

## 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 Actual 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 .....	06/09/2022 18:01 (SGT)
Reported by .....	Driver
Date of Accident .....	05/09/2022 14:45 (SGT)
Exact Location of Accident .....	AYE, Singapore
Additional Location Information .....	NEAR CLEMENTI AVE 6 EXIT
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	YM7103B
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#### INSURED/POLICYHOLDER

Is company? .....	Yes
Name Of Registered Owner .....	BIG-FOOT LOGISTIC PTE LTD
Company Reg No .....	199500061H
Email Address .....	vmo1@bigfoot.com.sg
Mobile Phone No .....	(Phone) +65-63244722
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Nissan
Model .....	PKC37BNHNP
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 - Claiming third party
Vehicle Category .....	Commercial vehicle
Transmission .....	Manual
CC .....	7684

#### INSURANCE COMPANY

Name of Insurance Company .....	Allied World Assurance Company, Ltd
Policy Number / Cover Note Number .....	BVFCB0013872201

#### DRIVER

Name of Driver .....	WANG SHICHAO
Passport No/FIN .....	G8512161N
Date Of Birth .....	05/03/1989
Occupation .....	Outdoor

Date Of Driving Pass .....	22/10/2018
Driving experience .....	3 YEARS AND 11 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-63505050
Alt. Phone Number .....	-
Email Address .....	vmo1@bigfoot.com.sg
Address .....	8 JOO KOON ROAD
Address complement .....	-
Postcode .....	628972
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 .....	Chain Collision
Weather Conditions .....	Clear
Road Surface .....	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? .....	No
Number of vehicles involved in the accident .....	3
Was anybody injured in the Accident? .....	Yes
Was any injured conveyed to hospital by ambulance? .....	No
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 .....	ONLINE
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT #: T/20220906/7144

#### 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 .....	YM7126K
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) ..... -

## INJURED PERSONS DETAILS

### INJURED 1

Name of injured person ..... -  
Gender ..... Male  
Phone No ..... -  
Address ..... -  
Address Complement ..... -  
Post Code ..... -  
Approximate Age Years Old ..... -  
Injuries Sustained ..... -  
Injured person in which vehicle? ..... YM7126K  
Were seat belts worn? ..... -  
Was this injured conveyed to hospital by ambulance? ..... No

# SKETCH PLAN

## IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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. 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 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.
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.



Policyholder's Signature / Date & Time

Sketch Plan

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

Witnessed by Reporting Centre Personnel



A: TRAILER

B: YM7103B

C: YM7126K

Describe Circumstances of the Accident


REFER TO POLICE REPORT : T/20220906/7144

X 2

Declaration

We declare the foregoing particulars are true in every respect.

