SC1I235C000G / CHENG HOE MOTOR PTE LTD[768761] ENTRY DATE & TIME: 12/05/2023 18:52 (SGT) SUBMITTED BY: CHIONG BENG CHOON VERSION: 1 (12/05/2023 18:52 (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.

- 4. The issue and acceptance of this is form by instrained 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 12/05/2023 18:52 (SGT) Reported by **Actual Driver** Date of Accident 20/04/2023 22:20 (SGT) Exact Location of Accident Singapore Additional Location Information YISHUN ST 81 Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBK6364D

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner ATL MAINTENANCE PTE LTD Company Reg No 199707550Z Email Address christinechen@atlmaintenance.com Mobile Phone No (Phone) +65-97212006 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Toyota Model Dyna 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?

Vehicle Category Transmission

INSURANCE COMPANY

Name of Insurance Company Policy Number / Cover Note Number

China Taiping Insurance (Singapore) Pte. Ltd.

DMCVSNW00107072202

Employment

Manual

2982

No - Reporting only

Commercial vehicle

DRIVER

CC

Name of Driver HASNI BIN HASSAN NRIC No S1761508D Date Of Birth 13/07/1966 Occupation Outdoor

Date Of Driving Pass 10/10/2019 Driving experience 3 YEARS AND 6 MONTHS Gender Mobile Number (Phone) +65-97901847 Alt. Phone Number Email Address christinechen@atlmaintenance.com.sg Address BLK 510A YISHUN ST 51 #07-541 Address complement Postcode 761510 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 Collided into Parked Vehicle Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 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) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Nο Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement PASSENGER 1 Name **SPOUSE** Gender **Female** PASSENGER 2 Name **CHILD** Gender Female PASSENGER 3 Name **CHILD** Gender Male PASSENGER 4 Name **CHILD** Gender Male DETAILS OF POLICE ACTION Was the accident reported to the police? Yes Police Station Name Yishun North Neighbourhood Police Centre Police Station Phone No (Phone) +65-18008529999 Alt. Police Station Phone No (Fax) +65-68522299 Police Station Address 31 Yishun Central Singapore 768827

No

Was notice of intended Prosecution given?

If yes, against whom?

REFER POLICE 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	SGR3410C
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

VEH NO: 9BK 63641

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.

- 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.

Policyholder's Signature / Date & Time

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

di 12/5/23

Witnessed by Reporting Ce

(Name as in NRIC/ID card)

Sketch Plan PLEASE TURN OVER

1

Claim under your Own	Comprehensive policy. Pl	s check your policy for n	øre information.
) Claim Own Policy	() Claim Third	. /	Reporting Onlly
) Claim OD/ TP at o	ther workshop ()
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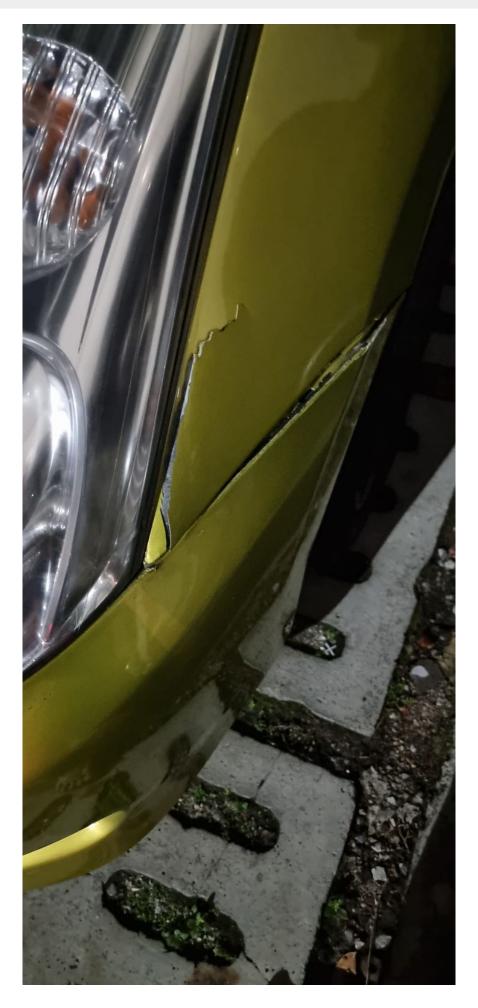


















Police Station Of Origin: Yishun North N.P.C 31 Yishun Central SINGAPORE 768827 Tel No: 1800-8529999 1 of 3 Report No. T/20230505/2060

REPORT OF A TRAFFIC ACCIDENT

	Date/Time Report Made: 05/05/2023 15:07		Vide Report No.:	Station Diary No.: 59	
Informa	nt's Partic	ulars			
Name of Informant: HASNI BIN HASSAN		Address: APT BLK 510A YISHUN STREET 51 #07-541 SINGAPORE 761510			
ID Type / ID No.: NRIC NO / S1761508D		Contact No.: Home/Office:	Mobile: 97901847		
Nationality: SINGAPORE CITIZEN		Email:			
Sex: Age: Date of Birth: Male 56 13/07/1966		Type of Informant: Rider			
Race: Malay		Language: English			
Occupation: Lorry driver		Driving Licence Informa Class:	ation: Date of Expiry:		

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 20/04/2023 22:20	Type of Location Car Park
YISHUN STR Weather: Clear	EET 81	Road Surface:		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collis	ion:		,	Anyone conveyed by

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenge
GBK6364D	Lorry				No Damage	0
SGR3410C	Car				Slightly Damaged	0



T/20230505/2060

Police Station Of Origin: Yishun North N.P.C 31 Yishun Central SINGAPORE 768827 Tel No: 1800-8529999

Report No. T/20230505/2060

CONTINUATION OF REPORT

Brief Details.

On 20/04/2023 I was at Yishun Street 81 carpark level 1 near to Blk 845, I was reversing my lorry and I accidentally knocked onto the car. Subsequently I went down and checked and I discovered that there was some scratches and a small line crack on the car bumper. I had waited over there for 1 hour plus and the owner did not come and I left. I wished to state that I had no intention to run this is the first time such an incident happen to me so I don't what is the procedure of this. The lorry camera in my lorry was not working.



Police Station Of Origin: Yishun North N.P.C 31 Yishun Central SINGAPORE 768827 Tel No: 1800-8529999



3 of 3 Report No. T/20230505/2060

CONTINUATION OF REPORT

Signature of Officer Recording The Report: L /	Signature Of Informant:
SGT 2 CHEW JING HUI	ب نج
Signature Of Interpreter: Not applicable	Date/Time: 05/05/2023 15:07
Officer In Charge Of Case: TP / HRT / SR STAFF SGT IRMAN BIN MOHAMAD SAID Contact No.: 65476145	Classification Of Case:
NP168	