

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	08/07/2022 16:50 (SGT)
Reported by	Driver
Date of Accident	08/07/2022 07:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	PIONEER ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YN1562T
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	HOCK CHUAN HONG CORPORATION PTE LTD
Company Reg No	200906486N
Email Address	POHCHINGKIONG@HCHCORP.COM.SG
Mobile Phone No	(Phone) +65-96683851
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Hino
Model	XZU415R
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	Goods vehicle
Transmission	Manual
CC	4009

INSURANCE COMPANY

Name of Insurance Company	Lonpac Insurance Bhd
Policy Number / Cover Note Number	Z22VC05011079

DRIVER

Name of Driver	YANG GUANGSHI
Work Permit No	G8980399W
Date Of Birth	16/05/1991
Occupation	Outdoor

Date Of Driving Pass	27/08/2021
Driving experience	11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-86899678
Alt. Phone Number	-
Email Address	997726639@QQ.COM
Address	14 TUAS SOUTH STREET 12 S636953
Address complement	-
Postcode	-
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	DRIZZLING
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?	Yes
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	Nanyang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18007929999
Alt. Police Station Phone No	(Fax) +65-67912972
Police Station Address	No. 2 Jurong West Avenue 5 Singapore 649482
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED REPORT

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMP6376M
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)	-

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' law firms/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;

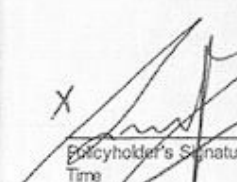

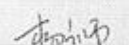

(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

(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' law firms/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

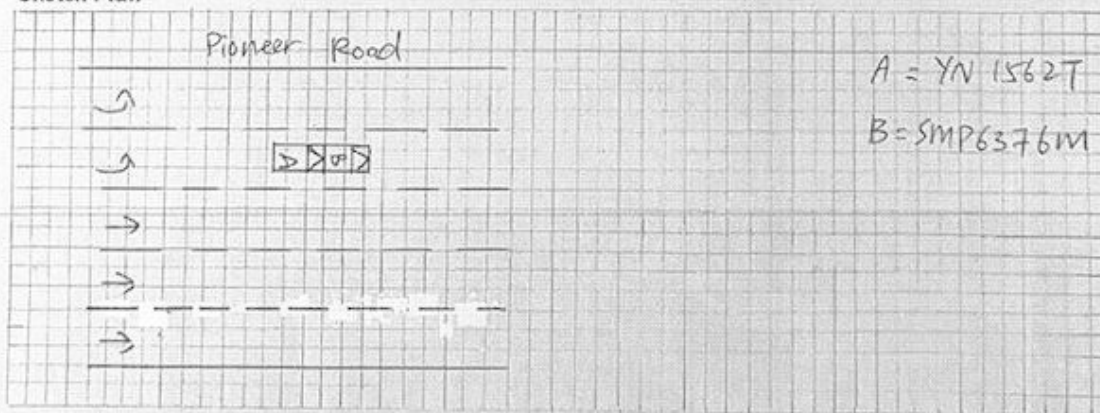
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law firms/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time _____
 Driver's Signature (If driver is not the policyholder) / Date & Time _____
 Witnessed by Reporting Centre Personnel LEK SIU ENG

Sketch Plan

Pioneer Road



A = YN 1562T
 B = SMP6376M

Describe Circumstances of the Accident

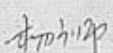
Refer to Police Report No = 7/20220708/2030

Declaration

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

X 
 Policyholder's Signature
 Time



 8/7/2022 2:30 pm
 Driver's Signature (if driver is not the policyholder) / Date
 & Time



Witnessed by Reporting Centre
 Personnel LEK SIU ENG
























**SINGAPORE
POLICE FORCE**


T/20220708/2030

1 of 3

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

Report No. T/20220708/2030

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/07/2022 10:56	Vide Report No.: E/20220708/0044	Station Diary No.: 45
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Informant's Particulars

Name of Informant: YANG GUANGSHI	Address:		
ID Type / ID No.: FIN NO / G8980399W	Contact No.: Home/Office: Mobile: 86899678		
Nationality: CHINESE	Email:		
Sex: Male	Age: 31	Date of Birth: 16/05/1991	Type of Informant: Driver
Race: Chinese	Language:		Institution / School Name:
Occupation: Lorry driver	Driving Licence Information: Class: 3,4 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 08/07/2022 07:00	Type of Location: Bend
Location: PIONEER ROAD				
Weather: Drizzling		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Heavy
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SMP6376M	Car			Grey	Seriously Damaged	1
YN1562T	Lorry			White	Slightly Damaged	0

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20220708/2030

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Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

Report No. T/20220708/2030

CONTINUATION OF REPORT

Driver			
Name	YANG GUANGSHI	ID No.	G8980399W
Related Vehicle	YN1562T (Lorry)	Contact No.	86899678
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 08/07/2022 at about 0700hrs, I was driving my company lorry (YN1562T) along Tuas Rd. I wanted to turn left into the slip road to PIE, however there was a stationary car (SMP6376M) at the slip road. I slowly came to a stop behind the car, however my foot slipped from the brake pedal.

I could not stop my lorry in time, hence my lorry inched forward and collided into the rear of the car. The impact shattered the rear windscreen of the car. I immediately alighted to check on the situation and noticed that there was a male driver of the car and a 7-months old baby at the backseat. No one was injured.

The driver called for Police and ambulance, who subsequently arrived at scene. The baby was not injured, however was conveyed to hospital for further checks. TP handed me a case card and advised me to lodge a traffic accident report. My lorry sustained 2 slight dents at the front of the vehicle. I am following traffic rules at that time of incident.



SINGAPORE POLICE FORCE

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999



T/20220708/2030

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Report No. T/20220708/2030

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:

J /

SGT 2 JASPER TEIW KAI JIE

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

08/07/2022 10:56

Officer In Charge Of Case:

TP / GIT /

Other MUHAMMAD SYARIFUDDIN

MUHAMMAD AJMAIN

Contact No.: 65476367

Classification Of Case:

NP168