  
Policyholder's Signature / Date & Time

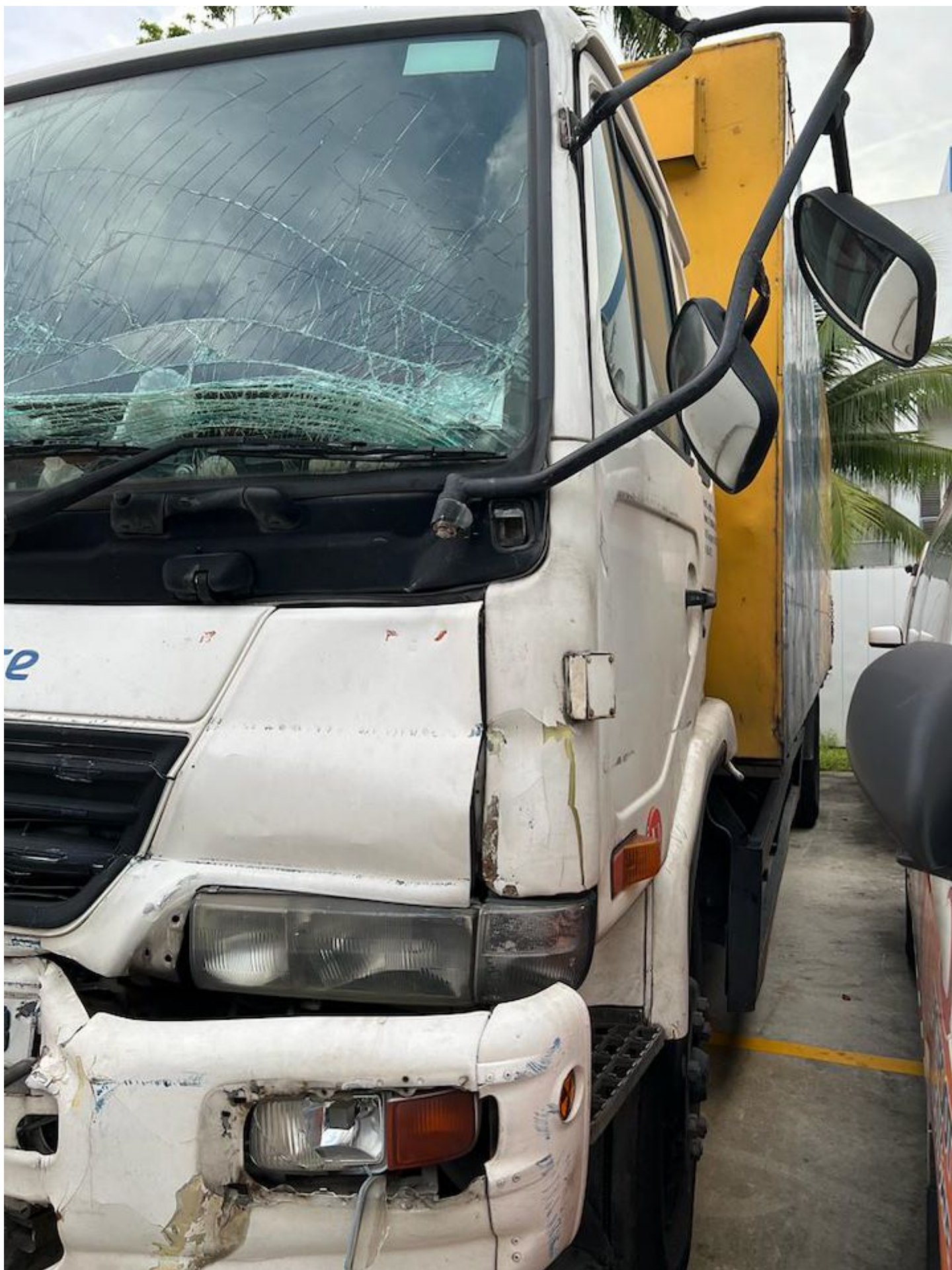
 X 2  
Driver's Signature (If driver is not the policyholder) / Date & Time

