

# 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 ..... 21/04/2022 16:36 (SGT)  
Date of Accident ..... 20/04/2022 18:10 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... Along AYE Portsdown towards City  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... XE1952K

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... KOH KOCK LEONG CONSTRUCTION PTE. LTD.  
Company Reg No ..... 200617767G  
Email Address ..... admin@kkle.com.sg  
Mobile Phone No ..... (Phone) +65-68978787  
Alternative Phone No ..... (Office) +65-68978787

### VEHICLE PARTICULARS

Manufacturer ..... Volvo  
Model ..... FMX370 64R RSS DC  
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 ..... Auto  
CC ..... 10837

### INSURANCE COMPANY

Name of Insurance Company ..... Liberty Insurance Pte Ltd  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... Yes  
Policy Number ..... SD22V03934/VCH/R03  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... Xie Changsheng

Date Of Birth .....	08/01/1974
Occupation .....	Outdoor
Date Of Driving Pass .....	28/11/2017
Driving experience .....	4 YEARS AND 5 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-89085674
Alt. Phone Number .....	-
Email Address .....	admin@kkle.com.sg
Address .....	24 Tuas Avenue 2
Address complement .....	-
Postcode .....	639455
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 .....	Raining
Road Surface .....	Wet

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? .....	No
Number of vehicles involved in the accident .....	4
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

On 20/4/2022 at around 18:10 pm, I was driving company vehicle XE1952K along AYE Portsdown towards City. The traffic was slow and I travel in low speed. Suddenly the third party YN6743E hit onto my rear. I saw from my rear side mirror YN6743E do reverse and hit onto SKC4752R and goes to lane 4 hit again onto SKS5597G.

No one injured. I have video footage for this accident.

#### 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 .....	YN6743E
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle

Passport No/FIN .....	G8068635N
Contact Number .....	(Phone) +65-98067598
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number .....	SKC4752R
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	Tara Catharine Burns
Passport No/FIN .....	G5818471W
Contact Number .....	(Phone) +65-84984196
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

#### DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number .....	SKS5597G
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	Baet Yeok Lin
NRIC No .....	S1441291C
Contact Number .....	(Phone) +65-94307275
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**

1. Please report correctly the details of the accident to speed up the claims process.
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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 lodgment 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

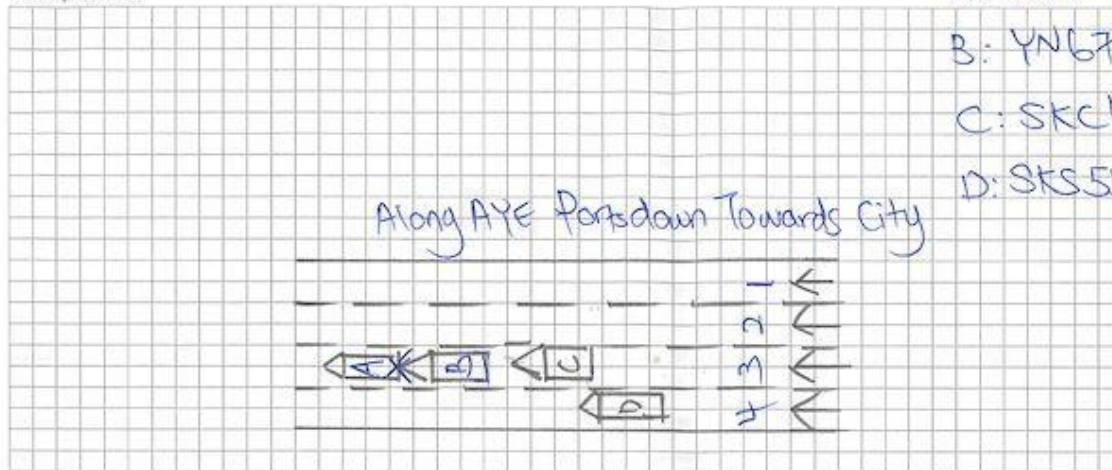
Policyholder's Signature  
Date & Time:



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

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

SKETCH PLAN



A: XE1952K  
B: YN6743E  
C: SKC4752R  
D: SKS5597G

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 20 April 2023 at around 18:10pm, I driving company vehicle XE1952K at along AYE Portsdown Towards City. The traffic was slow and I travel in low speed. Suddenly the third party YN6743E hit onto my rear. I saw from my rear mirror YN6743E do reverse and hit onto SKC4752R and goes to lane 4 hit again onto SKS5597G. No one injured. I have video footage for this accident.

