

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	24/11/2021 11:42 (SGT)
Date of Accident	22/11/2021 23:28 (SGT)
Exact Location of Accident	TPE, Singapore
Additional Location Information	TPE TOWARDS PASIR RIS DRIVE 12 (EXIT 5)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBL2255G
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	EC TECH ENGINEERING PTE LTD
Company Reg No	2XXXXX617D
Email Address	CK@ECTECHENGG.COM.SG
Mobile Phone No	(Phone) +65-93872377
Alternative Phone No	+65-93872377

VEHICLE PARTICULARS

Manufacturer	Citroen
Model	Berlingo
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	Yes
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	1499

INSURANCE COMPANY

Name of Insurance Company	United Overseas Insurance Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DHOM120058592100
Cover Note Number	-

DRIVER

Name of Driver	LAU CHUCK KENG
NRIC No	SXXXX325Z

Date Of Birth	20/12/1968
Occupation	Outdoor
Date Of Driving Pass	16/03/1987
Driving experience	34 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93872377
Alt. Phone Number	-
Email Address	CK@ECTECHENGG.COM.SG
Address	29 ANCHORVALE CRESCENT #16-37
Address complement	-
Postcode	544658
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	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	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?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHMENT

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
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 _____
 No. Of Passenger (Including Driver) _____

