

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	07/07/2022 08:50 (SGT)
Reported by	Driver
Date of Accident	04/07/2022 16:50 (SGT)
Exact Location of Accident	5 Ang Mo Kio Ave 8, Singapore
Additional Location Information	X-JUNCTION OF ANG MO KIO AVE 5 & AVE 4
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GX298Z
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	25 HOLDINGS PTE LTD
Company Reg No	201530795G
Email Address	ALVIN@25HOLDINGS.COM
Mobile Phone No	(Phone) +65-93688353
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Liteace
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	Goods vehicle
Transmission	Manual
CC	1495

INSURANCE COMPANY

Name of Insurance Company	MS First Capital Insurance Ltd
Policy Number / Cover Note Number	D-22098657MCVP

DRIVER

Name of Driver	HE XIAOFEI
Passport No/FIN	F2774737Q
Date Of Birth	18/12/1981
Occupation	Outdoor

Date Of Driving Pass	30/11/2016
Driving experience	5 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-84197944
Alt. Phone Number	-
Email Address	ALVIN@25HOLDINGS.COM
Address	BLK 448 ANG MO KIO AVE 10
Address complement	#01-1705
Postcode	560448
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	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	No
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Changi Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18005872999
Alt. Police Station Phone No	(Fax) +65-65872900
Police Station Address	9 Simei Street 2 Singapore 529914
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT NO.: T/20220705/2029

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

SKETCH PLAN

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8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

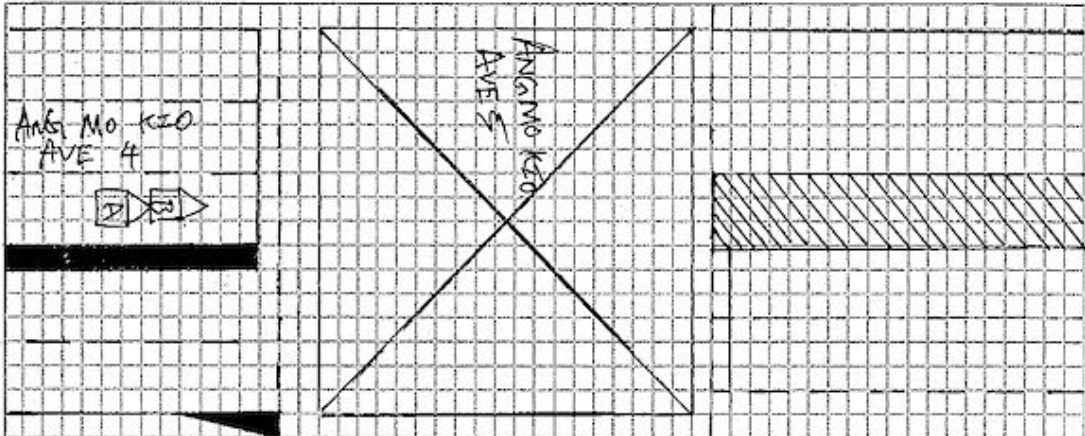
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.
- (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.

X
Policyholder's Signature
Date & Time

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

Joanne Chan Mei Sim (CSO)
Tel : 6592 8813
Fax : 6442 5577
Reporting Centre Personnel's Signature
Name:
NRIC / Fin No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO POLICE REPORT T/20220705/2029

IMPORTANT NOTE


Under General Condition – Conduct of Claim of the Motor Policy, you have to decide within 14 days of occurrence or discovery of damage whether or not to claim under the policy. Please check your policy for more information.

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


 Joanne Chan Mei Sim
 Tel : 6592 8873
 Fax : 6442 5571

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















**SINGAPORE
POLICE FORCE**



T/20220705/2029

1 of 3

Police Station Of Origin:
Changi N.P.C
9 Simei Street 2 SINGAPORE 529914
Tel No: 1800-5872999

Report No. T/20220705/2029

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/07/2022 12:56	Vide Report No.:	Station Diary No.: 53
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Informant's Particulars

Name of Informant: HE XIAOFEI	Address: 448 ANG MO KIO AVENUE 10 #01-1705 SINGAPORE 560448		
ID Type / ID No.: FIN NO / G2774737Q	Contact No.: Home/Office: Mobile: 84197944		
Nationality: CHINESE	Email:		
Sex: Male	Age: 40	Date of Birth: 18/12/1981	Type of Informant: Driver
Race: Chinese	Language:		Institution / School Name:
Occupation: DRIVER	Driving Licence Information: Class:		Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 04/07/2022 16:50	Type of Location: X-Junction
Location: ANG MO KIO AVENUE 5				
Weather: Drizzling		Road Surface: Wet	Road Speed Limit:	
Traffic Flow:		Traffic Control: Traffic Light - Working	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GX298Z	Van	TOYOTA	Liace	Yellow	Slightly Damaged	0
SJA2384E	Car	TOYOTA	vios	Silver		1

