

# 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 ..... 04/03/2022 11:32 (SGT)  
Date of Accident ..... 03/03/2022 09:30 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... 53 SENNET LANE  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... GBJ93E

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... Ken Landscape Services  
Company Reg No ..... 52990683W  
Email Address ..... ENQUIRY@KENLANDSCAPE.COM.SG  
Mobile Phone No ..... (Phone) +65-83791036  
Alternative Phone No ..... (Home) +65-83791036

### VEHICLE PARTICULARS

Manufacturer ..... Renault  
Model ..... Kangoo  
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? ..... No - Claiming third party  
Vehicle Category ..... Commercial vehicle  
Transmission ..... Auto  
CC ..... 0

### INSURANCE COMPANY

Name of Insurance Company ..... Great American Insurance Company  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... MOMVC000009094-00-000  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... CHONG YEE LE (ZHANG YULE)  
NRIC No ..... S9244282I

Date Of Birth	23/11/1992
Occupation	Outdoor
Date Of Driving Pass	28/08/2014
Driving experience	7 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-83791036
Alt. Phone Number	-
Email Address	EDAVIDCHONG@GMAIL.COM
Address	BLK 50 CCK NORTH 6 #17-02
Address complement	-
Postcode	689574
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 - Head to Rear
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	Choa Chu Kang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18007659999
Alt. Police Station Phone No	(Fax) +65-67644104
Police Station Address	No 20 Choa Chu Kang Street 52 #01-02 Singapore 689286
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED

#### 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	XE4190Y
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle

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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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' 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/can 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.

**Ken Landscape Services**  
 50 Choa Chu Kang North 6  
 #17-02 Yew Mei Green  
 Singapore 689574

\_\_\_\_\_  
 Policyholder's Signature / Date &  
 Time

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

\_\_\_\_\_  
 Witnessed by Reporting Centre  
 Personnel

Sketch Plan



veh A = GRJ93E  
 veh B = XE 4190Y

Describe Circumstances of the Accident

GBJ 95E

My vehicle Renault Kangoo Maxi A was parked along 53 Senett Lane and a rubbish truck from 800 Super carplate KE 4190 Y hit my vehicle by accident, resulting in a dent in the side panel. Time of occurrence was in the morning at 9:10 am on the 05/05/2022. Weather was fine and clear, no rain.

Declaration

We declare the foregoing particulars are true in every respect.

**Ken Landscape Services**  
50 Choa Chu Kang North 6  
#17-02 Yew Mei Green  
Singapore 689574

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel









CHASSIS NO. : VF1FNT2H359570127  
U.W. : 1480 KG  
M.L.W. : 2200 KG  
PASS.CAP : 1 DRIVER 1 OTHERS  
TYRE SIZE : F195/65R15  
              : R195/65R15 (S)





