# 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 16/05/2023 14:41 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 15/05/2023 14:30 (SGT) Exact Location of Accident Singapore Additional Location Information JALAN EUNOS TOWARDS STILL ROAD Country/State of Loss Singapore

## **DETAILS OF OWN VEHICLE**

Employment

No - Reporting only

Vehicle Registration Number **GBJ2497K** 

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner HUI WANG ENTERPRISE PTE. LTD. Company Reg No 201426468N Email Address WINSON.TAN@HUIWANGENTERPRISE.COM Mobile Phone No (Phone) +65-92370344

Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Toyota Model Hiace

**VAN TURBO 5DR MT** 

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 Commercial vehicle Transmission

Manual 2982

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Policy Number / Cover Note Number DMCVSNA00008762301

DRIVER

Name of Driver NG WING KEONG Work Permit No G2881740T Date Of Birth 11/04/1979 Occupation Outdoor

Date Of Driving Pass	09/03/2021
Driving experience	2 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-82679988
Alt. Phone Number	-
Email Address	WINSON.TAN@HUIWANGENTERPRISE.COM 5 DEFU LANE 10 #01-576 DEFU INDUSTRIAL ESTATE
Address	SINGAPORE
Address complement	-
Postcode	539186
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	
Insurance Company of Other Vehicle Owned by Driver	-
insurance company of other vehicle owned by briver	•
OFNEDAL INFORMATION OF THE ACCIDENT	
GENERAL INFORMATION OF THE ACCIDENT	
T (A () )	
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?	- V
Number of Passengers (Including Driver)	Yes 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	
REFER TO THE 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	SHD9890Y
Vehicle Manufacturer	Toyota
Vehicle Model	Prius
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)	-

Describe Circumstance of the Accident  I was driving along Jalan Euros towards Still road.  Veh & Sudderly Stop, I tould not Stop in time & collider puto  Wing						
I Nes di	ing along	Jalan	EUNOS -	towards	Still road	
Veh B Sudderly	Stop, IY	Could not	Stop i	, that s	2 Collida	MO
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Declaration

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

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

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

#### SKETCH PLAN

#### IMPORTANT NOTICE

- Please report <u>correctly</u> 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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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 / Data/Sytemes

Driver's Signature (if driver is not the policyholder) / Date & Time 16/5/23

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

306V0

A: GBJ 24971

B: SHD 9890 Y

Talan Euros towards Still Road









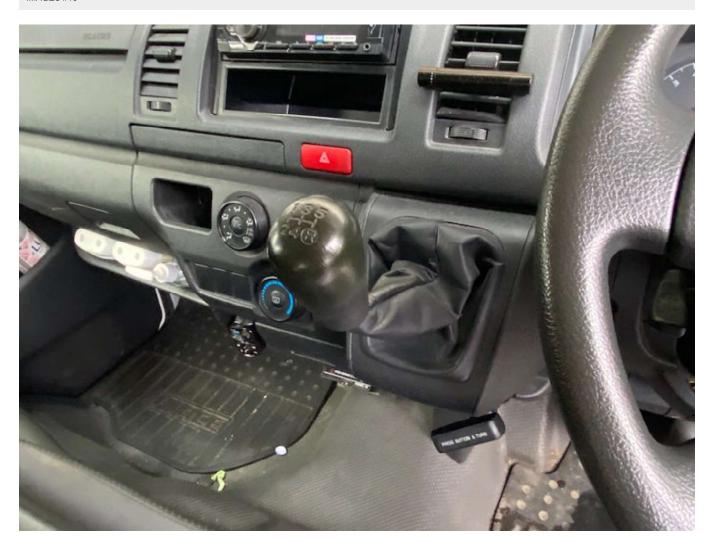


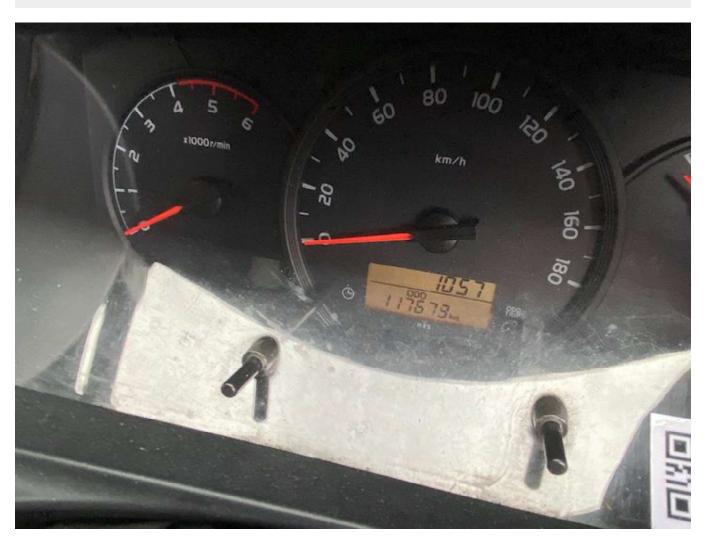
















BLK 5, DEFU LANE 10, # 01-576, SINGAPORE 539186 TEL: 6286 4541, 6283 0717 FAX: 6281 0647

Nº 26117

Co. Reg. No. 201426468N

囉厘, 貨車出租,車輛檢查,修理,噴漆 ,打吗呷等 LORRY, VAN RENTAL, VEHICLES INSPECTION, REPAIRING, SPRAY PAINTING, PANEL BEATING, INSURANCE CLAIM, ETC.

## VEHICLE RENTAL AGREEMENT

шрере в	ARTICULARS \ I/We	KS Express	I/C No:		
	rom Section 1	40000 80004000000			
			Tel No:		
rental fees and/or dama the event o	as shown below and I agree ged caused to the said vehicle f the Vehicle being CONFIS	ay from Messrs Hui Wang Enterprise Pte that I shall be responsible for the and I shall be responsible to pay Messrs CATED or any loss resulting from THI negligence or by any breach by me of the	first payment of \$2,000.00 / \$3 Hui Wang Enterprise Pte Ltd the v EFT or DESTRUCTION of the s	,000.00 for any los value of the vehicle is aid vehicle whethe	
Vehicle R	edg. No. 卓號 <i>GBJ</i> 24	97K	(Ølesel / Petrol)		
Section 1	Hirer's And / Or Driver's Partticulars	租車者\驾驶员個人記錄	日期及取車時間 Date & Time Out: 03/05/23	10-00AM	
	NG WING KE		日期及还单時間 Date & Time In:		
	地址 23 Jalan Pa		天數 Days @\$		
		1100 Johor SE. Bahru	星期 Weeks @\$		
	ce No: I/C No: G 288//	40 T Tel No: 82679988	月 Months @ \$		
截止日期 Expiry Da		Date Of Birth 11/04/1979	總數 Nett-Total		
Replacen Veh. Red		(Diesel / Petrol)	按機金 Deposit DB504	1300	
日期及取 Date & Ti			Refund		
日期及还 Date & Ti			Balance To Pay		
* Note: A	repossession fee of S\$100.00 wil	I be charged on repossess vehicles	Cash / Cheque		
NOTICES:	ACCIDENT EXCESS: \$ 2500 NO INSURANCE COVERAGE FO AND IN EXPERIENCED DRIVERS	R YOUNG (BELOW), OLD (ABOVE)	出車漁箱 Fuel Tank OUT E 1 4 4 上	3 1 5 3 7 F	
	請注意水模里的水及引擎里的黑油 Please check Radiator Water & E		Total Additional Onlarges		
	半途汽油不足,途失绮匙等、若须 Extra charges are required for the	服務者另付額外費用。 so vehicle that run out of potrol, lost of key p	nd etc.		
	Interest rate of 1.5% will be charg	ed on overdue payments			
Eg-		IMPORTANT!			
I / We de	eclare that the usage of rer in connection with thefts,	ting the above mention Vehicle an uncustomed goods, drugs dealin	e not to be used for illegal po gs or trafficking or smuggling	urpose, includin	
				DON	
ind understo	od by me. I/We hereby declare t	herein and overleaf which I have read an hat the particulars of the Hirer and licenc	d understood or have been read ov	respect and that I at	
he holder Remarks:	of a valid driving licence e	nabing me to drive the above-ment	ioned vehicle and not disquali	fied from drivin	
iornarks				Dath	
			Signature of Hire	承租者簽	