HIT THE BARRIER

NO	DESCRIPTION	CLASSIFICATION	ESTIMATED COST	REMARKS
1	REPAIR FRONT BUMPER	...	...	...
2	REPAIR FRONT LEFT LIGHT	...	...	...
3	REPAIR FRONT RIGHT LIGHT	...	...	...
4	REPAIR FRONT WINDSHIELD	...	...	...
5	REPAIR FRONT LEFT DOOR	...	...	...
6	REPAIR FRONT RIGHT DOOR	...	...	...
7	REPAIR FRONT LEFT QUARTER PANEL	...	...	...
8	REPAIR FRONT RIGHT QUARTER PANEL	...	...	...
9	REPAIR FRONT LEFT FENDER	...	...	...
10	REPAIR FRONT RIGHT FENDER	...	...	...
11	REPAIR FRONT LEFT WHEEL ARCH	...	...	...
12	REPAIR FRONT RIGHT WHEEL ARCH	...	...	...
13	REPAIR FRONT LEFT LOWER ARM	...	...	...
14	REPAIR FRONT RIGHT LOWER ARM	...	...	...
15	REPAIR FRONT LEFT UPPER ARM	...	...	...
16	REPAIR FRONT RIGHT UPPER ARM	...	...	...
17	REPAIR FRONT LEFT LOWER BALL JOINT	...	...	...
18	REPAIR FRONT RIGHT LOWER BALL JOINT	...	...	...
19	REPAIR FRONT LEFT UPPER BALL JOINT	...	...	...
20	REPAIR FRONT RIGHT UPPER BALL JOINT	...	...	...
21	REPAIR FRONT LEFT LOWER SPRING	...	...	...
22	REPAIR FRONT RIGHT LOWER SPRING	...	...	...
23	REPAIR FRONT LEFT UPPER SPRING	...	...	...
24	REPAIR FRONT RIGHT UPPER SPRING	...	...	...
25	REPAIR FRONT LEFT LOWER SHOCK	...	...	...
26	REPAIR FRONT RIGHT LOWER SHOCK	...	...	...
27	REPAIR FRONT LEFT UPPER SHOCK	...	...	...
28	REPAIR FRONT RIGHT UPPER SHOCK	...	...	...
29	REPAIR FRONT LEFT LOWER STRUT	...	...	...
30	REPAIR FRONT RIGHT LOWER STRUT	...	...	...
31	REPAIR FRONT LEFT UPPER STRUT	...	...	...
32	REPAIR FRONT RIGHT UPPER STRUT	...	...	...
33	REPAIR FRONT LEFT LOWER SWAY BAR	...	...	...
34	REPAIR FRONT RIGHT LOWER SWAY BAR	...	...	...
35	REPAIR FRONT LEFT UPPER SWAY BAR	...	...	...
36	REPAIR FRONT RIGHT UPPER SWAY BAR	...	...	...
37	REPAIR FRONT LEFT LOWER STABILIZER	...	...	...
38	REPAIR FRONT RIGHT LOWER STABILIZER	...	...	...
39	REPAIR FRONT LEFT UPPER STABILIZER	...	...	...
40	REPAIR FRONT RIGHT UPPER STABILIZER	...	...	...
41	REPAIR FRONT LEFT LOWER CONTROL ARM	...	...	...
42	REPAIR FRONT RIGHT LOWER CONTROL ARM	...	...	...
43	REPAIR FRONT LEFT UPPER CONTROL ARM	...	...	...
44	REPAIR FRONT RIGHT UPPER CONTROL ARM	...	...	...
45	REPAIR FRONT LEFT LOWER STEERING KNUCKLE	...	...	...
46	REPAIR FRONT RIGHT LOWER STEERING KNUCKLE	...	...	...
47	REPAIR FRONT LEFT UPPER STEERING KNUCKLE	...	...	...
48	REPAIR FRONT RIGHT UPPER STEERING KNUCKLE	...	...	...
49	REPAIR FRONT LEFT LOWER TIE ROD	...	...	...
50	REPAIR FRONT RIGHT LOWER TIE ROD	...	...	...
51	REPAIR FRONT LEFT UPPER TIE ROD	...	...	...
52	REPAIR FRONT RIGHT UPPER TIE ROD	...	...	...
53	REPAIR FRONT LEFT LOWER LOWER BALL JOINT	...	...	...
54	REPAIR FRONT RIGHT LOWER LOWER BALL JOINT	...	...	...
55	REPAIR FRONT LEFT UPPER LOWER BALL JOINT	...	...	...
56	REPAIR FRONT RIGHT UPPER LOWER BALL JOINT	...	...	...
57	REPAIR FRONT LEFT LOWER UPPER BALL JOINT	...	...	...
58	REPAIR FRONT RIGHT LOWER UPPER BALL JOINT	...	...	...
59	REPAIR FRONT LEFT UPPER UPPER BALL JOINT	...	...	...
60	REPAIR FRONT RIGHT UPPER UPPER BALL JOINT	...	...	...
61	REPAIR FRONT LEFT LOWER LOWER STRUT	...	...	...
62	REPAIR FRONT RIGHT LOWER LOWER STRUT	...	...	...
63	REPAIR FRONT LEFT UPPER LOWER STRUT	...	...	...
64	REPAIR FRONT RIGHT UPPER LOWER STRUT	...	...	...
65	REPAIR FRONT LEFT LOWER UPPER STRUT	...	...	...
66	REPAIR FRONT RIGHT LOWER UPPER STRUT	...	...	...
67	REPAIR FRONT LEFT UPPER UPPER STRUT	...	...	...
68	REPAIR FRONT RIGHT UPPER UPPER STRUT	...	...	...
69	REPAIR FRONT LEFT LOWER LOWER SWAY BAR	...	...	...
70	REPAIR FRONT RIGHT LOWER LOWER SWAY BAR	...	...	...
71	REPAIR FRONT LEFT UPPER LOWER SWAY BAR	...	...	...
72	REPAIR FRONT RIGHT UPPER LOWER SWAY BAR	...	...	...
73	REPAIR FRONT LEFT LOWER UPPER SWAY BAR	...	...	...
74	REPAIR FRONT RIGHT LOWER UPPER SWAY BAR	...	...	...
75	REPAIR FRONT LEFT UPPER UPPER SWAY BAR	...	...	...
76	REPAIR FRONT RIGHT UPPER UPPER SWAY BAR	...	...	...
77	REPAIR FRONT LEFT LOWER LOWER STABILIZER	...	...	...
78	REPAIR FRONT RIGHT LOWER LOWER STABILIZER	...	...	...
79	REPAIR FRONT LEFT UPPER LOWER STABILIZER	...	...	...
80	REPAIR FRONT RIGHT UPPER LOWER STABILIZER	...	...	...
81	REPAIR FRONT LEFT LOWER UPPER STABILIZER	...	...	...
82	REPAIR FRONT RIGHT LOWER UPPER STABILIZER	...	...	...
83	REPAIR FRONT LEFT UPPER UPPER STABILIZER	...	...	...
84	REPAIR FRONT RIGHT UPPER UPPER STABILIZER	...	...	...
85	REPAIR FRONT LEFT LOWER LOWER CONTROL ARM	...	...	...
86	REPAIR FRONT RIGHT LOWER LOWER CONTROL ARM	...	...	...
87	REPAIR FRONT LEFT UPPER LOWER CONTROL ARM	...	...	...
88	REPAIR FRONT RIGHT UPPER LOWER CONTROL ARM	...	...	...
89	REPAIR FRONT LEFT LOWER UPPER CONTROL ARM	...	...	...
90	REPAIR FRONT RIGHT LOWER UPPER CONTROL ARM	...	...	...
91	REPAIR FRONT LEFT UPPER UPPER CONTROL ARM	...	...	...
92	REPAIR FRONT RIGHT UPPER UPPER CONTROL ARM	...	...	...
93	REPAIR FRONT LEFT LOWER LOWER STEERING KNUCKLE	...	...	...
94	REPAIR FRONT RIGHT LOWER LOWER STEERING KNUCKLE	...	...	...
95	REPAIR FRONT LEFT UPPER LOWER STEERING KNUCKLE	...	...	...
96	REPAIR FRONT RIGHT UPPER LOWER STEERING KNUCKLE	...	...	...
97	REPAIR FRONT LEFT LOWER UPPER STEERING KNUCKLE	...	...	...
98	REPAIR FRONT RIGHT LOWER UPPER STEERING KNUCKLE	...	...	...
99	REPAIR FRONT LEFT UPPER UPPER STEERING KNUCKLE
100	REPAIR FRONT RIGHT UPPER UPPER STEERING KNUCKLE