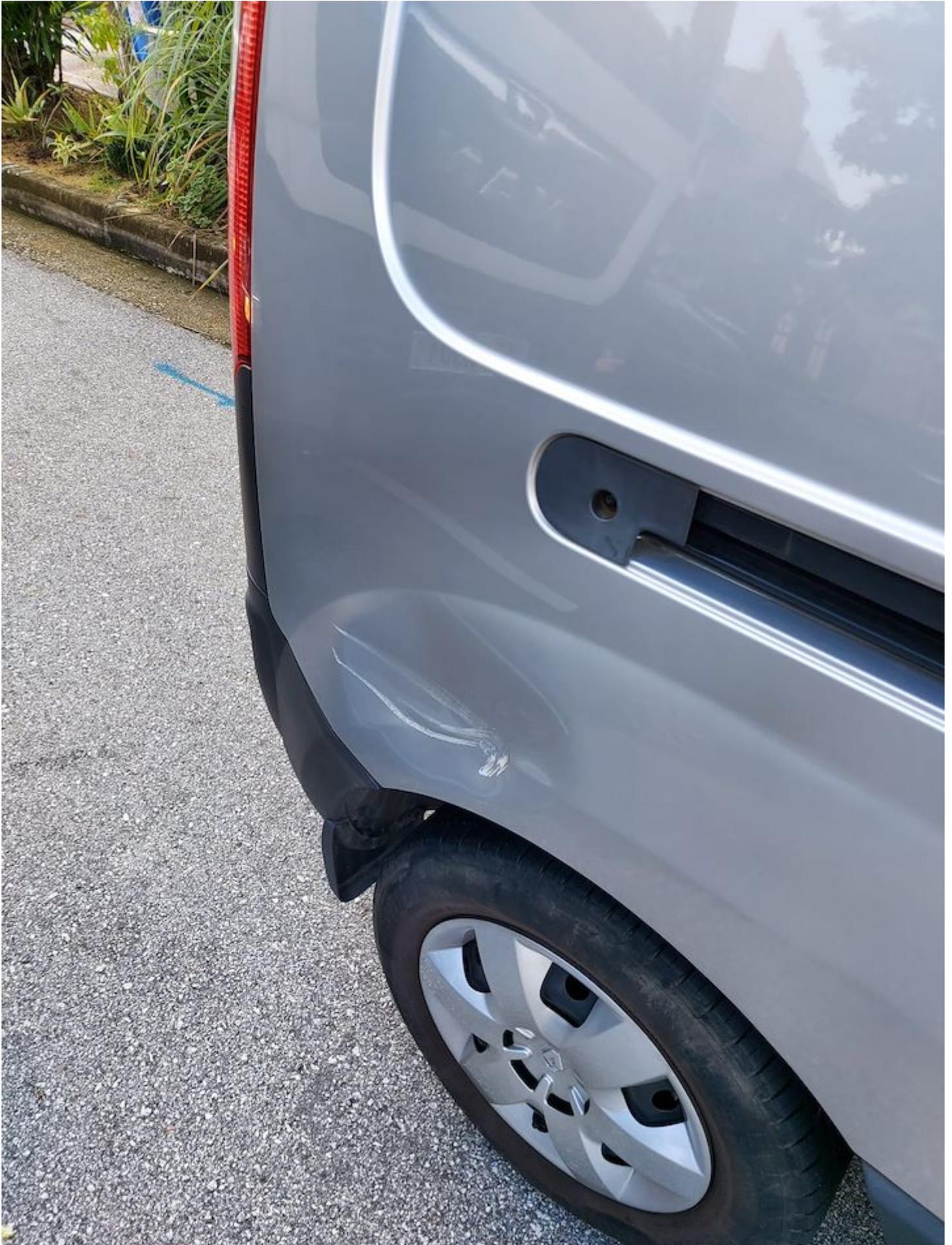
**KEN LANDSCAPE SERVICES**  
**50 CHOA CHU KANG NORTH 6**  
**#17-02 YEW MEI GREEN**  
**SINGAPORE 689574**  
**REG. NO. : 52990683W**  
**PAX. CAP : 1 DRIVER 1 OTHERS**













Annex B

## NOTICE OF REPORTING

This is to confirm that Chang Vee Le HP: 83791036 , NRIC/FIN-  
S92442827, has reported to the Police a non-injury traffic accident which  
 occurred at 53 Sennett Lane on 03/03/2022  
 at 09:30 am/pm involving the following vehicles:

1. GBJ93E (complainant)
2. XE4190Y (Macod Bin Dada, S1200251C) HP: 86176488 → 800 Super (Company)  
Apt B1E 635 Hlagang Avenue @ #03-75 S(530635) 17A Senoko Way  
Singapore 758056  
Hotline: 63663800

2. If this accident was reported to the Police within 24 hours of its occurrence, then he/she  
 had complied with Section 84(2) of the Road Traffic Act, Chapter 276.

Rank/Name of Issuing Officer: NCS T120357 Sri Aminah 

Date: 03/03/2022 Time: 1425hrs

S/D Ref: 66

NPC/Unit: Choa Chu Kang NPC  
20 Choa Chu Kang St 52 #01-02  
Singapore 688286  
Tel: 1800-785 9999  
Fax: 6767 3651

Original: Complainant copy  
 Duplicate: Police copy