

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 06/12/2021 09:48 (SGT)
Date of Accident 03/12/2021 12:45 (SGT)
Exact Location of Accident Ang Mo Kio Ave 3, Singapore
Additional Location Information TURNING RIGHT INTO ANG MO KIO STREET 11
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBF5729T

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner SP POWERASSETS LIMITED
Company Reg No 2XXXXX108D
Email Address tantongheng@spgroup.com.sg
Mobile Phone No (Phone) +65-91269375
Alternative Phone No +65-91269375

VEHICLE PARTICULARS

Manufacturer Renault
Model Kangoo
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 1461

INSURANCE COMPANY

Name of Insurance Company MS First Capital Insurance Ltd
Type of Coverage ThirdParty
Fleet Policy No
Policy Number D-21097419MFCV/8
Cover Note Number -

DRIVER

Name of Driver TAN TONG ENG
NRIC No SXXXX649J

Date Of Birth	24/12/1991
Occupation	Outdoor
Date Of Driving Pass	24/12/2016
Driving experience	5 YEARS
Gender	Male
Mobile Number	(Phone) +65-91269375
Alt. Phone Number	-
Email Address	tantongheng@spgroup.com.sg
Address	BLK 14 ST. GEORGE'S ROAD #12-58
Address complement	-
Postcode	320014
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 - Major/Minor Rd
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	CHIANG YIENHAI
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Commonwealth Neighbourhood Police Post
Police Station Phone No	(Phone) +65-18004749999
Alt. Police Station Phone No	(Fax) +65-64715297
Police Station Address	Blk 111 Commonwealth Crescent (Annex) #01-288A Singapore 140111
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT T/20211203/2107 (TYPE OF COLLISION IS HEAD TO SIDE)

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	WITH TRAFFIC POLICE
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBL2360K
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	SHAHBIN BIN OTHMAN
NRIC No	SXXXX866I
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN**IMPORTANT NOTICE**

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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

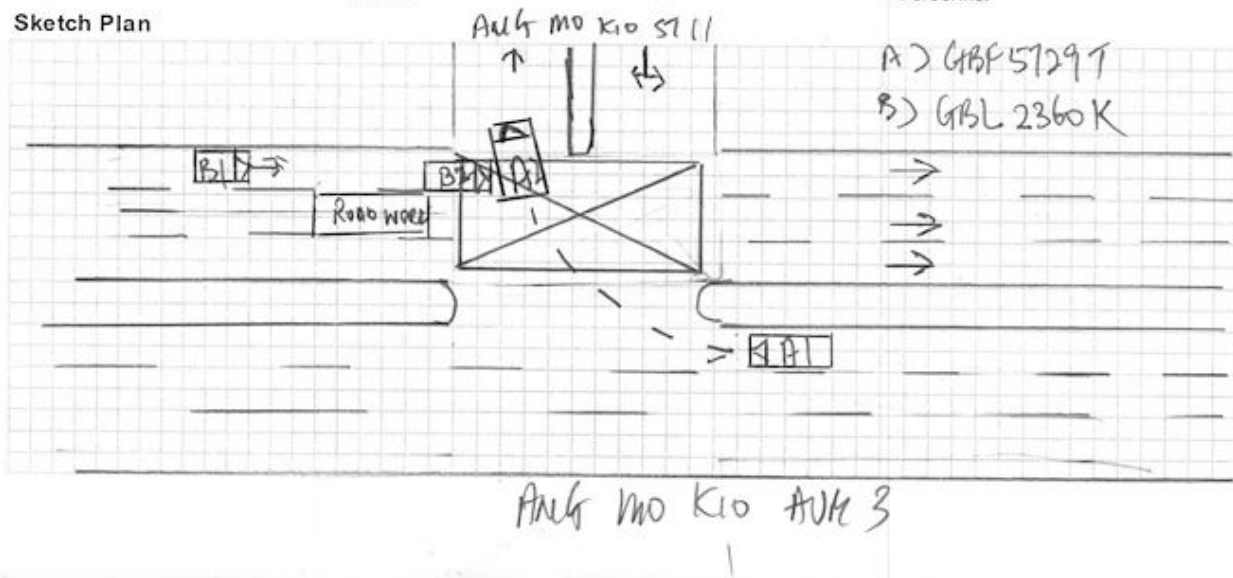
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

SP PowerGrid Ltd
Distribution Network Central Section
Telok Blangah Depot Office
501 Telok Blangah Road
Block A, Level 2, Singapore 109023
No. Registration No.: 20030695

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Describe Circumstances of the Accident

REFER TO POLICE REPORT. 1/2021/208/2107

Declaration

We declare the foregoing particulars are true in every respect.

SP PowerGrid Ltd
 Distribution Network Central Section
 Telok Blangah Depot Office
 501 Telok Blangah Road
 Block A, Level 2, Singapore 109023
 Co. Registration No.: 2003069562

3/12/21 4.34 PM

Policyholder's Signature / Date & Time

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

06/12/2021

Witnessed by Reporting Centre Personnel











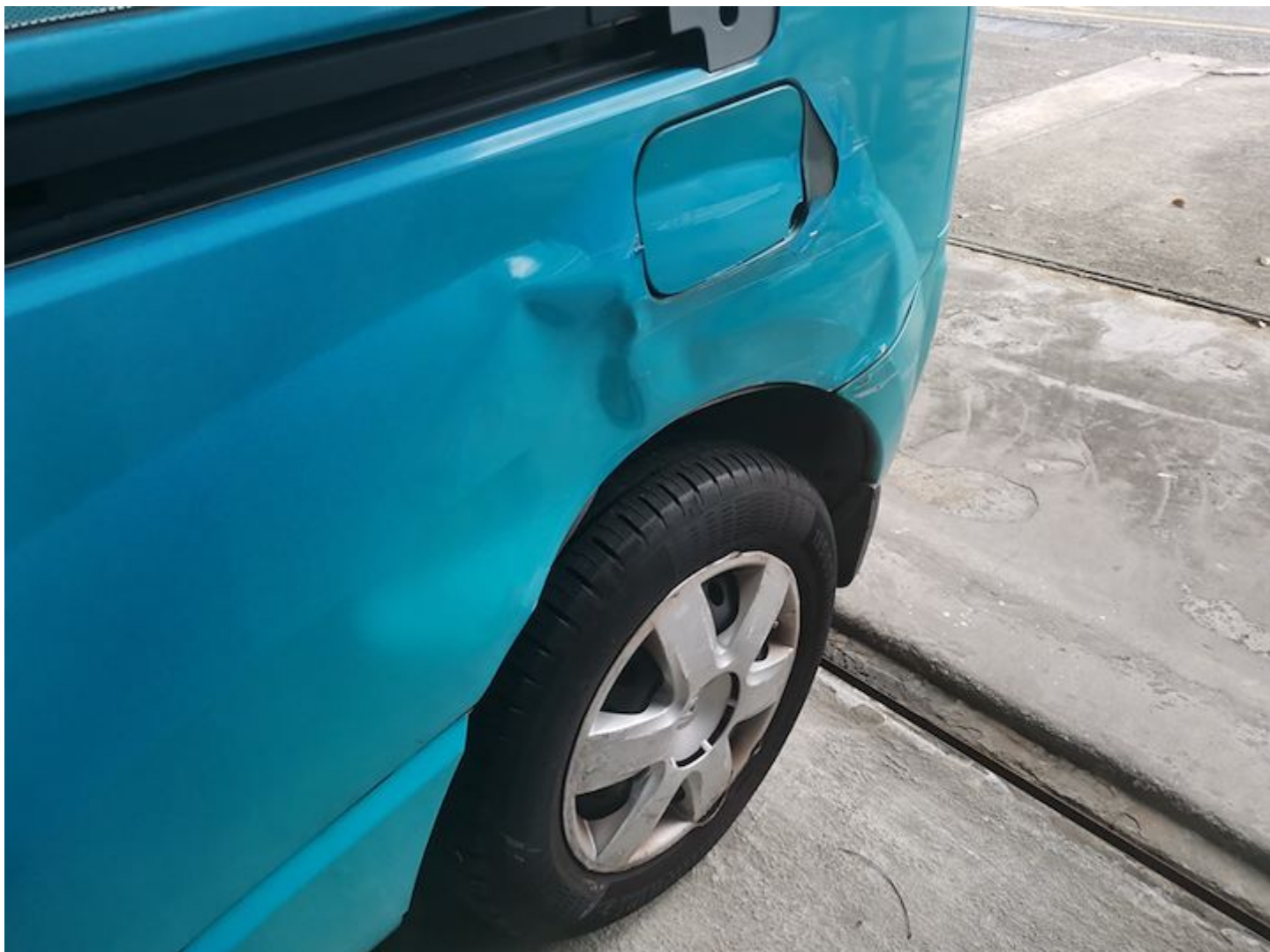





















**SINGAPORE
POLICE FORCE**


T/20211203/2107

Police Station Of Origin:
Commonwealth NPP
111 Commonwealth Crescent (Annex) #01-
288A SINGAPORE 140111
Tel No: 1800-4749999

1 of 3

Report No. T/20211203/2107

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 03/12/2021 18:27	Vide Report No.: F/20211203/0113	Station Diary No.: 20
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Informant's Particulars

Name of Informant: TAN TONG HENG			Address: APT BLK 14 ST. GEORGE'S ROAD #12-58 SINGAPORE 320014		
ID Type / ID No.: NRIC NO / S9148649J			Contact No.: Home/Office: Mobile: 91269375		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 29	Date of Birth: 24/12/1991	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: SP GROUP			Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 03/12/2021 12:40	Type of Location: T-Junction
Location: ANG MO KIO AVENUE 3				
Weather: Clear	Road Surface: Dry	Road Speed Limit: 60 Km/h		
Traffic Flow: One Way	Traffic Control: Traffic Light - Working	Traffic Volume: Moderate		
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBF5729T	Van	RENAULT	KANGOO MAXI Z.E.	White	Slightly Damaged	1
GBL2360K	Van	TOYOTA	HIACE DX 2.8 AUTO	Silver	Slightly Damaged	1

Details of Person Involved

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


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T/20211203/2107

Police Station Of Origin:
Commonwealth NPP
111 Commonwealth Crescent (Annex) #01-
288A SINGAPORE 140111
Tel No: 1800-4749999

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Report No. T/20211203/2107

CONTINUATION OF REPORT

Driver			
Name	TAN TONG HENG	ID No.	S9148649J
Related Vehicle	GBF5729T (Van)	Contact No.	91269375
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	SHAHNIN BIN OTHMAN	ID No.	S7233866I
Related Vehicle	GBL2360K (Van)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight

Brief Details.

On 03/12/2021 at about 1243hrs, I was travelling along Ang Mo Kio Ave 3 on my company van (GBF5729T) together with my colleague. Before turning right towards Ang Mo Kio St.11, I ensure no vehicles approaching from the opposite direction and I noticed there is road works on the 2nd lane. Then I begin to drive slowly. Out of sudden, I heard long loud honking sound, I quickly accelerated my vehicle to avoid any collisions. However the oncoming vehicle (GBL2360K) did not managed to stop on time and banged onto my rear left side of the vehicle. There are slight damages on both vehicles. The other driver claimed he has injury on his leg. His passenger claimed has swollen leg. Ambulance arrived at scene and conveyed them to the nearest hospital. Traffic Police arrived at scene and I handed over In-car memory card footage for further investigation. I was advised to lodged a accident report of what has happened.



SINGAPORE POLICE FORCE



T/20211203/2107

Police Station Of Origin:
Commonwealth NPP
111 Commonwealth Crescent (Annex) #01-
288A SINGAPORE 140111
Tel No: 1800-4749999

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Report No. T/20211203/2107

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

D /
Sr Staff Sgt MOHAMMAD ASRI
BIN MAZLAN

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
03/12/2021 18:27

Officer In Charge Of Case:

TP / GIT /
Sgt 3 MUHAMMAD SYARIFUDDIN
MUHAMMAD AJMAIN
Contact No.: 65476367

Classification Of Case:



SINGAPORE
POLICE FORCE

SN 50

SIGNATURE