

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 30/03/2022 14:33 (SGT)
Date of Accident 25/03/2022 08:30 (SGT)
Exact Location of Accident Singapore
Additional Location Information Jurong West St 71
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number XD5929H

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner Boon Seng Recycling Pte Ltd
Company Reg No 2XXXXX599K
Email Address admin@bs95.sg
Mobile Phone No (Phone) +65-91699299
Alternative Phone No +65-91699299

VEHICLE PARTICULARS

Manufacturer Isuzu
Model Cyz52l
Variant -
Exact purpose for which vehicle was being used at time of accident -
Are you claiming under your own insurance policy for repair to your vehicle? No - Reporting only
Vehicle Category Commercial vehicle
Transmission Manual
CC 15681

INSURANCE COMPANY

Name of Insurance Company Lonpac Insurance Bhd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number Z/21/VC00/112108
Cover Note Number -

DRIVER

Name of Driver Tan Tian Heng
NRIC No SXXXX209H

| | |
|--|------------------------------------|
| Date Of Birth | 22/05/1965 |
| Occupation | Outdoor |
| Date Of Driving Pass | 05/05/1987 |
| Driving experience | 34 YEARS AND 10 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-91699299 |
| Alt. Phone Number | - |
| Email Address | admin@bs95.sg |
| Address | Blk 644, Ang Mo Kio Ave 4, #02-874 |
| Address complement | - |
| Postcode | 560644 |
| 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 | No Collision |
| 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? | Yes |
| 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 | Ang Mo Kio North Neighbourhood Police Centre |
| Police Station Phone No | (Phone) +65-18004849999 |
| Alt. Police Station Phone No | (Fax) +65-62181399 |
| Police Station Address | 51 Ang Mo Kio Avenue 9 Singapore 569784 |
| Was notice of intended Prosecution given? | No |
| If yes, against whom? | - |

CIRCUMSTANCES OF ACCIDENT

Refer to police report no.: T/20220328/2022.

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 | SKJ8381P |
| 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) -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person -
 Gender -
 Phone No -
 Address -
 Address Complement -
 Post Code -
 Approximate Age Years Old -
 Injuries Sustained -
 Injured person in which vehicle? -
 Were seat belts worn? -
 Was this injured conveyed to hospital by ambulance? -

Refer to police report no. TH0220328/2022.

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



Driver's Signature (If driver is not you, please print name)
& Time

A

30/03/2022

Witnessed by Reporting Centre Personnel

SKETCH PLAN**IMPORTANT NOTICE**

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5. **Any false reporting may be referred to the Police for investigation**.
6. The 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.
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.



30/03/2022

Policyholder's Signature / Date & Time
30/03/22

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Please note that you might be able to submit an Own Damage claim under your own policy within 14 days.
☒ Claim Own Damage (OD) ☐ Claim Third Party (TP) ☐ Reporting Only ☐ Claim OD/TP at other workshop



**SINGAPORE
POLICE FORCE**



T/20220328/2022

1 of 3

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

Report No. T/20220328/2022

REPORT OF A TRAFFIC ACCIDENT

| | | |
|--|------------------|--------------------------|
| Date/Time Report Made: 28/03/2022 11:59 | Vide Report No.: | Station Diary No.: 20 |
|--|------------------|--------------------------|

Informant's Particulars

| | | | |
|--|---|------------------------------|------------------------------|
| Name of Informant: TAN TIAN HENG | Address: APT BLK 644 ANG MO KIO AVENUE 4 #02-874 SINGAPORE 560644 | | |
| ID Type / ID No.: NRIC NO / S1705209H | Contact No.: | Mobile: 91699299 | |
| Nationality: SINGAPORE CITIZEN | Email: | logantan91@gmail.com | |
| Sex: Male | Age: 56 | Date of Birth: 22/05/1965 | Type of Informant: Driver |
| Race: Chinese | Language: | Institution / School Name: | |
| Occupation: HEAVY VEHICLE DRIVER | Driving Licence Information: Class: 3,4,5 | | Date of Expiry: |

General Information of the Accident

| | | | | |
|--|---|-----------------------|---|---------------------------------|
| Type of Accident: | Injury Conveyed By Ambulance | Drink Drive: No | Date/Time of Accident: 25/03/2022 08:30 | Type of Location: T-Junction |
| Location: JURONG WEST STREET 71 | | | | |
| Weather: Clear | Road Surface: Dry | | Road Speed Limit: | |
| Traffic Flow: Two Way | Traffic Control: Traffic Light - Working | | Traffic Volume: Moderate | |
| Type of Collision: Vehicle overturn | Anyone conveyed by ambulance: Yes | | | |

Details of Vehicle Involved

| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
|-------------|-------|-------|-------|-------|----------------------|-----------------|
| SKJ8381P | Car | HONDA | CITY | Blue | No Damage | 0 |
| XD5929H | Lorry | ISUZU | | Gold | Seriously Damaged | 0 |

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20220328/2022

2 of 3

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

Report No. T/20220328/2022

CONTINUATION OF REPORT

| Driver | | | |
|-----------------------------------|------------------------------|--|-------------------------------------|
| Name | TAN TIAN HENG | ID No. | S1705209H |
| Related Vehicle | XD5929H (Lorry) | Contact No. | 91699299 |
| Hospital/Clinic | NATIONAL UNIVERSITY HOSPITAL | Class of Driving Licence & Expiry Date | Class: 3,4,5 Date of Expiry: NIL |
| Date Treatment | 25/03/2022 | Date Discharge | 26/03/2022 |
| No. of Days granted Medical Leave | 28 | Degree of Injury | Serious |

Brief Details.

On 25/03/2022 at about 0800hrs, I was driving lorry bearing registration number: XD5929H along Pioneer Road North towards AYE. I was driving along the middle lane at the speed of around 50km/hour. I was approaching the junction of Pioneer Road North and Jurong West Ave 5. I noticed the traffic light was green, however the traffic had turn amber. One car bearing registration plate number: SKJ8381P was approaching the stop line of the traffic light had jammed brake. I had to swerve to the right to evade SKJ8381P as the driver had jammed brake. As a result, my lorry had overturned and collided onto the road divider. I was unsure what had happened afterwards as I was stuck in the lorry.

I was conveyed by the ambulance to NUH. I was discharged on 26/03/2022 and given 28 days of MC. I suffer cuts on my right hand index finger, right forearm, chest area, forehead, under my right eye and the back of my head. I suffer swelling on my left bicep.

There is heavy damages to my lorry. I also have an in-car camera that recorded the incident. I am able to provide the footage to the police.

I wish to state that my lorry can carry up to 28 ton of load however I was only carrying 26.3 ton of load.



SINGAPORE POLICE FORCE



T/20220328/2022

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51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

3 of 3

Report No. T/20220328/2022

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:
F / SGT 1 LEE CHING HAO
NICHOLAS

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
28/03/2022 11:59

Officer In Charge Of Case:
TP / GIT /
STAFF SGT MOHAMED SUFIAN BIN
MOHAMED JUNID
Contact No.: 65476247

Classification Of Case:

NP168

STAFF SGT MOHAMED SUFIAN BIN
MOHAMED JUNID
Contact No.: 65476247