SKETCH PLAN

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8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that

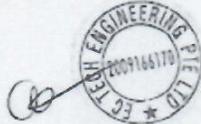
(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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 claim, 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.



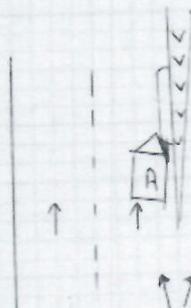
Handwritten signature of the policyholder.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



A - GBL 2255G

Describe Circumstances of the Accident

A large rectangular area with horizontal lines, intended for describing the accident circumstances. A diagonal line is drawn from the bottom-left corner to the top-right corner. Handwritten text in the center reads: "Refer to Police Report No. T/2024/123/2015".

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



**SINGAPORE
POLICE FORCE**



T/20211123/2015

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20211123/2015

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 23/11/2021 05:28		Vide Report No.: E/20211122/0189		Station Diary No.:	
Informant's Particulars					
Name of Informant: LAU CHUCK KENG			Address: APT BLK 29 ANCHORVALE CRESCENT #16-37 BELLEWATERS SINGAPORE 544658		
ID Type / ID No.: NRIC NO / S6847325Z			Contact No.: Home/Office: Mobile: 93872377		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 52	Date of Birth: 20/12/1968	Type of Informant: Driver		
Race: Chinese		Language: English		Institution / School Name:	
Occupation: LALAMOVE DRIVER			Driving Licence Information: Class: 2,3,4,5		Date of Expiry:

General Information of the Accident				
Type of Accident: Non-Injury Drink & Drive	Drink Drive: No	Date/Time of Accident: 22/11/2021 23:35	Type of Location: Bend	
Location: TAMPINES EXPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: Moving Vehicle Against - Road Divider/Kerb/Railings				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBL2255G	Van	CITROEN	BERLINGO VAN 1.5 BLUEHDI EAT8 L2	Grey		0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20211123/2015

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 3

Report No. T/20211123/2015

CONTINUATION OF REPORT

Driver:			
Name	LAU CHUCK KENG	ID No.	S6847325Z
Related Vehicle	GBL2255G (Van)	Contact No.	93872377
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2,3,4,5 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

ON THE ABOVE STATED DATE, TIME AND LOCATION,

I WAS DRIVING MY VAN ON THE TOWARDS CHANGI EXITING INTO PASIR RIS DR 12 ON 22/11/2021 AT 2335HRS, AS I WAS DRIVING INTO THIS EXIT I WAS SUPPOSED TO KEEP LEFT TO TURN INTO PASIR DRIVE 12 BUT BECAUSE I LOOKED AT MY GPS AND LOST TRACK OF WHERE I WAS GOING, MY VEHICLE VEERED TO THE RIGHT AND THE RIGHT SIDE FRONT PORTION OF MY VAN HIT THE BARRIER. CASE IS UNDER TP IO JACKSON MU EXT:65476225.

THATS ALL.



**SINGAPORE
POLICE FORCE**



T/20211123/2015

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3

Report No. T/20211123/2015

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature of Officer Recording The Report
TP /
SC2 TAN JUIN QI *Tan Juin Qi*

Signature Of Informant:
[Signature]

Signature Of Interpreter:
Not applicable

Date/Time:
23/11/2021 05:28

Officer In Charge Of Case:
TP / DDGVT /
SI MU WEI JUN
Contact No.: 65476225

Classification Of Case:

Authentication Stamp
NP168

SC Tan Juin Qi