  
Witnessed by Reporting Centre Personnel









































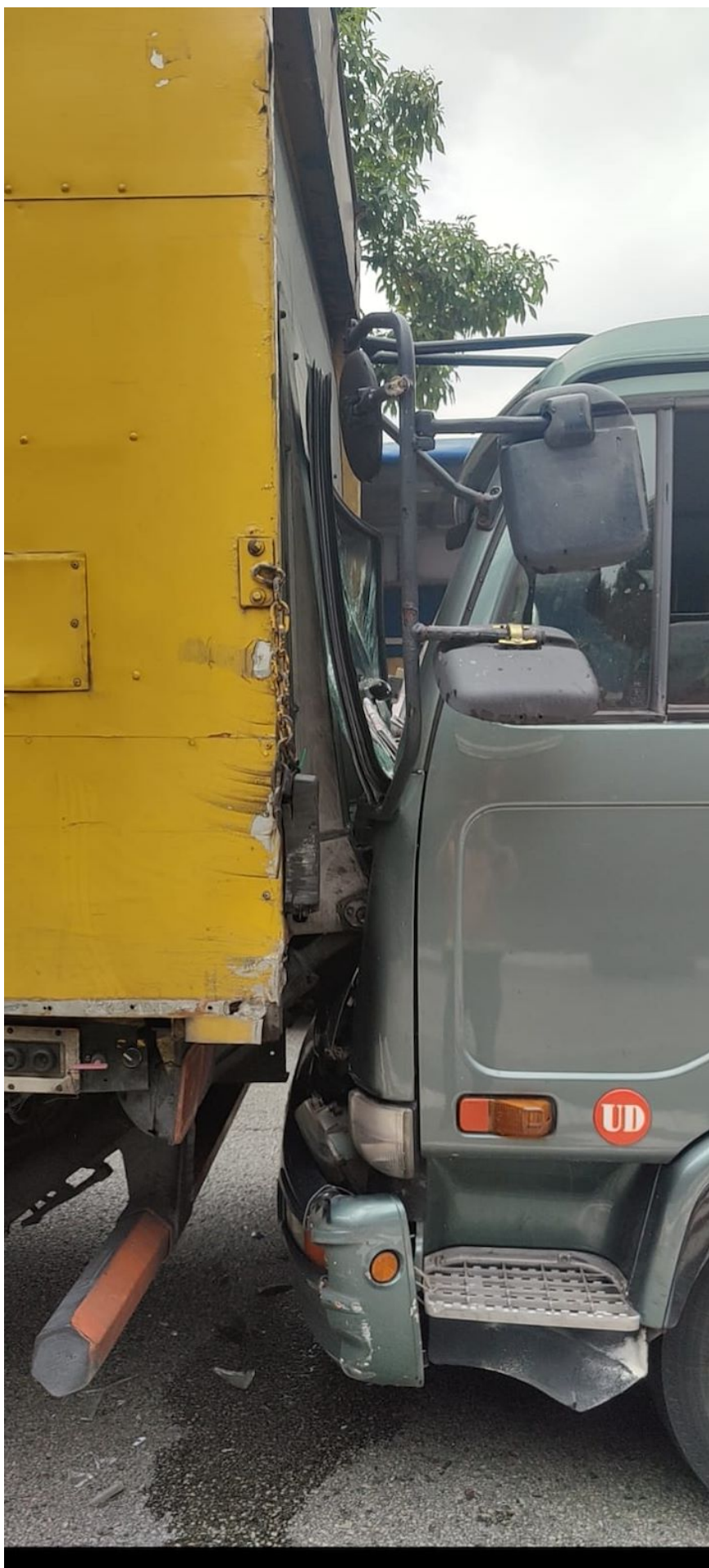






















**SINGAPORE  
POLICE FORCE**



T/20220908/7041

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

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Report No. T/20220908/7041

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 08/09/2022 16:45		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: ROSLEE BIN PUASA			Address: 421 ANG MO KIO AVENUE 10 #13-1149 SINGAPORE 560421		
ID Type / ID No.: NRIC NO / S7145891A			Contact No.: Home/Office: Mobile: 97481150		
Nationality: SINGAPORE CITIZEN			Email: ROSLEE@BIGFOOT.COM.SG		
Sex: Male	Age: 50	Date of Birth: 22/12/1971	Type of Informant: CLAIMS DEPT - Reporting on behalf of Driver		
Race: Boyanese			Language: English		Institution / School Name:
Occupation:			Driving Licence Information: Class:		Date of Expiry:

**General Information of the Accident**

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 05/09/2022 14:45	Type of Location: EXPRESSWAY
Location:  AYER RAJAH EXPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 50 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: CHAIN COLLISION				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of
YM7103B	Lorry	NISSAN	PKC37BNH NP	White	Seriously Damaged	0
YM7126K	Lorry					0
	TRAILER					0



**SINGAPORE  
POLICE FORCE**



T/20220908/7041

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

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Report No. T/20220908/7041

## CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
YM7103B	ALLIED WORLD ASSURANCE COMPANY, LTD (SINGAPORE BRANCH)	BVFCB00138722 01	28/08/2022	27/08/2023

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	WANG SHICHAO		ID No.	G8512161N
Related Vehicle	YM7103B (Lorry)		Contact No.	63505050
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: 3,4 Date of Expiry: 30/05/2023
Date	NIL		Date	NIL
No. of Days granted Medical Leave	NIL		Degree of	NIL
Driver				
Name	Unknown Driver		ID No.	NIL
Related Vehicle	NIL		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: 3,4 Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave	NIL		Degree of	Slight
CLAIMS DEPT - Reporting on behalf of Driver				
Name	ROSLEE BIN PUASA		ID No.	S7145891A
Related Vehicle	NIL		Contact No.	97481150
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave	NIL		Degree of	NIL





SINGAPORE  
POLICE FORCE



T/20220908/7041

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

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Report No. T/20220908/7041

## CONTINUATION OF REPORT

Brief Details.

This Police Report will be used henceforth instead of the earlier Police Report No. T/20220906/7144.

I am reporting this accident on behalf of our Driver, Wang ShiChao.

"On 05/09/2022 @2.45pm, I (Wang ShiChao) was driving my company vehicle YM7103B on lane 3 along AYE expressway towards Changi near Clementi Ave 6 Exit, when I saw a small car changed lanes from lane 2 to lane 3 and drove in front of the trailer which was directly ahead of me. This trailer suddenly stopped and upon seeing this, I gradually applied my brakes and came to a stop with a good gap between my vehicle and the trailer.

However, the vehicle directly behind my vehicle hit the rear of my truck and my truck surged forward to hit the front trailer. My vehicle was damaged at the front and the rear.

The damage on the trailer was very minimal as only the iron bar was dented at the rear. The driver of this trailer was not injured in the accident.

