SS2X22BA0008 / SME MOTOR PTE LTD
ENTRY DATE & TIME: 10/11/2022 14:54 (SGT)
SUBMITTED BY: Chia Pei Ying
VERSION: 1 (10/11/2022 14:54 (SGT))

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 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.
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	10/11/2022 14:54 (SGT)
Reported by	Driver
Date of Accident	09/11/2022 12:50 (SGT)
Exact Location of Accident	26 Kallang Pl, Singapore 339157
Additional Location Information	CARPARK ENTRANCE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBE7631H

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	FATTY HOE CATERING SERVICES
Company Reg No	53149869K
Email Address	JASONKOH2302@YAHOO.COM.SG
Mobile Phone No	(Phone) +65-81243063
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Dyna
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	1994

INSURANCE COMPANY

Name of Insurance Company	United Overseas Insurance Ltd
Policy Number / Cover Note Number	DHOM110177572101

DRIVER

Name of Driver	KOH GUAN HUAT
NRIC No	S7306853C
Date Of Birth	23/02/1973
Occupation	Outdoor

Date Of Driving Pass	11/08/1993
Driving experience	29 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81243063
Alt. Phone Number	-
Email Address	JASONKOH2302@YAHOO.COM.SG
Address	BLK 224 SIMEI STREET 4 #11-94
Address complement	-
Postcode	520224
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	Clear
Road Surface	Dry

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	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT: T/20221109/7058.

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	SHC5208A
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	LIM CHEOW SEONG
Contact Number	(Phone) +65-96155838
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE B
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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 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.