DECLARATION

I/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:

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:



























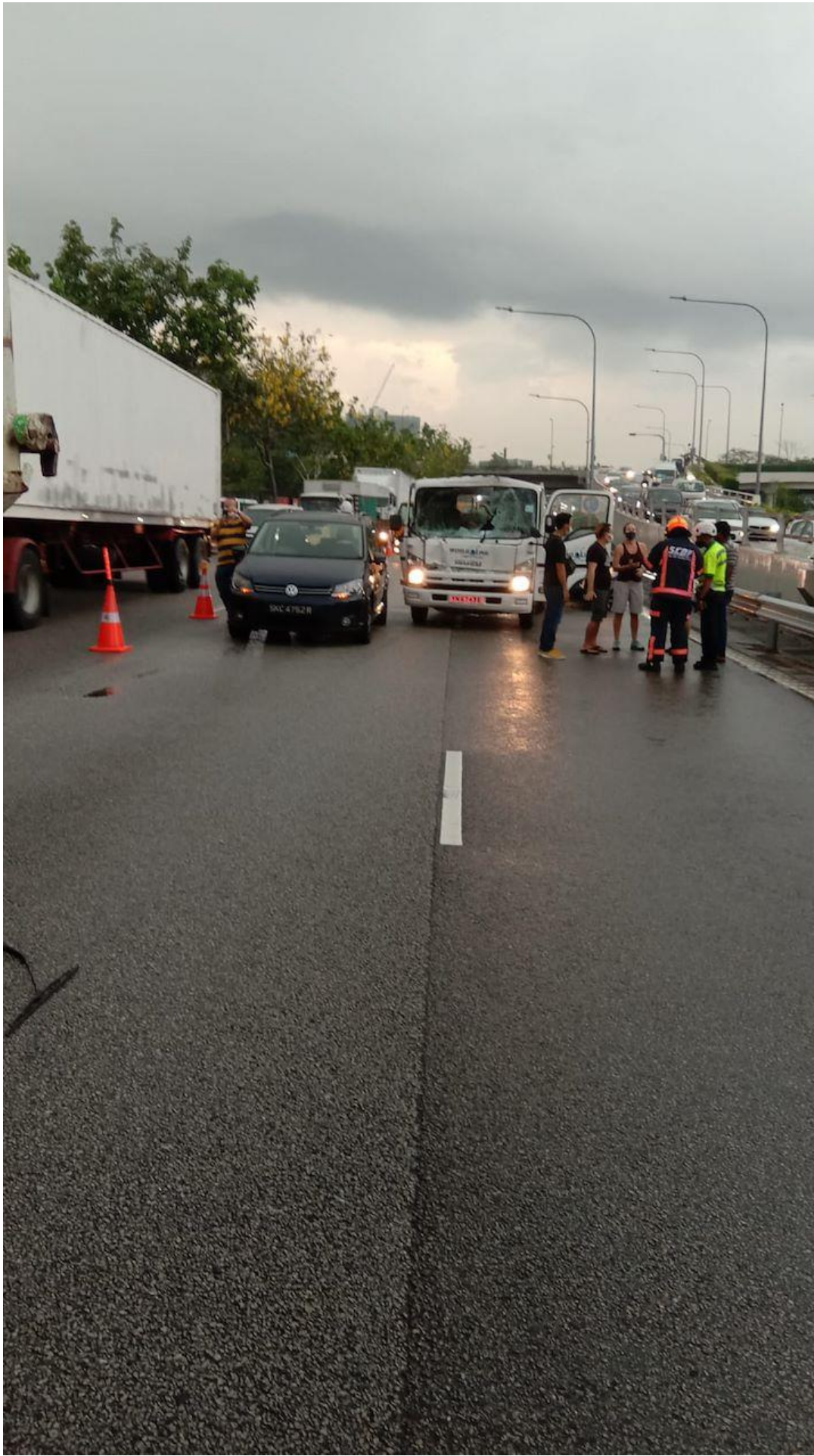




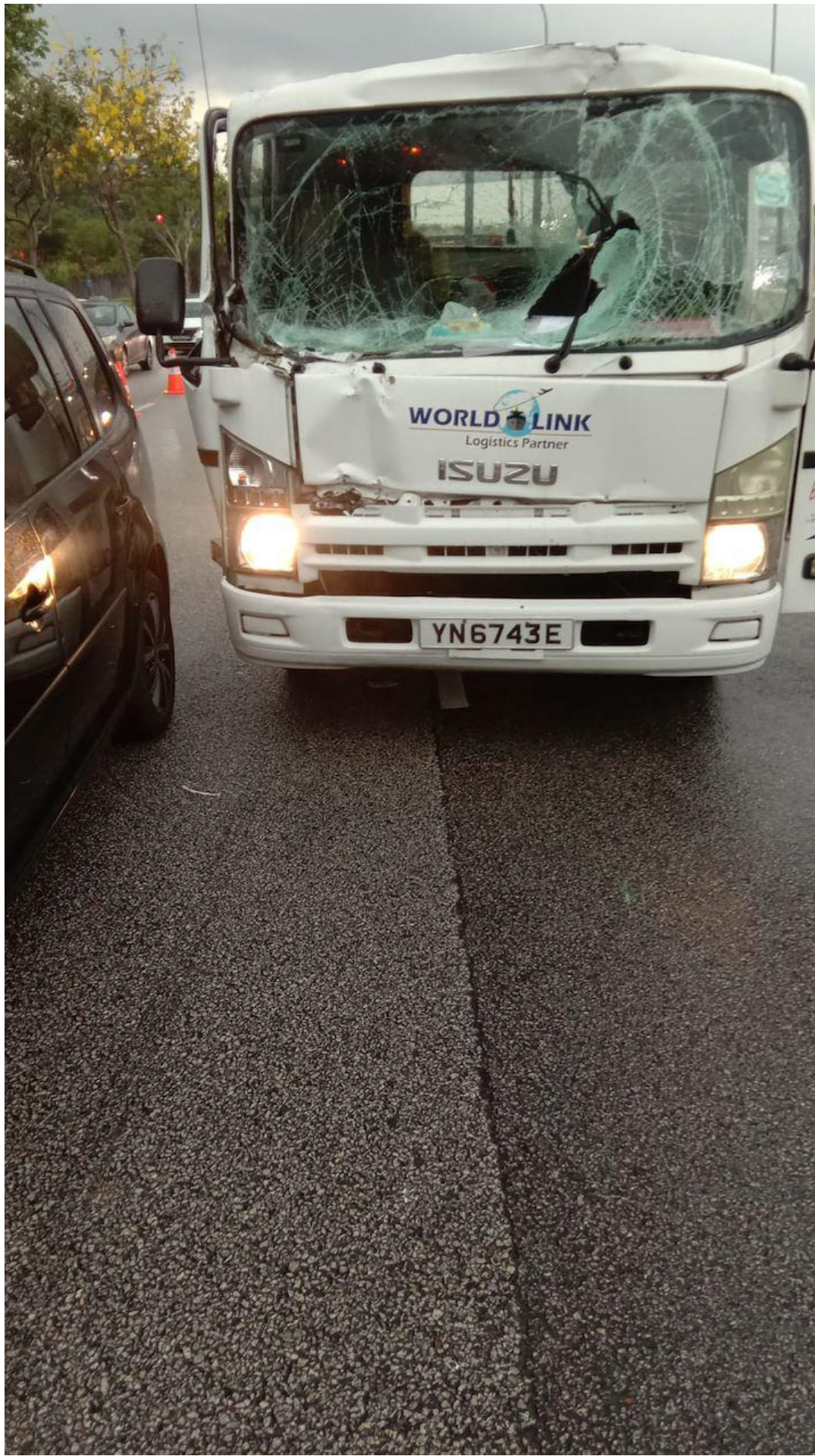




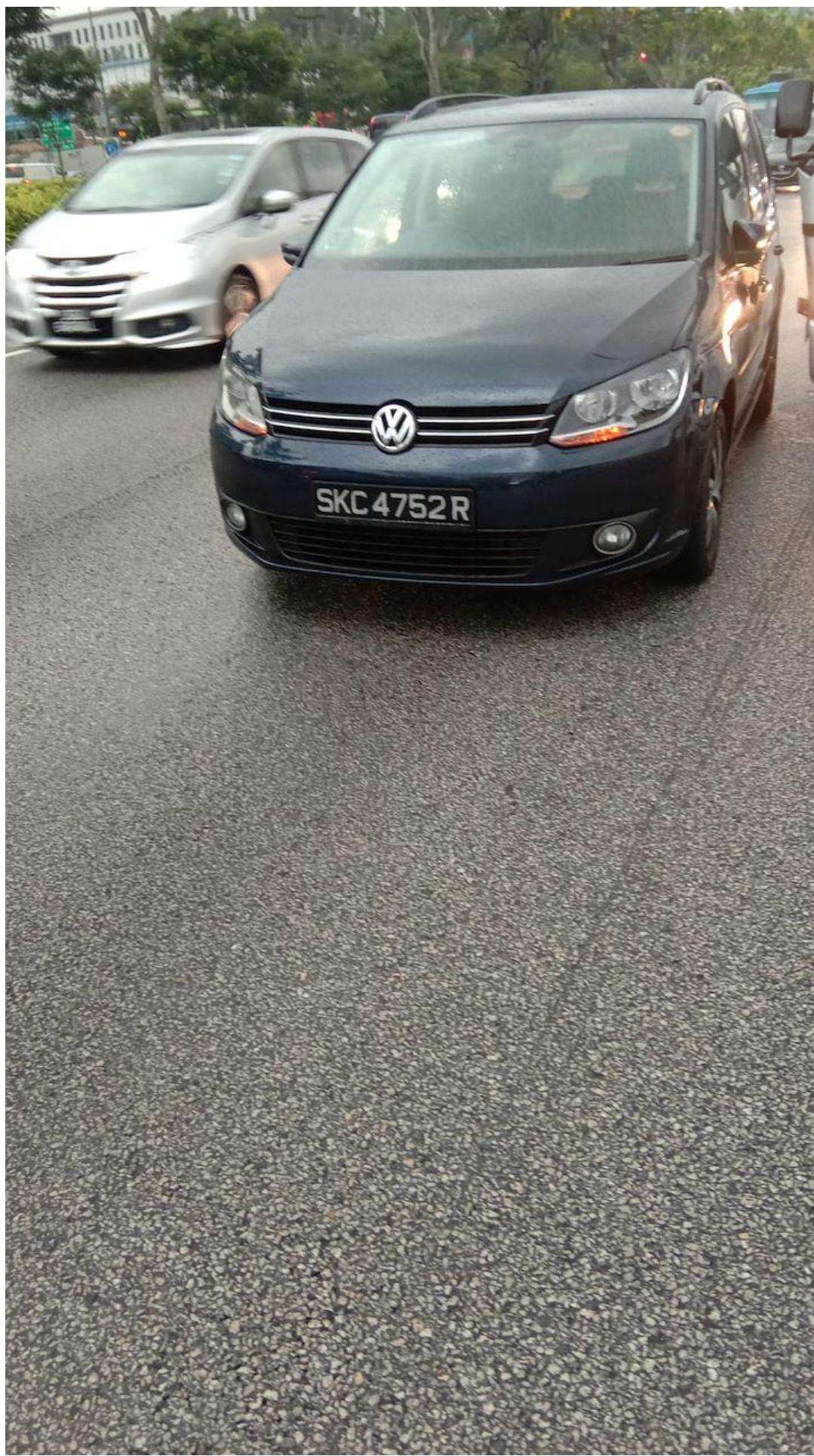