Details of Person Involved

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



**SINGAPORE
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T/20220705/2029

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Report No. T/20220705/2029

CONTINUATION OF REPORT

Driver			
Name	HE XIAOFEI	ID No.	G2774737Q
Related Vehicle	GX298Z (Van)	Contact No.	84197944
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	SIAU WUI SEONG	ID No.	S7132139H
Related Vehicle	SJA2384E (Car)	Contact No.	94766631
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 04/07/2022 at around 1650hrs, I was driving my company yellow color Toyota van bearing registration plate number GX298Z along Ang Mo Kio Avenue 5 most right lane waiting to make a right turn at the cross junction of Ang Mo Kio Avenue 5 turning into Ang Mo Kio Avenue 4. At that point of time, the traffic light turning right was red and there was a silver color Toyota Vios car bearing registration plate number SJA2384E that was in front of my van waiting to make a right turn into Ang Mo Kio Avenue 4. At that point of time, my handphone rang and I took a glance to check who called. However, I did not touch my handphone which was on the center compartment. Later, I saw vehicles that were on the left side of my van moving off and I thought that it was green light to turn right, I then moved off my van and my van front portion then collided onto the said Toyota car rear portion. The collision resulted in my van's front portion to suffer some scratches. Both of us then alighted to exchange particulars before driving off to prevent further obstruction to the traffic along the traffic junction.

The van belongs to my company Perromart and they have been informed about the accident that have taken place. There is an in-car camera installed inside the van that was recording the front portion of the van. I have no injuries and the other driver also never suffer from any injury.

I am lodging this report for my record and insurance claim purpose.



**SINGAPORE
POLICE FORCE**

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Changi N.P.C
9 Simei Street 2 SINGAPORE 529914
Tel No: 1800-5872999



T/20220705/2029

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Report No. T/20220705/2029

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:
G /
SGT 3 ALVIN TAY MING WEI

Signature Of Informant:

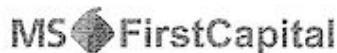
Signature Of Interpreter:
Not applicable

Date/Time:
05/07/2022 12:56

Officer In Charge Of Case:
TP / GIA /
Other MUHAMMAD NOOR BIN ABDUL
RAHMAN
Contact No.: 65476219

Classification Of Case:

NP168



MS First Capital Insurance Limited Co. Reg. No. 195000105C GST Reg. No. M2-0001676-9
6 Raffles Quay #21-00 Singapore 048580
Tel: (65) 6222 2311 Fax: (65) 6222 3547

Claims & Motor Underwriting Dept: 36 Robinson Road #16-01 City House Singapore 068877
Tel: (65) 6507 3848 Fax: (65) 6507 3849
www.msfirstcapital.com.sg

CERTIFICATE OF INSURANCE

ORIGINAL

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

Type of Policy. : COMMERCIAL VEHICLE - PRIVATE INSURANCE
Type of Cover. : Third Party
Certificate No. : D-22098657MCVP
Vehicle No / Chassis No : GX298Z / CR425007794
Name of Insured : 25 HOLDINGS PTE LTD
Period Of Insurance : 31.01.2022 To 30.01.2023
Insured Estimated Value : 0.00

Excess :

SGD3,500.00 ALL CLAIMS IS IMPOSED ON THOSE DRIVERS WHO ARE BELOW
23 YEARS OLD AND/OR WHO HAVE LESS THAN 3 YEARS OF DRIVING EXPERIENCE
ALL EXCESS AMOUNTS ARE SUBJECT TO GST

Authorised Driver*

ANY AUTHORISED DRIVERS

Persons or classes of persons entitled to drive*

Any person who is driving on the insured's order or with their permission.

* 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.

Limitations as to use*

- (1) Use in connection with the insured's business.
- (2) Use for the carriage of passengers (other than for hire or reward) in connection with the insured's business.
- (3) Use for social, domestic or pleasure purposes.

The Policy does not cover:-

- (1) Use for hire or reward or for racing, pacemaking, reliability trial or speed-testing.
- (2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

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 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

MS First Capital Insurance Limited
(Approved Insurers)

ITHMINAH/A0021/MZ300C

Issued at Singapore on 13.12.2021

Authorised Signature