

## 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 .....              | 28/10/2022 16:37 (SGT)   |
| Reported by .....                     | Both                     |
| Date of Accident .....                | 13/10/2022 00:20 (SGT)   |
| Exact Location of Accident .....      | Sengkang E Dr, Singapore |
| Additional Location Information ..... | -                        |
| Country/State of Loss .....           | Singapore                |

### DETAILS OF OWN VEHICLE

|                                   |          |
|-----------------------------------|----------|
| Vehicle Registration Number ..... | GBE6277D |
|-----------------------------------|----------|

#### INSURED/POLICYHOLDER

|                                |                        |
|--------------------------------|------------------------|
| Is company? .....              | Yes                    |
| Name Of Registered Owner ..... | DML MARINE AND SERVICE |
| Company Reg No .....           | 53400585C              |
| Email Address .....            | dinomarklee@icloud.com |
| Mobile Phone No .....          | (Phone) +65-92295885   |
| Alternative Phone No .....     | -                      |

#### VEHICLE PARTICULARS

|                                                                                    |                     |
|------------------------------------------------------------------------------------|---------------------|
| Manufacturer .....                                                                 | Kia                 |
| Model .....                                                                        | K2500               |
| 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 .....                                                                 | Manual              |
| CC .....                                                                           | 2500                |

#### INSURANCE COMPANY

|                                         |                                               |
|-----------------------------------------|-----------------------------------------------|
| Name of Insurance Company .....         | China Taiping Insurance (Singapore) Pte. Ltd. |
| Policy Number / Cover Note Number ..... | DMCVSNW00088442202                            |

#### DRIVER

|                      |                       |
|----------------------|-----------------------|
| Name of Driver ..... | Mark Dino Lee See Hee |
| NRIC No .....        | S7401984F             |
| Date Of Birth .....  | 04/02/1974            |
| Occupation .....     | Outdoor               |

|                                                                    |                                |
|--------------------------------------------------------------------|--------------------------------|
| Date Of Driving Pass .....                                         | 18/10/2011                     |
| Driving experience .....                                           | 11 YEARS                       |
| Gender .....                                                       | Male                           |
| Mobile Number .....                                                | (Phone) +65-92295885           |
| Alt. Phone Number .....                                            | -                              |
| Email Address .....                                                | dinomarklee@icloud.com         |
| Address .....                                                      | Blk 637B Punggol Drive #04-413 |
| Address complement .....                                           | -                              |
| Postcode .....                                                     | 822637                         |
| Is the driver the policyholder? .....                              | No                             |
| If No, Relationship of the Driver with the Insured .....           | Authorised driver              |
| 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 .....   | No Collision |
| Weather Conditions ..... | Drizzling    |
| Road Surface .....       | Wet          |

#### OTHER INFORMATION

|                                                                                                           |    |
|-----------------------------------------------------------------------------------------------------------|----|
| Was any foreign vehicle involved in the accident? .....                                                   | No |
| Number of vehicles involved in the accident .....                                                         | 1  |
| 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 .....                       | Serangoon North Neighbourhood Police Post                 |
| Police Station Address .....                    | Blk 108 Serangoon North Avenue 1 #01-709 Singapore 550108 |
| Was notice of intended Prosecution given? ..... | No                                                        |
| If yes, against whom? .....                     | -                                                         |

#### CIRCUMSTANCES OF ACCIDENT

Please refer to the police report.

#### ATTACHMENT(S)

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

**SKETCH PLAN****IMPORTANT NOTICE**

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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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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

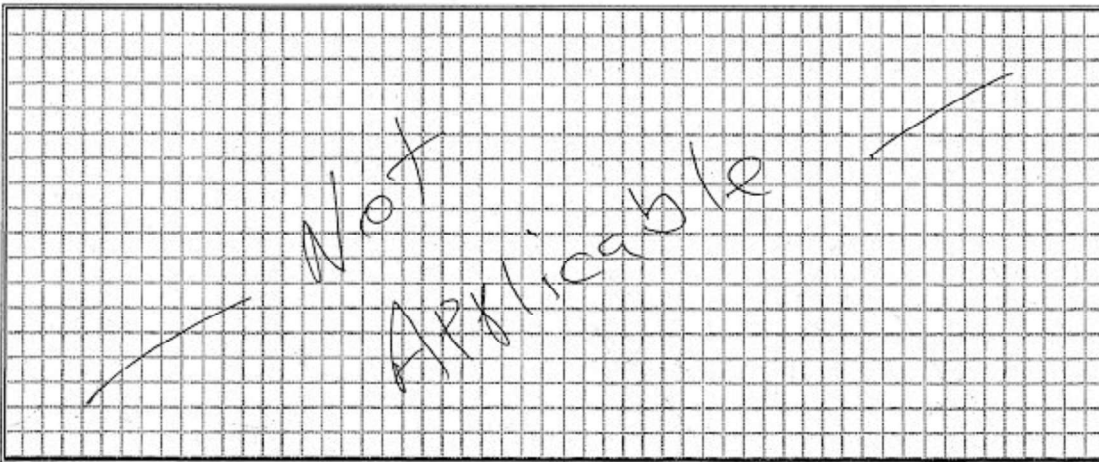
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

*28th Oct 2022*  
  
 Policyholder's Signature / Date & Time

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

  
 Witnessed by Reporting Centre Personnel  
 (Name as in NRIC/ID card) **Soh Jit Hoon**

Sketch Plan

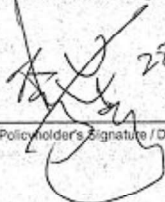


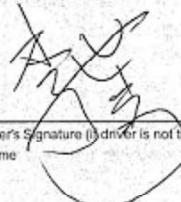
Describe Circumstance of the Accident

please refer to police report.