The front part of the last vehicle YM7126K was damaged. The driver of this vehicle was the only one injured in this accident. His passenger did not sustain any injury."



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000



T/20220908/7041

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Report No. T/20220908/7041

**CONTINUATION OF REPORT**

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPB /  
MUHAMMAD AFIQ BIN RAHMAT  
Contact No.: 65476171

NP168

Signature Of Informant:  
The identity of the person making this report has  
been authenticated by Singpass. No signature is  
required.

Date/Time:  
08/09/2022 16:45

Classification Of Case:





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

### ADDENDUM

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

Original Report No: SBON22960001 Vehicle Registration No: YM71038  
 Name (as shown in NRIC): ROSLEE BIN PUASA NRIC/FIN/Passport No: SXXXX5891A  
 (\*Vehicle Driver/Policyholder) (\*) Please delete as appropriate  
 Address: 8, JOO KOON ROAD Singapore (628972)  
 Contact (Tel): 63244722 Mobile No.: 97481150  
 Email Address: roslee@bigfoot.com.sg  
 Date of Accident: 05/09/2022 Time of Accident: 14:45  
 Place of Accident: AYE EXPRESSWAY  
 Insurance Company: ALLIED WORLD ASSURANCE COMPANY, LTD (SINGAPORE BRANCH)

**(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:

1) A fresh Police Report No: T/20220908/7041.  
 (This will replace the old Police Report No: T/20220906/7144)

2) More accident <sup>scene</sup> photos will be uploaded.



Policyholder / Actual Driver's Signature  
 Date: 08/09/22



Reporting Centre Personnel's Signature  
 Name (as in NRIC/ID card):  
 Date: 08/09/22

COMMERCIAL VEHICLE (SCH 2) - R

MZ301  
R SB  
B152SD0  
Cov.Type: T  
KUKTASB

# CERTIFICATE OF INSURANCE

THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP 189) OF THE REPUBLIC OF SINGAPORE  
THE ROAD TRANSPORT ACT 1987, ROAD TRANSPORT (AMENDMENT) ACT 2019, AND THE MOTOR VEHICLES (THIRD PARTY RISKS) RULES 1959 OF MALAYSIA  
THE AGREEMENT BETWEEN THE MINISTER FOR FINANCE (SINGAPORE) AND THE MOTOR INSURERS' BUREAU OF SINGAPORE DATED 22 FEBRUARY 1975  
THE AGREEMENT BETWEEN THE MINISTER OF TRANSPORT (MALAYSIA) AND THE MOTOR INSURERS' BUREAU OF WEST MALAYSIA DATED 15 JANUARY 1968  
ANY SUBSEQUENT REVISIONS TO THE ABOVE ACTS AND AGREEMENTS

**CERTIFICATE No.** BVFCSB0013872201 ChaNo:PKC37BN00173

**1. Index Mark and Registration  
Number of Vehicle:**

YM 7103 B

**2. Name of Policyholder:**

BIG-FOOT LOGISTIC PTE LTD

**3. Effective Date of Commencement  
of Insurance for the purposes  
of the Ordinance:**

28 August 2022

**4. Date of Expiry of Insurance:**

27 August 2023

**5. Persons or Classes of Persons entitled to drive\* (For certificate references MX1 and MX4, see overleaf)**

1. 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.
2. WHILST THE VEHICLE IS BEING USED FOR SOCIAL, DOMESTIC OR PLEASURE PURPOSES - ANY PERSON WHO IS DRIVING ON THE POLICYHOLDER'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.

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.

**6. Limitations as to Use\* (For certificate reference MX1, see overleaf)**

- 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.
- THE POLICY DOES NOT COVER :
1. USE FOR RACING, PACE-MAKING, RELIABILITY TRIAL OR SPEED-TESTING.
  2. USE WHILST DRAWING A TRAILER EXCEPT THE TOWING OF ANY ONE DISABLED MECHANICALLY PROPELLED VEHICLE.
  3. USE FOR THE CARRIAGE OF PASSENGERS FOR HIRE OR REWARD.

Type of Cover : Third Party

\* Limitations rendered inoperative by Section 79 of the Road Traffic Ordinance 1958 (Malaysia) or Section 7 of the Motor Vehicle (Third-Party Risks and Compensation) Ordinance 1960 (Republic of Singapore) are not to be included under the headings.

I/We hereby certify that the policy to which this certificate relates is issued in accordance with the provisions of Part IV of the Road Transport Act 1987 (Malaysia), the Road Transport (Amendment) Act 2019 (Malaysia), the Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia) and The Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Republic of Singapore).



Approved Insurers.

Examined By: