

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 04/05/2022 17:21 (SGT)
Date of Accident 28/04/2022 19:45 (SGT)
Exact Location of Accident Woodlands Ave 12, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBL4127E

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner AH BOY FRUITSCONNECT
Company Reg No 5XXXX387B
Email Address mstansg@yahoo.com.sg
Mobile Phone No (Phone) +65-96696873
Alternative Phone No +65-96696873

VEHICLE PARTICULARS

Manufacturer Nissan
Model Nv200
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 1598

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DMCVSNW00082902100
Cover Note Number -

DRIVER

Name of Driver TAN YAN PING
NRIC No SXXXX282I

Date Of Birth	28/01/1971
Occupation	Outdoor
Date Of Driving Pass	29/12/2008
Driving experience	13 YEARS AND 4 MONTHS
Gender	Female
Mobile Number	(Phone) +65-97730182
Alt. Phone Number	-
Email Address	mstansg@yahoo.com.sg
Address	BLK 53 NEW UPPER CHANGI ROAD
Address complement	#05-1472
Postcode	461053
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	SON
Gender	Male

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

PLS REFER TO THE ATTACHED STATEMENT.

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	HAVEN'T RETRIEVE
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBH2842H
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**IMPORTANT NOTICE**

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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' 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.

AHBOY FRUITSCONNECT
 (A Healthy Body, A Healthy Mind)
 The Marketplace @ 58, #01-92/93
 New Upper Changi Road, SG 461058
 Mobile: (+65) 9669-6873 / 9773-0182
 Web: www.ahboyfruitsconnect.com

Policyholder's Signature / Date & Time

Sketch Plan

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

Witnessed by Reporting Centre Personnel

Woodland Ave 12, Exit.



Ⓐ GBL4127E

Ⓑ GBH2842H

Describe Circumstances of the Accident

On 28/04/2022, I was travelling to deliver fruits to Customer Resident along Woodland Ave 12 around 7.45 pm, the traffic was busy, so I driving slowly. Infront there was a van so I slowly drive and stop. Suddenly the front van stop and I can't stop in time so I knock the van behind the door.

Declaration

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 New Upper Changi Road, SG 461058
 Mobile: (+65) 9669-6873 / 9773-0182
 Web: www.ambboyfruitconnect.com

Policyholder's Signature / Date & Time
 4/5/2022, 12:30pm

Driver's Signature (If driver is not the policyholder) / Date & Time
 4/5/2022 12:30pm

Witnessed by Reporting Centre Personnel





