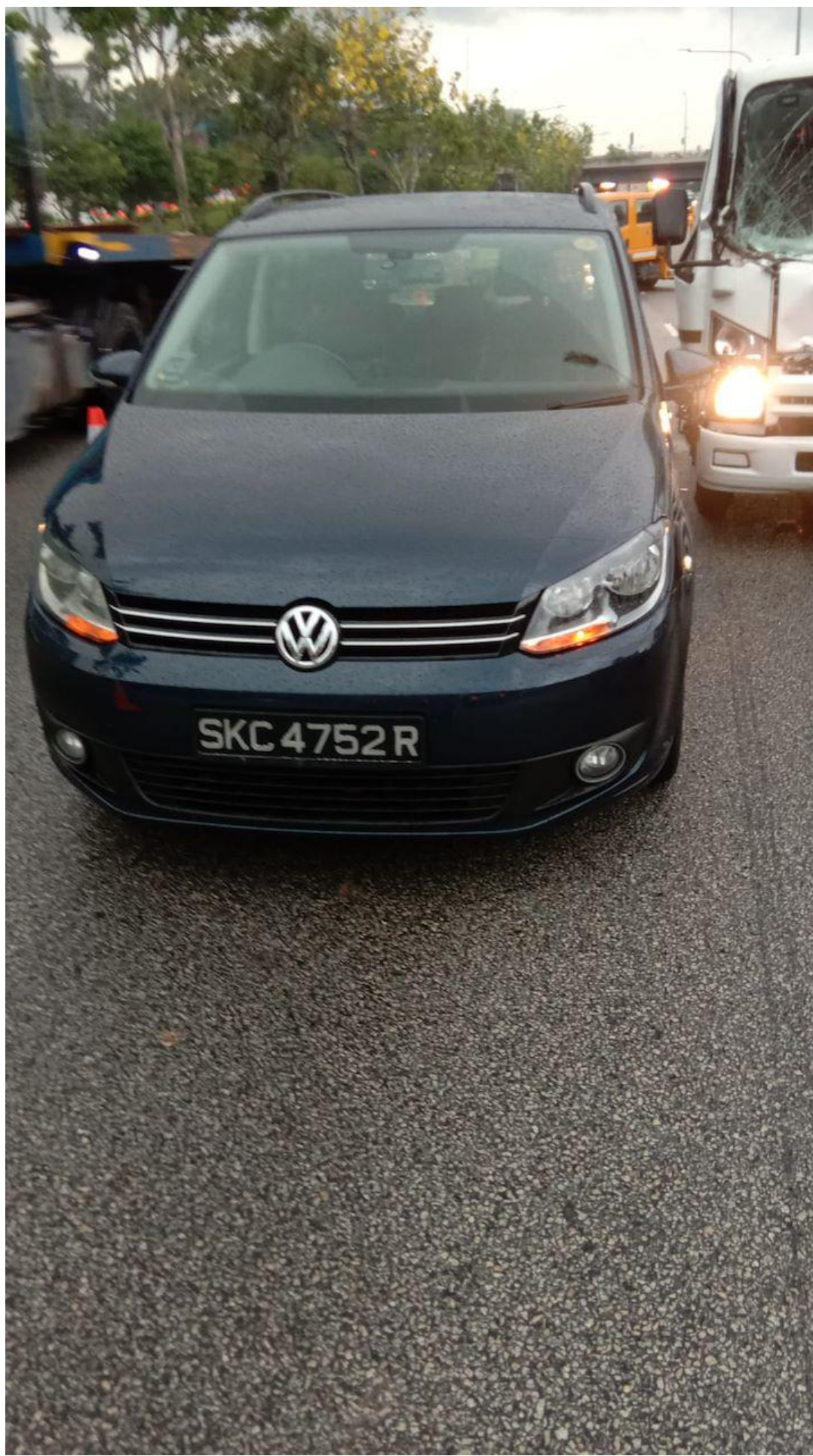


















**GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE**  
 6 Raffles Quay #18-00 Singapore 048580  
 Tel (65) 6224 0010 Fax (65) 6224 0030  
 Operating Hours : Monday to Friday, 09:00 – 17:00  
 UEN: S66SS0020G / GST Reg. No.: M400017735