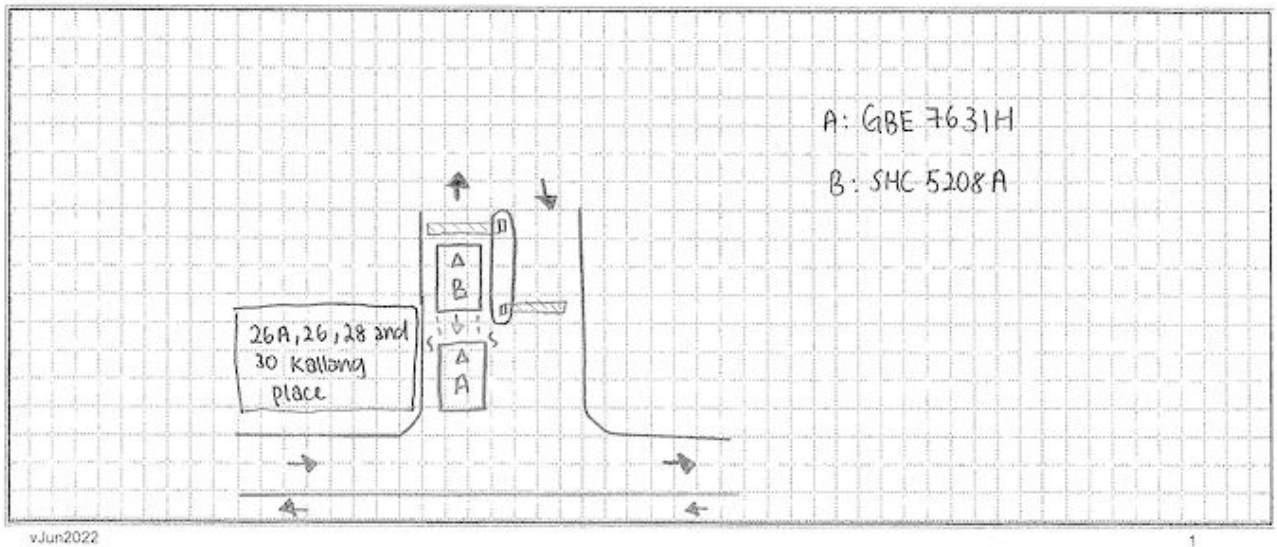
FATTY NOE CATERING SERVICES

Policyholder's Signature / Date & Time

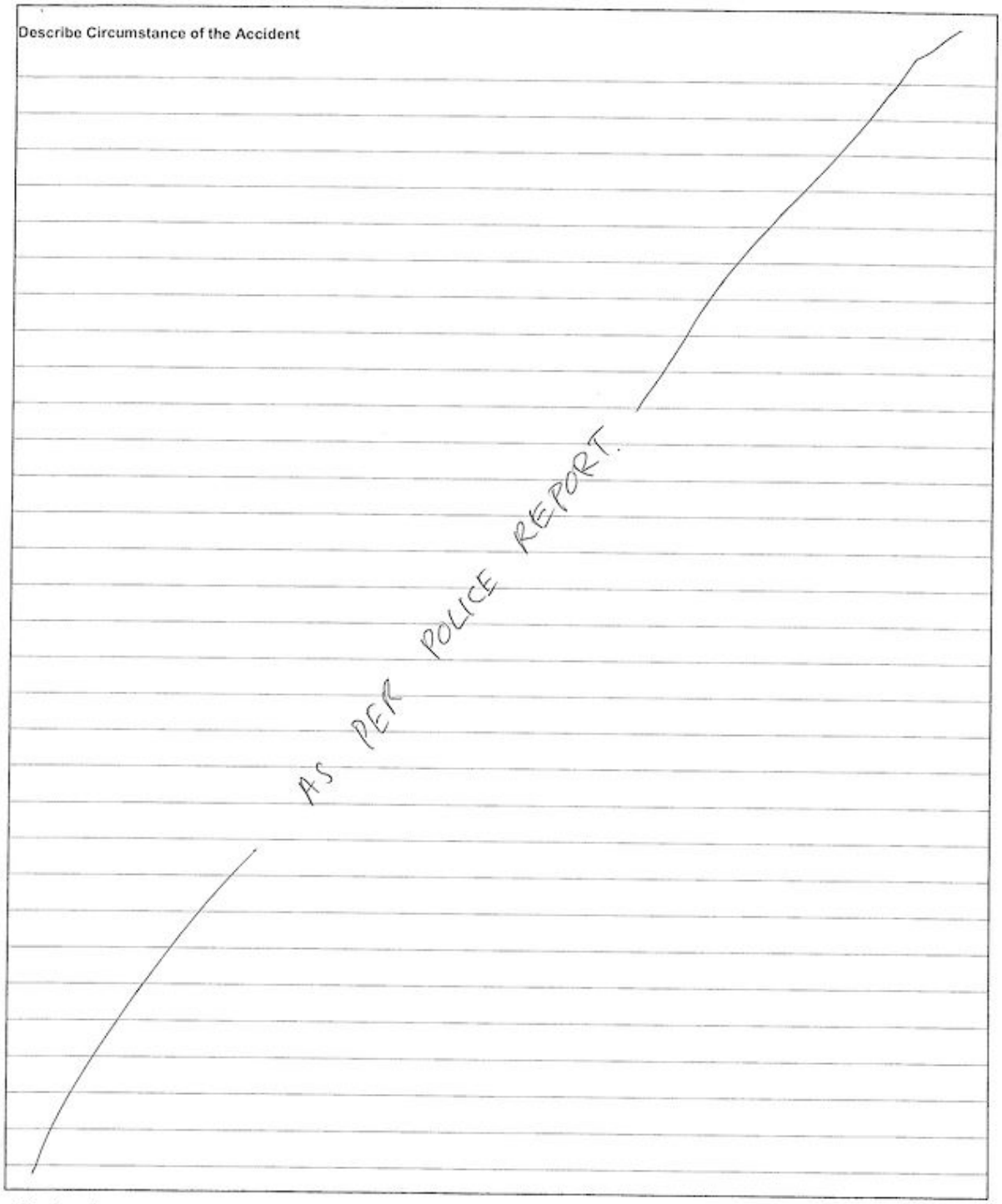
Actual Driver's Signature (if driver is not the policyholder) / Date & Time

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

Sketch Plan



Describe Circumstance of the Accident



Declaration

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

FATTY HOE CATERING SERVICES *

Policyholder's Signature / Date & Time

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

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

vJun2022

2


GBE
7631H

IMAGES #2

IMAGES #3

IMAGES #4

IMAGES #5

SINGAPORE POLICE FORCE

T/20221109/7058

Report No. T/20221109/7058

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

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:	Vide Report No.:	Station Diary No.:
09/11/2022 17:43		

Informant's Particulars

Name of Informant: KOH GUAN HUAT			Address: 224 SIMEI STREET 4 #11-94 SINGAPORE 520224	
ID Type / ID No.: NRIC NO / S7306853C			Contact No.: Home/Office: Mobile: 81243063	
Nationality: SINGAPORE CITIZEN			Email: jasonkoh2302@yahoo.com.sg	
Sex: Male	Age: 49	Date of Birth: 23/02/1973	Type of Informant: Driver	
Race: Chinese			Language: English	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: 09/11/2022 12:50	Type of Location: Straight Road
Location: KALLANG PLACE				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: Moving Vehicle Against - Others				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
GBE7631H	Lorry					0
SHC5208A	Car					0

Details of Person Involved

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

SINGAPORE
POLICE FORCE

T/20221109/7058

Report No. T/20221109/7058

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

CONTINUATION OF REPORT

Driver			
Name	KOH GUAN HUAT	ID No.	S7306853C
Related Vehicle	GBE7631H (Lorry)	Contact No.	81243063
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

Brief Details.
I was travelling along 26 kallang place carpark entrance on 09/11/2022 at about 12.50pm with my company vehicle bearing car plate number GBE7631H. My vehicle was stationary as I was waiting for vehicle bearing car plate number SHC5208A (Transcab taxi) to enter the gantry, suddenly Vehicle SHC5208A reversed and collided onto my vehicle front portion. We alighted, SHC5208A driver Mr Lim Cheow Seong said that he didn't want to pay the repair cost of my vehicle, so we exchanged particulars and left the scene.

I am doing this report for insurance purpose and to request from the carpark gantry company for video footage as the accident happened at the gantry area.

There is no injury for this accident.

SINGAPORE
POLICE FORCE

T/20221109/7058

3 of 3

Report No. T/20221109/7058

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

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 09/11/2022 17:43
Officer In Charge Of Case: TP / TPIB / MUHAMMAD NOOR BIN ABDUL RAHMAN Contact No.: 65476219	Classification Of Case:

NP168

UOI

Certificate of Insurance

Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 169)
Motor Vehicles (Third Party Risks and Compensation) Rules 1960
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia)

ORIGINAL

CERTIFICATE NO.	DMOM1101775729101	Excess:	$600/- SECTION 1 $3000/-APPL TO <2½ YRS & OR <3YRS EXP $100/-WINDSCREEN DAMAGE CLAIM
Type of Cover	COMPREHENSIVE		
Vehicle Number	GBE7631H		
Name of Insured	FATTY POE CATERING SERVICES		
Restricted Driver(s)	NOT APPLICABLE		

Period of Insurance	20 April 2022 to 19 April 2023	Engine#	1KD2579801
Hire Purchase	MY AUTO CAPITAL PTE LTD	Chassis#	KBY2318023673

Goods carrying - Private type (MV 30B)

AUTHORISED DRIVER

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

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 and pleasure purposes
THE POLICY DOES NOT COVER
(1) Use for hire or reward or for racing pace making reliability trial or speed testing
(2) Use whilst drawing a trailer except the towing of any disabled mechanically propelled vehicle

Provided that the person 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

Limitation rendered inoperative by Section 6 of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 169) and Section 96 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings

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 169) and part IV of the Road Transport Act, 1987 (Malaysia)

UNITED OVERSEAS INSURANCE LTD

For the Company

ISCP/ Date: 16/03/2022