SHS.GARLAND@GMAIL.COM Mobile Phone No (Phone) +65-92724028 Alternative Phone No +65-92724028

VEHICLE PARTICULARS

Manufacturer

Toyota Model Dyna 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? No - Reporting only Vehicle Category Commercial vehicle Transmission Manual CC 2982

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Type of Coverage ThirdPartyFireTheft Fleet Policy Policy Number DMCVSNW00056332103 Cover Note Number

DRIVER

Name of Driver SOON HUA SAN DANIEL NRIC No. S0022178C

Date Of Birth 22/12/1954 Occupation Outdoor Date Of Driving Pass 19/06/1975 Driving experience 46 YEARS AND 3 MONTHS Gender Mobile Number (Phone) +65-92724028 Alt. Phone Number Email Address SHS.GARLAND@GMAIL.COM Address 38 JALAN SIAP Address complement Postcode S678565 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 Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? Nο Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) 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? Nο Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT I WAS DRIVING ALONG BUKIT TIMAH ROAD WHEN VEHICLE B (SLZ9577P) INFRONT OF ME STOPPED. I COULD NOT STOP IN TIME AND HIT ONTO HIS REAR 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 SLZ9577P Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Private car

Address

Name of Driver
Contact Number

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

SKETCH PLAN

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- 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.
- 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
- 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 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)
 - 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.
- (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:
 - (i) 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
 - (ii) for complying with requirements under any regulations, laws or court orders.

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 SketchPlanForm_V3

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	ANCES OF THE ACCIDENT	
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(SUZ9S77P	I was the chance I sail and	will b
time and	hit outo his rear.	stop in
ADATION		
	Satticulars are true in average.	
declare the foregoing p	particulars are true in every respect.	
	particulars are true in every respect.	
(d) (S)		
declare the foregoing p	Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's	Signature

NRIC/FIN No.:

GIARMC SketchPlanForm_V3



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

Motor Commercial

MZ300/C

CERTIFICATE OF INSURANCE

R SN AN0646A

Cov. Type:F

CERTIFICATE No.

DMCVSNW00056332103

Engine No.: 1KD1634272 Cha. No.:/TFAT35Y503000870

1. Index Mark and Registration Number of Vehicle

GBA)111P

2. Name of Policy Holder

GARLAND CONSTRUCTION COMPANY

4. Date of Expery of Insurance

16/05/2022

Persons or Classes of Femores exhibited to strive*
 Any person who is deving on the Pullcyholder's order or with their permission.

Provided that the person driving is permitted in accordance with the licensing or other lines 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.

- (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 time or reward or racing, pace-making, reliability trial or speed teating. (2) Use whilst drawing a trailer except the towing of any one dissbled mechanically propelled vehicle.

*Limitations rundered inoperative by Section 8 of the Motor Yehrices (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Malaysis), are not to be lockeded under these beadings.

I/We hereby Certify that the policy to which this Certificate relates is assued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road

Please ses roverse

For CHINA TASPING INSURANCE (BIR GAPORE) PTE. LTD.

Issued By: NET LINK COMMERCIAL PTE LTD

Authorised Officer

Q6389 6111

@6222 T033

@www.sg.cntaiping.com

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E) 脅 3 Anson Road #16-00 Springleal Tower Singapore 0.79909

