**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

## ADDENDUM

### (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : SA1G224L0004 Vehicle Registration No: XE1952K  
 Name (as shown in NRIC) : KOH KOCK LEONG CONSTRUCTION PTE. LTD. NRIC/FIN/Passport No : 200617767G  
 (\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
 Address : \_\_\_\_\_ Singapore ( )  
 Contact (Tel) : 68978787 Mobile No. : \_\_\_\_\_  
 Email Address : admin@kkle.com.sg  
 Date of Accident : 20/4/2022 Time of Accident : 18:10 hours  
 Place of Accident : Along AYE Portsdown towards City  
 Insurance Company: Liberty Insurance Pte Ltd

### (B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Amend coverage from third party to comprehensive

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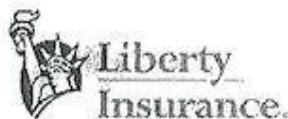
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\_\_\_\_\_  
 Policyholder / Driver's Signature  
 Date:

\_\_\_\_\_  
 Reporting Centre Personnel's Signature  
 Name:  
 NRIC/FIN No.:  
 Date:





**Liberty Insurance Pte Ltd**  
 Registration No. 199002781D  
 51 Club Street  
 #03-00 Liberty House  
 Singapore 069429  
 Tel: (65) 6221 8511  
 Website: <http://www.libertyinsurance.com.sg>

### CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 169)  
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1990  
 ROAD TRANSPORT ACT, 1987  
 ROAD TRANSPORT (AMENDMENT) ACT 2019  
 THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959

<b>Certificate No</b>	SD22V03934 /VCH /R03
<b>Form</b>	MZ301A
<b>Date Of Issue</b>	16-MAR-2022
<b>1.Index Mark and Registration No. of Vehicle:</b>	XE1952K
<b>2.Chassis number of Vehicle:</b>	YV2X1E1D0GB768592
<b>3.Name of Policyholder:</b>	KOH KOCK LEONG CONSTRUCTION PTE. LTD.
<b>4.Effective date of Commencement of Insurance for the purposes of the Act:</b>	12-MAR-2022 00:00 AM
<b>5.Date of Expiry of Insurance:</b>	11-MAR-2023 23:59 PM
<b>6.Persons or Classes of Persons entitled to drive*:</b>	<p>A) Whilst the vehicle is being used in connection with the Policyholder's business :-          Any person provided he is in the Policyholder's employ and is driving on their order or with their permission.          B) Whilst the vehicle is being used for social, domestic and pleasure purposes :-          Any person who is driving on the Policyholder's order or with their permission.</p> <p>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.</p>
<b>7.Limitations as to use:</b>	<p>A) Use in connection with the Policyholder's business.          B) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.          C) Use for social, domestic and pleasure purposes.</p>
<b>8.The Policy does not cover:</b>	<p>A) Use for racing, pace-making, reliability trials or speed-testing.          B) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.          C) Use for the carriage of passengers for hire or reward.</p>
<p>*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 169) and Section 95 of the Road Transport Act, 1987 are not to be included under these headings.</p>	
<p>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 169) and Part IV of the Road Transport Act, 1987.</p>	
<p>For and on behalf of  <b>LIBERTY INSURANCE PTE LTD</b>          Approved Insurers</p>	
<p>          Authorised Signature</p>	
<b>For information only:</b>	
<b>COVERAGE :</b>	Third Party Property Damage, Comprehensive, Unlimited Windscreen
<b>SUM INSURED:</b>	MARKET VALUE AT THE TIME OF LOSS
<b>EXCESS:</b>	Section I S\$1500, Section II S\$1000, Additional Excess - All Claims - Young, Elderly & Inexperienced Drivers S\$1000, Windscreen Excess S\$0
<b>FINANCE COMPANY:</b>	DBS BANK LTD
<b>PRODUCER NAME:</b>	TAN INSURANCE BROKERS PTE LTD

陳保險經紀私營有限公司  
**TAN INSURANCE BROKERS PTE LTD**  
 3A/5A Alimal Street, Chenn Leon Building  
 Singapore 199496  
 www.tib.com.sg  
 Tel: (65) 6742 6766 Fax: (65) 6742 6669

PLFM/20-MAR-22

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20-MAR-22

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