Declaration

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

 28 Oct 2022  
Policyholder's Signature / Date & Time

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

  
Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card) Soh Jit Hoon

















# SINGAPORE POLICE FORCE



T/20221021/2104

1 of

Report No. T/20221021/2

Police Station Of Origin:  
Serangoon North NPP  
108 Serangoon North Ave 1 #01-709  
SINGAPORE 550108  
Tel No: 1800-2849999

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:  
21/10/2022 21:22

Vide Report No.:

Station Diary No.  
38

## Informant's Particulars

|                                             |            |                                                                    |                              |
|---------------------------------------------|------------|--------------------------------------------------------------------|------------------------------|
| Name of Informant:<br>MARK DINO LEE SEE HEE |            | Address:<br>APT BLK 637B PUNGGOL DRIVE #04-413 SINGAPORE<br>822637 |                              |
| ID Type / ID No.:<br>NRIC NO / S7401984F    |            | Contact No.:<br>Home/Office:                                       | Mobile: 92295885             |
| Nationality:<br>SINGAPORE CITIZEN           |            | Email:                                                             |                              |
| Sex:<br>Male                                | Age:<br>48 | Date of Birth:<br>04/02/1974                                       | Type of Informant:<br>Driver |
| Race:<br>Chinese                            |            | Language:                                                          | Institution / School Name:   |
| Occupation:<br>Self-Employed                |            | Driving Licence Information:<br>Class: 3                           | Date of Expiry:              |

## General Information of the Accident

|                                  |                      |                                             |                                            |                                    |
|----------------------------------|----------------------|---------------------------------------------|--------------------------------------------|------------------------------------|
| Type of Accident:                | Non-Injury<br>Others | Drink Drive:<br>No                          | Date/Time of Accident:<br>13/10/2022 00:20 | Type of Location:<br>Straight Road |
| Location:<br>SENGKANG EAST DRIVE |                      |                                             |                                            |                                    |
| Weather:<br>Drizzling            |                      | Road Surface:<br>Slightly wet               |                                            | Road Speed Limit:                  |
| Traffic Flow:<br>One Way         |                      | Traffic Control:<br>Traffic Light - Working |                                            | Traffic Volume:<br>Moderate        |
| Type of Collision:<br>Unknown    |                      |                                             |                                            | Anyone conveyed ambulance:<br>No   |

## Details of Vehicle Involved

| Vehicle No. | Type  | Make | Model | Color | Condition | No. of Pass |
|-------------|-------|------|-------|-------|-----------|-------------|
| GBE6277D    | Lorry |      |       |       | No Damage | 0           |

## Details of Person Involved

Any Pedestrian Involved: No  
No. of Pedestrians Injured: NIL

Use of Pedestrian Crossing: NA





**SINGAPORE  
POLICE FORCE**



T/2022/021/2104

2 of 1

Police Station Of Origin:  
Serangoon North NPP  
108 Serangoon North Ave 1 #01-709  
SINGAPORE 550108  
Tel No: 1800-2849999

Report No. T/2022/021/2104

**CONTINUATION OF REPORT**

|                                   |                       |                  |                                                                           |
|-----------------------------------|-----------------------|------------------|---------------------------------------------------------------------------|
| <b>Driver</b>                     |                       |                  |                                                                           |
| Name                              | MARK DINO LEE SEE HEE |                  | ID No. S7401984F                                                          |
| Related Vehicle                   | GBE6277D (Lorry)      |                  | Contact No. 92295885                                                      |
| Hospital/Clinic                   | NIL                   |                  | Class of Driving Licence & Expiry Date<br>Class: 3<br>Date of Expiry: NIL |
| Date Treatment                    | NIL                   | Date Discharge   | NIL                                                                       |
| No. of Days granted Medical Leave | NIL                   | Degree of Injury | NIL                                                                       |

**Brief Details.**

On 19/10/2022, I received a letter from the traffic police informing that I have been involved in a traffic accident along Sengkang East Drive on the 13/10/2022.

I do not recall hitting any vehicle or anyone. I also did not notice any damages to my vehicle after the 13/10/2022.

On 13/10/2022 at around 0012hrs, I remember a white car tailgating me, flashing his lights and honking. I did not think much of it as I thought the reason was that I was travelling slowly.

