

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	24/03/2023 10:32 (SGT)
Reported by	Actual Driver
Date of Accident	23/03/2023 17:57 (SGT)
Exact Location of Accident	TPE, Singapore
Additional Location Information	TOWARDS SLE BEFORE PUNGGOL
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YQ8480J
INSURED/POLICYHOLDER	/
Is company?	Yes
Name Of Registered Owner	YISHUN TOWING PTE LTD
Company Reg No	2XXXXX908W
Email Address	feliciatan80@hotmail.com
Mobile Phone No	(Phone) +65-91118480
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Isuzu
Model	NPR75UH5A
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	3980

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMCVSNW00139732204

DRIVER

Name of Driver	YU QINGZHI
Work Permit No	0XXXXX8582
Date Of Birth	05/09/1983
Occupation	Outdoor

Date Of Driving Pass	04/10/2016
Driving experience	6 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91118480
Alt. Phone Number	-
Email Address	feliciatan80@hotmail.com
Address	4015 ANG MO KIO IND PK 1 #01-502
Address complement	-
Postcode	569631
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?	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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO SKETCH PLAN

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	SKT4713P
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) -

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SLA8171P
 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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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;

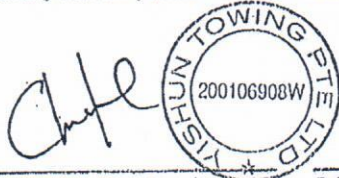
(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or

(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.



1 3 2 5

24/03/2023

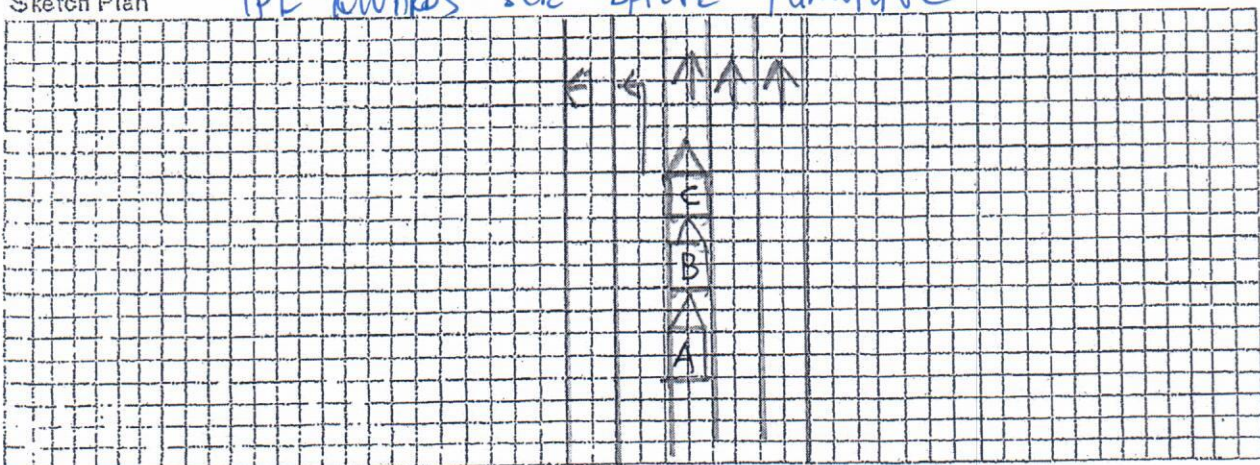
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

TPE TOWARDS SLE BEFORE PUNGGOAL



[A] YQ 8480J

[B] SKT 4713P

[C] SLA 8171P

Describe Circumstances of the Accident

I WAS DRIVING ALONG TPE TOWARDS SLE BEFORE
PUGEOL, DUE TO INFRONT VEHICLE STOPPED,
I COULDN'T BRAKE IN TIME & HIT THE FRONT
VEHICLE NO. SKT 4713P AND SKT 4713P MOVED
FORWARD TO HIT SLA 871P. NO BODS INJURY.

Declaration

We declare the foregoing particulars are true in every respect.

Chile



Policyholder's Signature / Date &
Time

** 8 1. 1*

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

24/03/2023
Witnessed by Reporting Centre
Personnel

VEHICLE NO: YQ 8480J

MAKE & MODEL :

AUTO / MANUAL

DATE OF ACCIDENT	23 / 03 / 2023	*C.C. 3980KG
TIME OF ACCIDENT	1757	AM / PM
LOCATION OF ACCIDENT	TPE TOWARDS SLE BEFORE PUGOL	
EXACT PURPOSE USED AT TIME OF ACCIDENT	(EMPLOYMENT) / PRIVATE USE / PRIVATE HIRE	
NAME OF OWNER	YISHUN TOWING PTE LTD	
EMAIL	feliciatan80@hotmail.com	Office. MOBILE.
NRIC	UEN	200106908 W
CLAIM TYPE	OD / THIRD PARTY / (REPORTING ONLY)	
FLEET POLICY	YES / NO ?	
INSURANCE CO.		
TYPE OF COVERAGE	Comprehensive / Third Party / Third Party Fire & Theft	
POLICY NO.		
NAME OF DRIVER	AS ABOVE + IF NO. YU QINGZHI	
DRIVER PERMIT NO	075198582	
DATE OF BIRTH	05 / 09 / 1983	
ANY PASSENGER	YES / NO : 0	
NAME OF PASSENGER		
GENDER OF PASSENGER	MALE / FEMALE	
OCCUPATION	(Outdoor) / Indoor	
DATE OF DRIVING PASS	04 / 10 / 2016	
GENDER	Male / Female	
CONTACT NO.	Mobile 9111 8480 Office. Home.	
EMAIL	feliciatan80@hotmail.com	
ADDRESS	4015 ANG MO KIO IND PK1 #01-502 S' 569631	
DOES DRIVER OWN OTHER VEHICLES?	NO + If yes, Reg No. INSURER EMPOLYER	
RELATIONSHIP	(Employee) + If No	
WEATHER CONDITION	(Clear) / Raining / Other	
ROAD SURFACE	(Dry) / Wet / Other	
ANY INJURIES	(No) If yes, Who?	
CONVEYED BY AMBULANCE	(No) If yes, Who?	
POLICE REPORT	(No) If yes, Where?	
NOTICE OF INTENDED PROSECUTION GIVEN?	NO/IF YES, WHO?	
VEHICLE B NO.	SKT 4713P Any Passenger	
NAME		
CONTACT NO.		
VEHICLE C NO.	SLA 8171P Any Passenger	
VEHICLE D NO.	Any Passenger	
VEHICLE E NO.	Any Passenger	
VEHICLE F NO.	Any Passenger	
ANY WITNESS		
WITNESS CONTACT NO.		
WAS THERE ANY VIDEO CAPTURE?	YES (NO)	
WAS THERE ANY AUDIO RECORDED?	YES (NO)	
SCENE ACCIDENT PHOTOS TAKEN?	(YES) NO	
**WORKSHOP:	Y&K AUTO WORKSHOP	
Have you been approach by unknown person soliciting (s) /		
offering accident claims assistance?	YES (NO)	

Motor Commercial

CERTIFICATE OF INSURANCEMotor 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)

MZ301/C

R SN

AN0478A

Cov. Type: T

CERTIFICATE No.

DMCVSNW00139732204

Engine No.: 4HK1738417

Cha. No.: JAANPR75H97101723

1. Index Mark and Registration
Number of Vehicle

YQ8480J

2. Name of Policy Holder

YISHUN TOWING PTE LTD

3. Effective date of the Commencement of
Insurance for the purposes of the Regulations,
(00:00:00)
Ordinance or Enactment

16/12/2022

Excess Sect. II S\$1,000.00

4. Date of Expiry of Insurance

15/12/2023

5. Persons or Classes of Persons entitled to drive*

(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.

6. Limitations as to use:*

(1) Use in connection with the Policyholder's business.

(2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.

(3) Use for social, domestic or 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.

* 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.

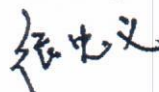
Agent Assistance (IH)

Hotline: 6287 7077

Issued By: INSURE HUB PTE LTD

Authorised Officer

Authorised Signatory



> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Company

Owner ID:

908W

Vehicle Details

Vehicle No.:

YQ8480J

Vehicle to be Exported:

No

Intended Deregistration Date:

06 May 2023

Vehicle Make:

ISUZU

Vehicle Model:

NPR75UH5A

Primary Colour:

Blue

Manufacturing Year:

2009

Engine No.:

4HK1738417

Chassis No.:

JAANPR75H97101723

Maximum Power Output:

-

Open Market Value:

\$43,767.00

Original Registration Date:

16 Jun 2009

First Registration Date:

16 Jun 2009

Transfer Count:

1

Actual ARF Paid:

\$2,189.00

Intended PARF Rebate Details

PARF Eligibility:

No

PARF Eligibility Expiry Date:

-

PARF Rebate Amount:

\$0.00

Intended COE Rebate Details

COE Expiry Date:

31 May 2024

COE Category:

C - Goods Vehicle & Bus

COE Period(Years):

5

PQP Paid:

\$13,910.00

COE Rebate Amount:

\$2,968.00

Total Rebate Amount:

\$2,968.00

Message

Please note that all future COE renewals for this vehicle can only be for a 5-year period, subject to the statutory lifespan (if applicable) of the vehicle.

The information contained herein is correct as at 24 Mar 2023

OK