

SC0921A70003 / Cheng Hoe Motor Pte Ltd[568047]  
ENTRY DATE & TIME: 07/10/2021 17:30 (SGT)  
SUBMITTED BY: LI YAZHU DORLYN  
VERSION: 1 (07/10/2021 17:30 (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 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	07/10/2021 17:30 (SGT)
Date of Accident	06/10/2021 10:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	EAST COAST RD
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBH4863J
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#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	NEW HEERESH CLEANING PTE LTD
Company Reg No	200516922K
Email Address	ashok074@hotmail.com
Mobile Phone No	(Phone) +65-92471174
Alternative Phone No	+65-92471174

#### VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Nv350
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 - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	2488

#### INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMCVSNW00071522100
Cover Note Number	22/06/2021 - 21/06/2022

#### DRIVER

Name of Driver	ASHOK KUMAR S/O V MUNIANDY
NRIC No	S7443513J

Date Of Birth	07/09/1974
Occupation	Indoor
Date Of Driving Pass	24/09/1996
Driving experience	25 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-92471174
Alt. Phone Number	-
Email Address	ashok074@hotmail.com
Address	BLK 681A WOODLANDS DRIVE 62 #07-13
Address complement	-
Postcode	731681
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	OWNER
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	Side Swipe
Weather Conditions	Clear
Road Surface	Dry

#### 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?	Yes
Was any injured conveyed to hospital by ambulance?	No
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	Joo Chiat Neighbourhood Police Post
Police Station Phone No	(Phone) +65-18003459999
Alt. Police Station Phone No	(Fax) +65-64474181
Police Station Address	267 Onan Road Singapore 424773
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?	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	SGL8882Y
Vehicle Manufacturer	Mercedes
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car



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

#### INJURED PERSONS DETAILS

##### INJURED 1

Name of injured person .....	ASHOK KUMAR S/O V MUNIANDY
Gender .....	Male
Phone No .....	(Phone) +65-92471174
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	5 DAYS MC
Injured person in which vehicle? .....	GBH4863J
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No

SKETCH PLAN

SKETCH PLAN

1. VEHICLE NO: 68H48637  
 2. INSURER CO: China  
 3. ACCIDENT DATE & TIME: 06/10/21 @ 1830

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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' law firm/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' law firm/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 law firm/law firms), which may be stated outside of Singapore, for one or more of the above Purposes.

NEW HEERESH CLEANING PTE LTD  
 REG 200516922K

*Alha* 7/10/21

*[Signature]*

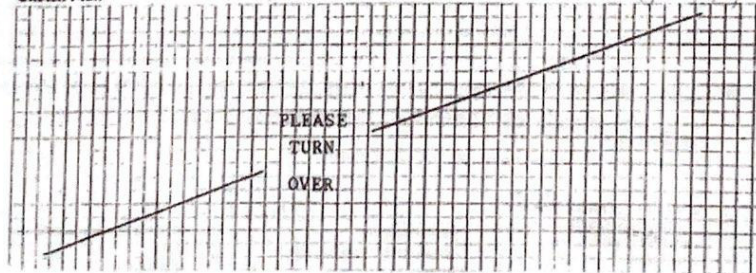
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

*[Signature]* (AMK) 07/10/21

Sketch Plan





Sketch Plan

1st Party

Joe Joe (A)

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A) - VAN CASHIC 68446633

B) - Mercedes 86488827

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Peter to Peter Report. T12021107/2037

Note: Please note that your insurer may have 14days Time Frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check with your policy for more information.

DECLARATION

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

NEW HEERESH CLEANING PTE LTD

REG 200516822K  
Policyholder's Signature  
Date & Time:

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

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

( ) Claim Own Policy ( ) Claim Third Party ( ) Reporting Only  
(x) Claim OD/TP at other workshop (New Heeresh Cleaning Pte Ltd)