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 witholding 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.

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 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 09/05/2022 18:20 (SGT) Date of Accident 09/05/2022 09:00 (SGT) Exact Location of Accident SLE, Singapore Additional Location Information UPP THOMSON FLYOVER TO BKE Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMT6184D

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner CRANE WORLD ASIA PTE LTD Company Reg No 201007930G **Email Address** JIM@CRANEWORLDASIA.COM.SG Mobile Phone No (Phone) +65-65093690 Alternative Phone No (Office) +65-65093690

VEHICLE PARTICULARS

Manufacturer Honda Model Civic 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? Yes Vehicle Category Private car Transmission Auto CC 1597

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd Type of Coverage Comprehensive Fleet Policy Nο Policy Number GA587256 Cover Note Number

DRIVER

Name of Driver **CHUE JIN HAO** NRIC No. S9747006E

Date Of Birth 30/12/1997 Occupation Outdoor Date Of Driving Pass 24/10/2019 Driving experience 2 YEARS AND 7 MONTHS Gender Mobile Number (Phone) +65-96572019 Alt. Phone Number Email Address JIM@CRANEWORLDASIA.COM.SG Address 452 PASIR RIS DRIVE 6 #02-230 Address complement Postcode 510452 Is the driver the policyholder? Nο If No. Relationship of the Driver with the Insured **Employee** Does Driver Own Other Vehicles? 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 Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Nο **DETAILS OF POLICE ACTION** Was the accident reported to the police? Police Station Name Jurong West Neighbourhood Police Centre Police Station Phone No (Phone) +65-18002689999 Alt. Police Station Phone No (Fax) +65-62672438 Police Station Address 700 Corporation Road Singapore 649818 Was notice of intended Prosecution given? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO SKETCH PLAN ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes Was there any audio recorded? **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SJQ9872H Vehicle Manufacturer

Private car

Vehicle Model
Vehicle Variant
Vehicle Colour
Vehicle Category

Name of Driver	AHMAD AFFANDI BIN PARDI
NRIC No	S1545078I
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

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 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.
- 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:
 - 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")
 - 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
 - my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or (c) agents[including their lawyers/law firms], which may be sited outside of Singapore, for one or more of the above Purposes.
 - my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and (d) management in present and all future claims.
 - 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.

I AM AWARED THAT MY INSURER MAY HAVE A 14.0AYS TIMEFRAME FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY. I WILL CHECK MY POLICY FOR MORE DETAILS

Policyholder's Signature Date & Time:

MARKAC Skereblished on the

's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name:

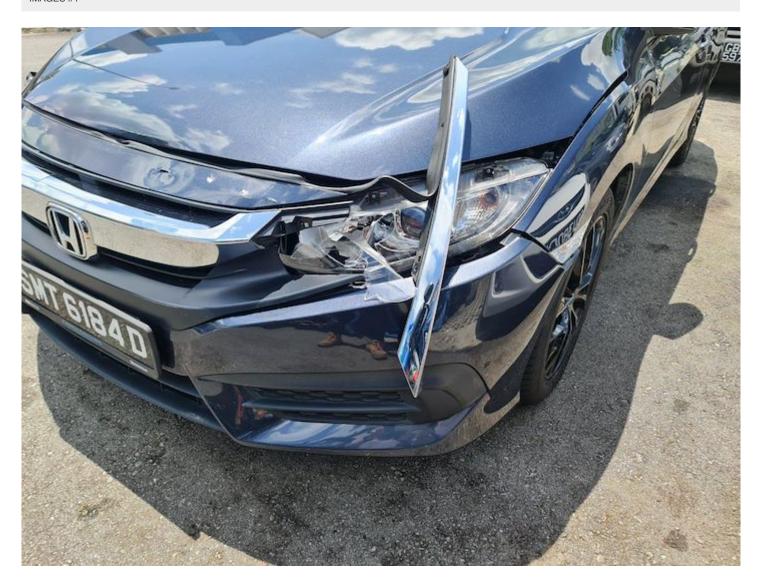
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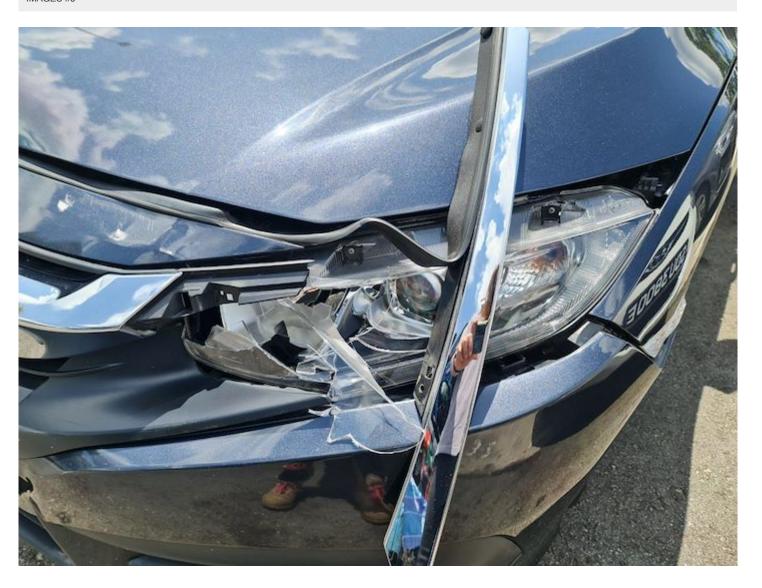
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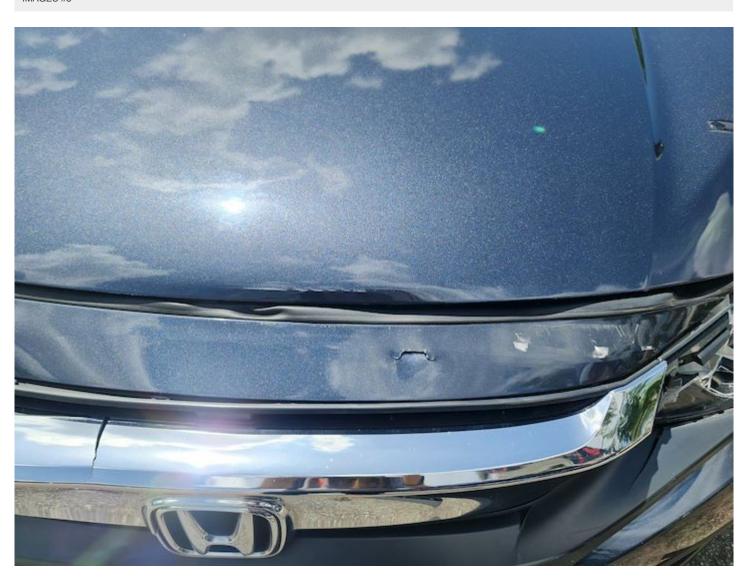


