

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	09/12/2021 16:05 (SGT)
Date of Accident	25/10/2021 16:00 (SGT)
Exact Location of Accident	440 Hougang Ave 10, Singapore
Additional Location Information	CARPARK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBC4300T
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	ABS LEASING SERVICES PTE LTD
Company Reg No	2XXXXX528D
Email Address	john.pyj@hotmail.com
Mobile Phone No	(Phone) +65-92966056
Alternative Phone No	+65-94571633

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Hiace
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 - Reporting only
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	2754

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMCVSNW00051402102
Cover Note Number	-

DRIVER

Name of Driver	TOH JYH YANG (ZHUO ZHIYANG)
NRIC No	SXXXX484A

Date Of Birth	21/12/1983
Occupation	Outdoor
Date Of Driving Pass	11/01/2012
Driving experience	9 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94571633
Alt. Phone Number	-
Email Address	john.pyj@hotmail.com
Address	BLK 521 HOUGANG AVENUE 6 #09-37
Address complement	-
Postcode	530521
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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?	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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO SKETCH PLAN

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	SJH6499U
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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)		-

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



Policyholder's Signature / Date & Time

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

09/12/2021
Witnessed by Reporting Centre Personnel

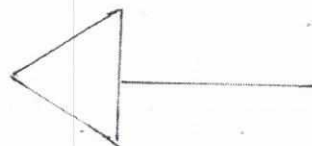
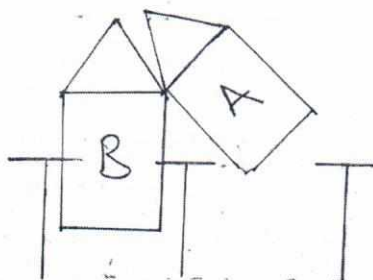
Sketch Plan

440 HOUGHANG AVE 10

VEHICLE

A: GBC 4300T

B: SJH 6499U



Describe Circumstances of the Accident

DATE AND TIME, I CAME OUT OF THE PARKING LOT
I DID NOT SAW VEHICLE "B" WAS BESIDE ME AND
WE COLLIDED ONTO EACH OTHER.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date &
Time

Yang

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

Witnessed by Reporting Centre
Personnel

VEHICLE NO: GRC 4300T

MAKE & MODEL TOYOTA HIACE

AUTO? ☒ ~~MANUAL~~

DATE OF ACCIDENT

25 / 10 / 2021

CC

TIME OF ACCIDENT

1600HRS

AM ☒ PM ☐

LOCATION OF ACCIDENT

440 HOUGHANG AVE 10 CARPARK.

EXACT PURPOSE USED AT TIME OF ACCIDENT

☒ EMPLOYMENT / ☐ PRIVATE USE / ☐ PRIVATE HIRE

NAME OF OWNER

ABS LEASING SERVICE PTE LTD.

EMAIL:

JOHN.PYJ@HOTMAIL.COM

Office:

MOBILE: 9296 6056.

NRIC

CLAIM TYPE

☐ OD / ☐ THIRD PARTY / ☒ REPORTING ONLY

FLEET POLICY:

YES / ☒ NO ☐ 2

INSURANCE CO.

CHINA TAIPING.

TYPE OF COVERAGE

☒ Comprehensive / ☐ Third Party / ☐ Third Party Fire & Theft

POLICY NO.

DMCVSNW 000 514 02102

NAME OF DRIVER

AS ABOVE / IF NO. TOH JYH YANG

NRIC

S8340484A.

DATE OF BIRTH

21 / 12 / 1983.

ANY PASSENGER

YES / ☒ NO ☐

NAME OF PASSENGER

—

GENDER OF PASSENGER

~~MALE~~ / ~~FEMALE~~

OCCUPATION

☒ Outdoor / ☐ Indoor

DATE OF DRIVING PASS

11 / 01 / 2012

GENDER

☒ Male / ☐ Female

CONTACT NO.

Mobile: 9457 1683 Office:

Home:

EMAIL:

ADDRESS

521 HOUGHANG AVE 6 #09-37 S(530521)

DOES DRIVER HAVE OTHER VEHICLES?

☒ YES / ☐ NO

DETAILS:

RELATIONSHIP

☐ Employee / ☒ Other HIRER.

WEATHER CONDITION

☒ Clear / ☐ Raining / ☐ Other.

ROAD SURFACE

☒ Dry / ☐ Wet / ☐ Other.

ANY INJURIES

☒ No / ☐ If yes, Where?

CONTACT NO.

POLICE REPORT

☒ No / ☐ If yes, Where?

NOTICE OF INTENDED PROSECUTION GIVEN?

☒ NO / ☐ IF YES, WHO?

VEHICLE B NO.

SJH 6499U

Any Passenger.

NAME

CONTACT NO.

VEHICLE C NO.

Any Passenger.

VEHICLE D NO.

Any Passenger.

VEHICLE E NO.

Any Passenger.

VEHICLE F NO.

Any Passenger.

ANY WITNESS

WITNESS CONTACT NO.

WAS THERE ANY VIDEO CAPTURE?

YES / ☒ NO ☐

WAS THERE ANY AUDIO RECORDED?

YES / ☒ NO ☐

SCENE ACCIDENT PHOTOGRAPH?

YES / ☒ NO ☐

**WORKSHOP:

Have you been approached by unknown person soliciting (s) /

offering accident claims assistance?

YES / ☒ NO ☐



中国太平
CHINA TAIPING

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

Motor Commercial

MZ407/C

R SN

AN0597A

Cov. Type:C

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE No. DMCVSNW00051402102

Engine No.: 1KD2154977

Cha. No.: JTFHT02P600087382

1. Index Mark and Registration
Number of Vehicle

GBC4300T

AUTOSAFE
=====

2. Name of Policy Holder

ABS LEASING SERVICES PTE LTD

3. Effective date of the Commencement of
Insurance for the purposes of the Regulations,
Ordinance or Enactment

14/06/2021
(00:00:00)

Excess Sect I. S\$1,500.00

Excess Sect. II S\$1,500.00

EX ON WINDSCREEN. S\$100.00

4. Date of Expiry of Insurance

13/06/2022

5. Persons or Classes of Persons entitled to drive*

Any person who is driving on the Policyholder's order or with their permission or to whom the vehicle is hired.
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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

6. Limitations as to use*

(1) Use in connection with the Policyholder's business and Hirer's Business.

(2) Use for the carriage of passenger (other than for hire or reward) in connection with the Policyholder's business and Hirer's Business.

(3) Use for social, domestic or pleasure purpose.

The policy does not cover:

(1) Use for racing, pace-making, reliability trial or speed-testing.

(2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

(3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

HIRE PURCHASE CO.: ABWIN PTE LTD AS HP OWNER

* 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.

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: ABS INSURANCE AGENCY PTE LTD.
Authorised Officer


Authorised Signatory