I contact the traffic police supervisor Yap Teck Siong about the matter and was advised to lodge a report.

|                                                                                                                                                                                                                       |                                                                                                                  |                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|------------------------|
|  <b>POLICE FORCE</b>                                                                                                                 |                                                                                                                  | Report No. T/2022102   |
| Police Station Of Origin:<br>Serangoon North NPP<br>108 Serangoon North Ave 1 #01-709<br>SINGAPORE 550108<br>Tel No: 1800-2849999                                                                                     |                                                                                                                  | CONTINUATION OF REPORT |
| <b>Sketch Plan</b><br>Informant is not able to provide sketch plan                                                                                                                                                    |                                                                                                                  |                        |
| <p>IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't the certificate with you now, please fax a copy to 65474885 stating the <u>report number</u> as reference</p> |                                                                                                                  |                        |
| Signature of Officer Recording The Report:<br>F /<br>SGT 2 Chng Glenn                                                                                                                                                 | Signature Of Informant:<br> |                        |
| Signature Of Interpreter:<br>Not applicable                                                                                                                                                                           | Date/Time:<br>21/10/2022 21:22                                                                                   |                        |
| Officer In Charge Of Case:<br>TP / GIA /<br>SR STAFF SGT MUHAMMAD NOOR BIN<br>ABDUL RAHMAN<br>Contact No.: 65476219                                                                                                   | Classification Of Case:                                                                                          |                        |
| NP168                                                                                                                                                                                                                 |                                                                                                                  |                        |



中国太平保险(新加坡)有限公司  
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Commercial

MZ300/C

R SN

AN0679A

Cov. Type:C

**CERTIFICATE OF INSURANCE**

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)

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                          |                                                             |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------------------------------|
| CERTIFICATE No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | DMCVSNW00088442202       | Engine No.: D4CBF857729<br>Cha. No.: KNCSJX76LG7023723      |
| 1. Index Mark and Registration Number of Vehicle                                                                                                                                                                                                                                                                                                                                                                                                                                                           | GBE6277D                 | AUTOSAFE<br>*****                                           |
| 2. Name of Policy Holder                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | DML MARINE AND SERVICE   |                                                             |
| 3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment                                                                                                                                                                                                                                                                                                                                                                                             | 16/08/2022<br>(00:00:00) | Excess Sect I . SS\$350.00<br>EX ON WINDSCREEN . SS\$100.00 |
| 4. Date of Expiry of Insurance                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 15/08/2023               |                                                             |
| 5. Persons or Classes of Persons entitled to drive*<br>Any person who is driving on the Policyholder's order or with their permission.<br><br>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.                                                |                          |                                                             |
| 6. Limitations as to use:*<br>(1) Use in connection with the Policyholder's business.<br>(2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.<br>(3) Use for social, domestic or pleasure purposes.<br><br>The Policy does not cover<br>(1) Use for hire or reward or racing, pace-making, reliability trial or speed testing.<br>(2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle. |                          |                                                             |
| HIRE PURCHASE CO.: HITACHI CAPITAL ASIA PACIFIC PTE LTD AS HP OWNER<br>* 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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: ABWIN PTE LTD  
Authorised Officer

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)  
3 Anson Road #16-00 Springleaf Tower Singapore 079909

☎ 6389 6111

☎ 6222 1033

🌐 www.sg.cntaiping.com



**SINGAPORE  
POLICE FORCE**  
SAFEGUARDING EVERY DAY

Our Ref: TP/IP/27796/2022

MARK DINO LEE SEE HEE  
637B PUNGGOL DRIVE  
#04-413  
Singapore 822637

000059

Traffic Dept, Police  
10 Ubi Avenue 3  
Singapore 408865

IB Call Centre: 65470000  
FAX: 65474883

Date: 13/10/2022

Dear Sir

**CASE OF TRAFFIC ACCIDENT INVOLVING GBE6277D ALONG SENGKANG EAST DRIVE  
ON 13 Oct 2022 @ 12.22 AM**

Please be informed that Traffic Police is investigating into the above matter and will update you the status in due course.

2. If you have not lodged a Police Report of a Traffic Accident (NP168) in respect of the said accident which is now required for police investigation, please do so as soon as possible at the nearest police station, Neighbourhood Police Centre (NPC), Neighbourhood Police Post (NPP) or online via Singapore Police Force Electronic Police Centre (<http://www.police.gov.sg/epc>).
3. Please note that the information given by you in the Police Report of a Traffic Accident (NP168) will be carefully considered. You may not be called upon for an interview if the information in the Police Report is sufficient for our investigation. However, if you have any further information or other evidence (such as CCTV footages) which you have not stated in your report and which you think will assist in the investigation, you are advised to contact the Investigation Officer within 2 weeks of this letter to arrange for an appointment.
4. You may contact the Investigation Officer Abdul Rahim Bin Salim at his / her office number: 65476433 or the supervisor Yap Teck Siong at 96232142 if you have any further queries.
5. Thank you.

Yours faithfully,

Gr Staff Sgt Abdul Rahim Bin Salim  
Investigation Officer (GIT 3)  
Traffic Dept, Police  
Singapore Police Force

This is a computer-generated letter. No signature is required.