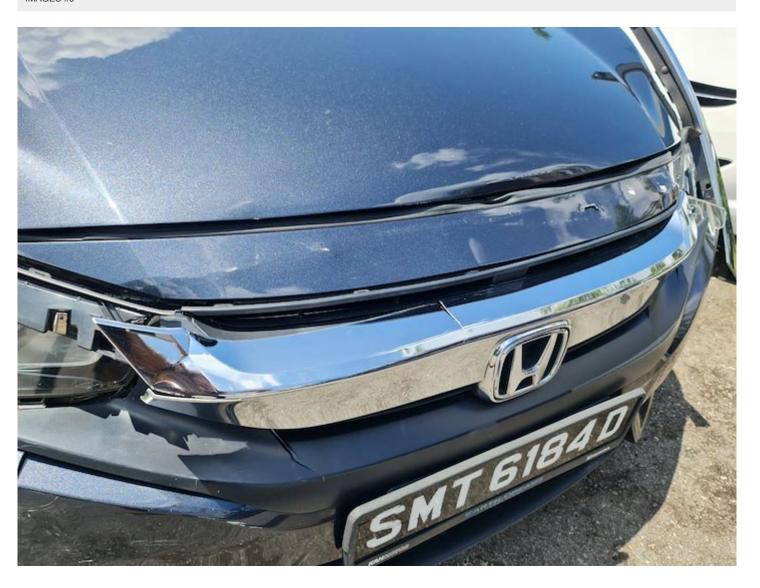












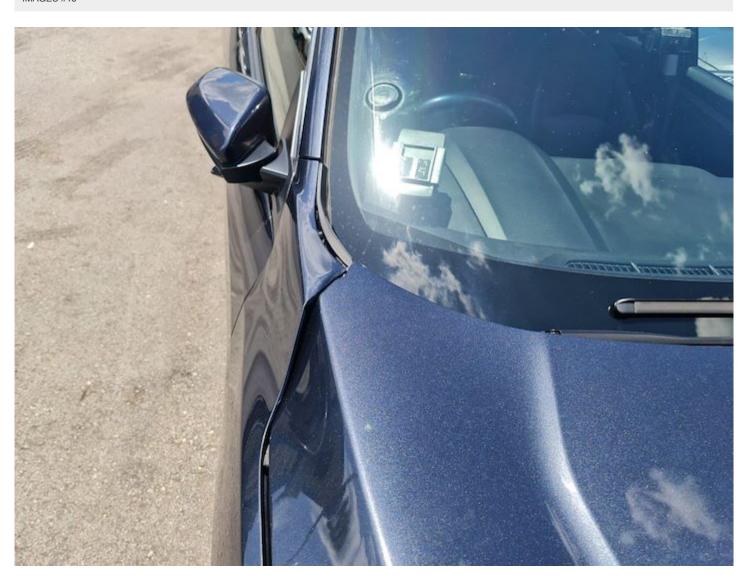




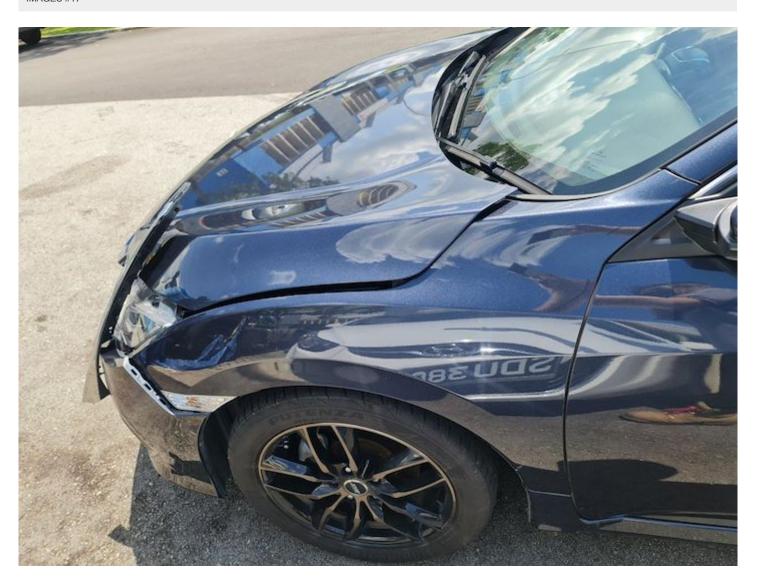


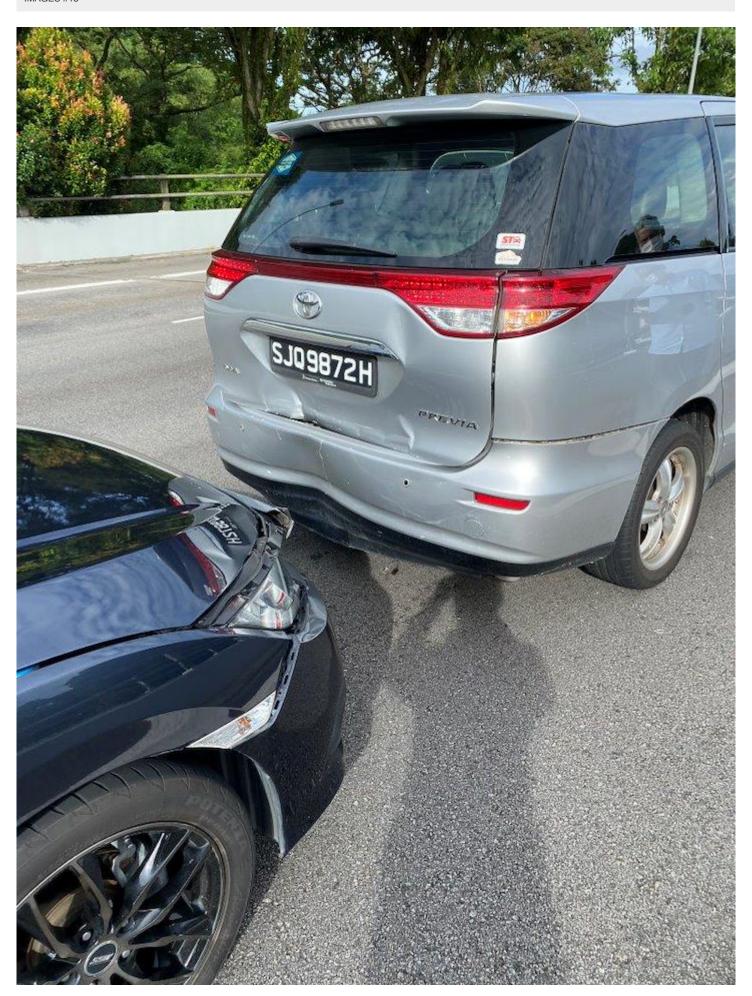


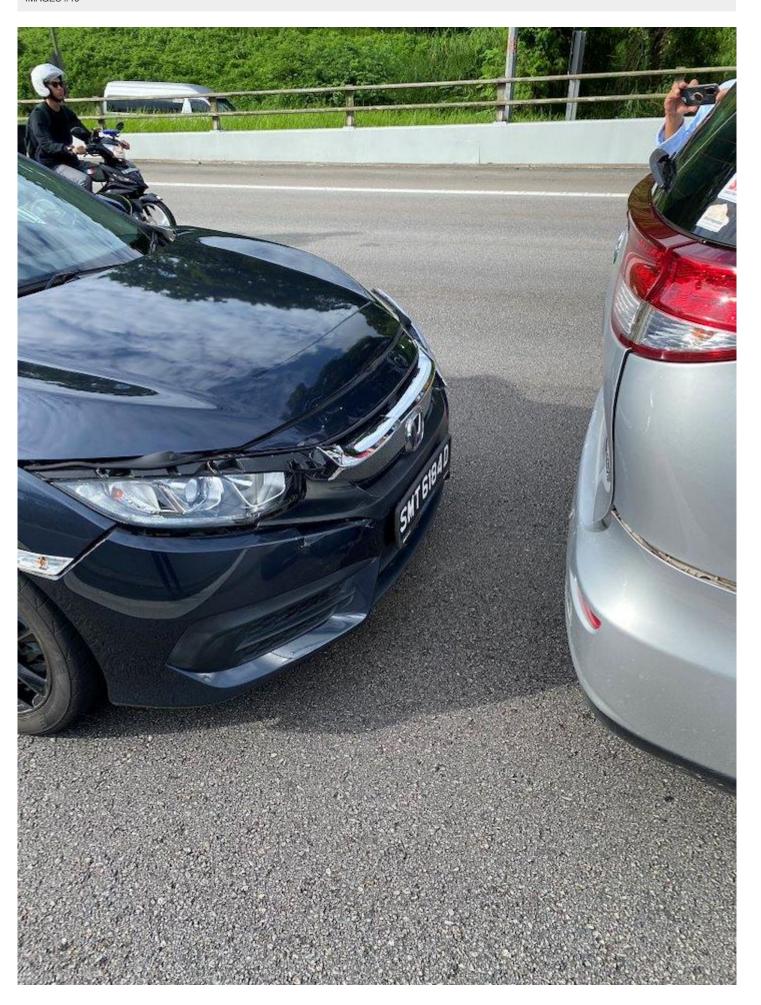










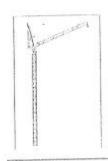




Аппех В

This is to confirm that	NOTICE OF REPORTING CHUE JIN HAO , NRIC/FIN
S9747006E , has reported	o the Police a non-injury traffic accident which
	to Upper Thomson Road_
Flyover, Lane 1	
on 09/05/2022 at 0900hrs a	n/pm involving the following vehicles: V1:SMT6184D & V2: SJQ9872H
2 If this accident was	eported to the Police within 24 hours of its occurrence, then 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: SGT Weng Soon Date: 09/05/2022 Time: 1300hrs



CRANE WORLD ASIA PTE LTD



Sales – Rent – Service Tower Cranes & Spare Parts

09 May 2022

To Whom It May Concerned

Re: LETTER OF AUTHORISATION

Driver's Name:

Chue Jin Hao

NRIC Number:

S9747006E

Vehicle Number:

SMT6184D

I hereby authorized our employee, Mr Chue Jin Hao with NRIC number S9747006E to use the company vehicle number SMT6184D.

Should you have any clarifications or require additional information, please contact the undersigned at 6509 3690.

Yours faithfully

June Koh General Manager

27 Pioneer Sector 1, Singapore 628433, Tel: +65 6509 3690 Fax: +65 6509 3696 Co. Reg. No. 201007930G GST Reg. No. 201007930G E-mail: craneworldasia@singnet.com.sg Website: www.craneworldasia.com