

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 15/09/2021 11:43 (SGT)
Date of Accident 13/09/2021 02:00 (SGT)
Exact Location of Accident 36 Pioneer Sector 2, Singapore 628391
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number XD98M

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner HILTOP MACHINERY PTE LTD
Company Reg No 1XXXXX389C
Email Address TPT@HILTOP.SG
Mobile Phone No (Phone) +65-63651481
Alternative Phone No (Office) +65-63651481

VEHICLE PARTICULARS

Manufacturer Isuzu
Model Cyz52k
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? Yes
Vehicle Category Commercial vehicle
Transmission Manual
CC 15681

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DMCVSNW00114112000
Cover Note Number -

DRIVER

Name of Driver GOH LIAN PIO
NRIC No SXXXX690H

Date Of Birth	08/06/1986
Occupation	Outdoor
Date Of Driving Pass	13/09/2011
Driving experience	10 YEARS
Gender	Male
Mobile Number	(Phone) +65-90725920
Alt. Phone Number	-
Email Address	TPT@HILTOP.SG
Address	494E TAMPINES STREET 43 #06-542
Address complement	-
Postcode	525494
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	Fire, explosion or lightning
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?	No
Number of Passengers (Including Driver)	0
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	Jurong West Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002689999
Alt. Police Station Phone No	(Fax) +65-62672438
Police Station Address	700 Corporation Road Singapore 649818
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT

ATTACHMENT(S)

Are accident photos available for attachment?	No
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No



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

Motor Commercial

MZ301/C

N SN

BR0086A

Cov. Type:C

CERTIFICATE OF INSURANCE
Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1980
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE No.	DMCVSNW00114112000	Engine No.: 6WG1438712 Cha. No.: JALCYZ52KK7000008
1. Index Mark and Registration Number of Vehicle	XD98M	AUTOSAFE =====
2. Name of Policy Holder	HILTOP MACHINERY PTE LTD	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	18/11/2020 (00:00:00)	Excess Sect. I. \$S2,000.00 Excess Sect. II \$S2,000.00 EX ON WINDSCREEN \$S100.00
4. Date of Expiry of Insurance	17/11/2021	
<p>5. Persons or Classes of Persons entitled to drive*</p> <p>(1) Whilst the vehicle is being used in connection with the Policyholder's business Any person provided he is in the Policyholder's employ and is driving on their order or with their permission.</p> <p>(2) Whilst the vehicle is being used for social, domestic or pleasure purposes 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.</p>		
<p>6. Limitations as to use:</p> <p>(1) Use in connection with the Policyholder's business.</p> <p>(2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.</p> <p>(3) Use for social, domestic or pleasure purposes.</p> <p>The Policy does not cover</p> <p>(1) Use for racing, pace-making, reliability trial or speed-testing.</p> <p>(2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.</p> <p>(3) Use for the carriage of passengers for hire or reward.</p>		
<p>HIRED PURCHASE CO. : MAYBANK AS HP OWNERS</p> <p>* 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.</p>		

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: _____
Gan Li Jia Jesca
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

SKETCH PLAN

Unable to provide sketch.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

refer to police report.

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature
Date & Time:

GIARMC SketchPlanForm_V3

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLANIMPORTANT NOTICE

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7. 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 :
 - (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.
- (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.:

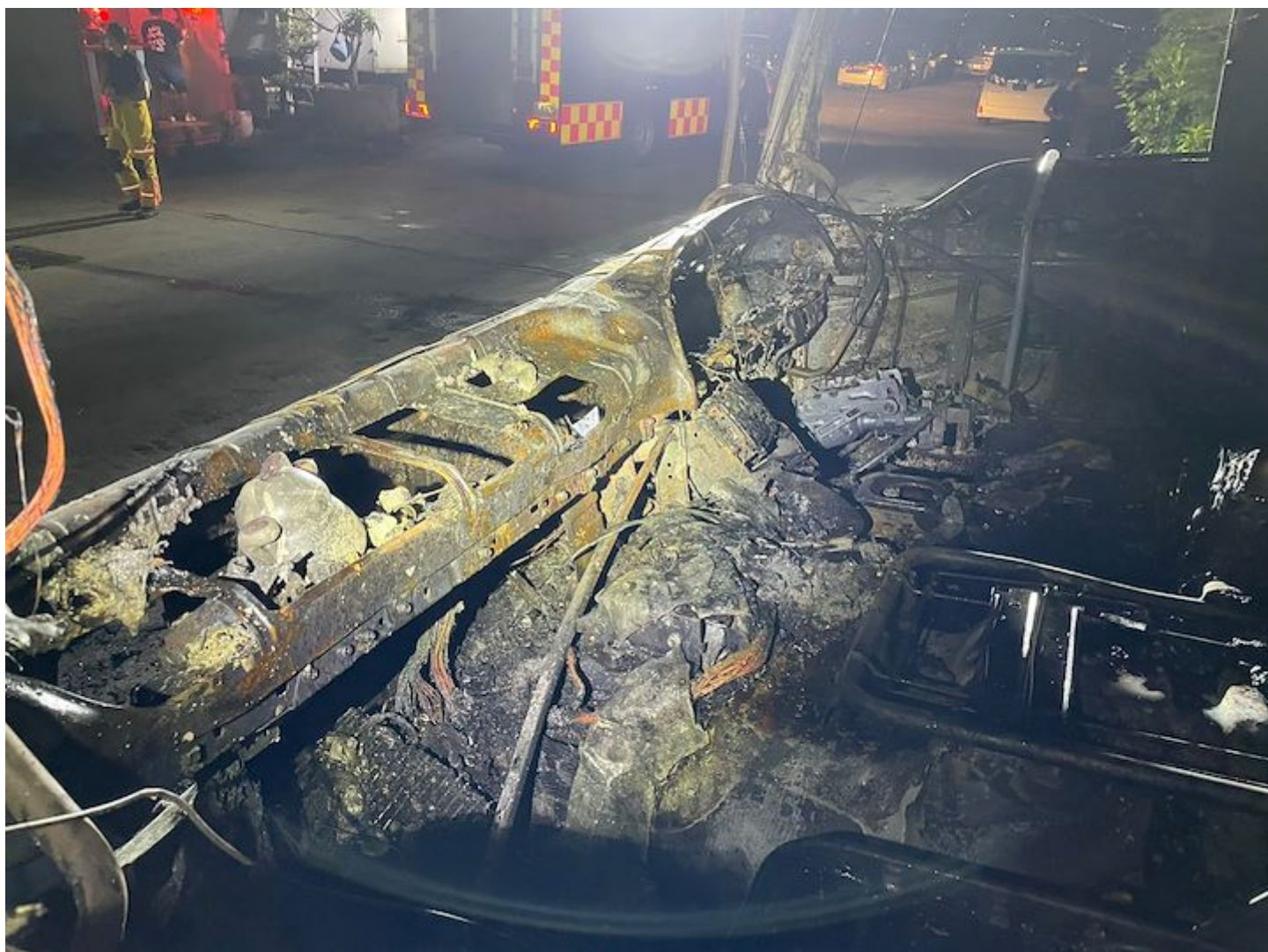




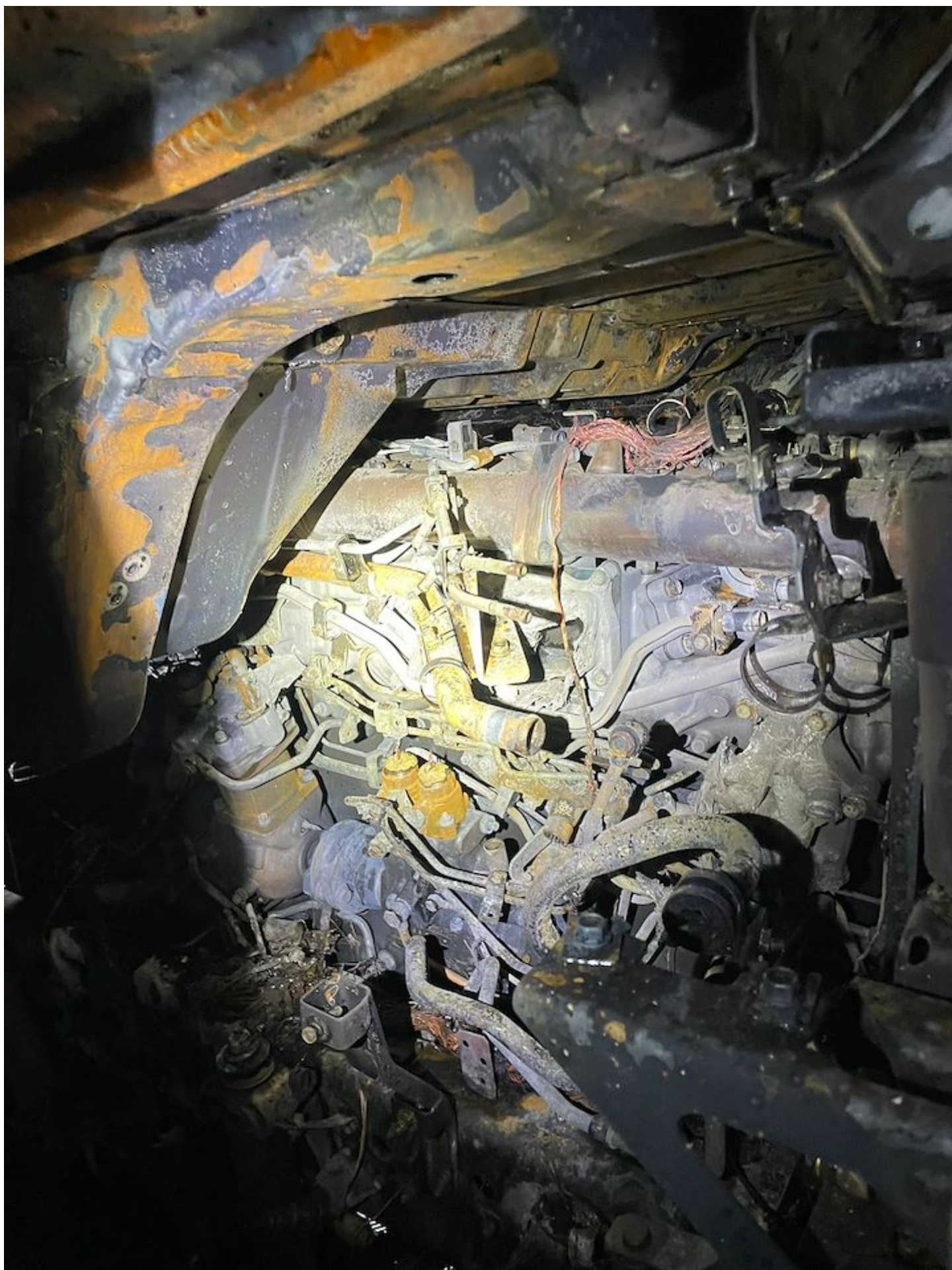






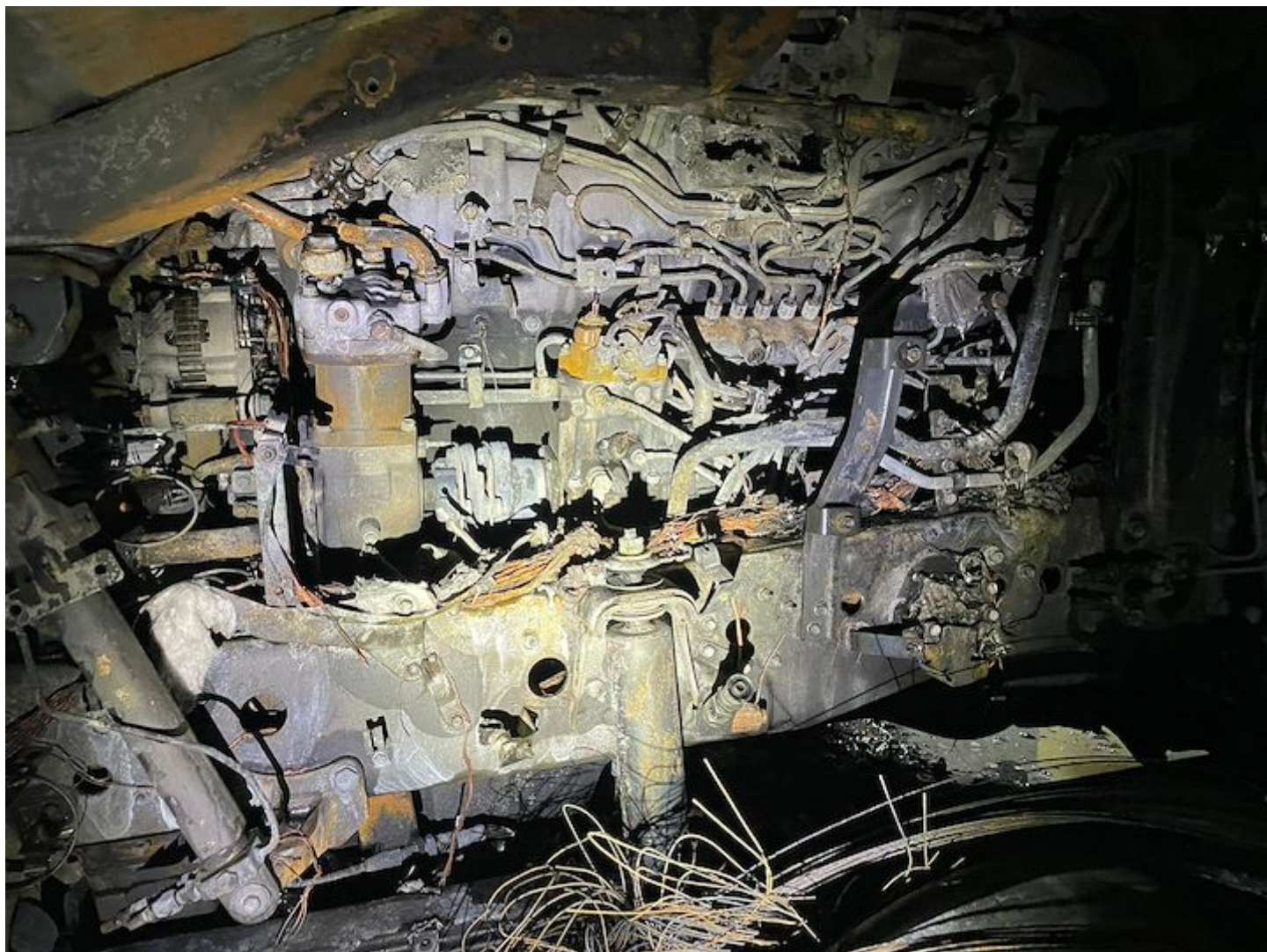
















**SINGAPORE
POLICE FORCE**



J/20210913/2030

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POLICE REPORT (NP299)

Report No. J/20210913/2030

Police Station Of Origin
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

Date/Time Report Made 13/09/2021 12:22	Vide Report No. J/20210913/0019	Station Diary No. 78
Name Of Informant GOH LIAN PIO	Address APT BLK 494E TAMPINES STREET 43 #06-542 SINGAPORE 525494	
ID Type / ID No. NRIC NO / S8614690H	Contact No. Home/Office	Mobile 88554508
Nationality SINGAPORE CITIZEN	Email Address	
Occupation TOW TRUCK DRIVER	Sex Male	Age 35
Institution/School Name	Date of Birth 08/06/1986	Race Chinese
Date/Time Of Incident 13/09/2021 02:05	Location Of Incident 36 PIONEER SECTOR 2 UNNAMED SINGAPORE 628391	

Brief details.

On 13/09/21 around 0200hrs I was at my workplace 36 Pioneer Sector 2 (Hiltop Machinery Pte Ltd) on standby for work. Subsequently at around 0205hrs I left my vehicle (V1: XD98M) for a short toilet break. While I was in the toilet, I heard a loud explosion sound. I made a check only to realize that V1 was already on fire.

Subsequently around 0227hrs I contacted for SCDF assistance. SCDF came down to render their

Signature Of Officer Recording The Report: J / SC2 MOHAMAD SYAFIQ BIN MOHAMAD SAID	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 13/09/2021 12:22
Officer In-Charge Of Case: J / Jurong Police Divisional Investigation Branch / Insp MATTHEW TAN (CHEN JUN) Contact No.: 67929999	Classification Of Case: SN 126
Authentication Stamp 	Signature : 
Singapore Police Force	



**SINGAPORE
POLICE FORCE**



J/20210913/2030

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20210913/2030

assistance in extinguishing the fire. The fire fighter investigator as well as police were at scene. The fire fighter was unsure of the cause of the fire and informed me that they will be carrying out their investigation. I wish to state that I had my mobile phone, PSA pass, Jurong Island pass, Jurong Port pass, Identity Card, Driving License and Passport in V1 and were burnt during the incident. I wish to state that I am lodging this report for replacement of the items listed above and for insurance claim.

Recorder's notes:

Currently residing at - Block 267 Tampines Street 21 #05-17

Signature Of Officer Recording The Report:

J / SC2 MOHAMAD SYAFIQ BIN
MOHAMAD SAID

Signature Of Informant:

Signature Of Interpreter:
Not applicableDate/Time:
13/09/2021 12:22Officer In-Charge Of Case:
J / Jurong Police Divisional
Investigation Branch /
Insp MATTHEW TAN (CHEN JUN)
Contact No.: 67929999

Classification Of Case:

SN 126

Authentication Stamp



Signature :

Singapore Police Force