

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	09/06/2023 19:19 (SGT)
Reported by	Actual Driver
Date of Accident	08/06/2023 19:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	GAMBUS AVE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBF4684U
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	THREE LEAVES (SINGAPORE) TRADING ENTERPRISE
Company Reg No	53033969B
Email Address	TL.SG@HOTMAIL.COM
Mobile Phone No	(Phone) +65-97578869
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	2982

INSURANCE COMPANY

Name of Insurance Company	ECICS Limited
Policy Number / Cover Note Number	MCV22A00017000

DRIVER

Name of Driver	YE KANGWANG
NRIC No	S2646469B
Date Of Birth	02/09/1963
Occupation	Outdoor

Date Of Driving Pass	01/04/1998
Driving experience	25 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97578869
Alt. Phone Number	-
Email Address	TL.SG@HOTMAIL.COM
Address	BLK 671B JURONG WEST STREET 65 #08-106
Address complement	-
Postcode	642671
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 - Change/cross lane
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
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	-

PASSENGER 1

Name	NANT NWE THAZIN OO
Gender	Female

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 ATTACHMENT.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	FILE SIZE TOO BIG.

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHA9228B
Vehicle Manufacturer	-
Vehicle Model	-

Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	FOO PHANG HUI
NRIC No	S0928478H
Contact Number	-
Address	BLK 762 WOODLANDS AVE 6 #01-86
Address complement	-
Postcode	730762
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	YE KANGWANG
Gender	Male
Phone No	(Phone) +65-97578869
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	GBF4684U
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLANIMPORTANT NOTICE

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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.



THREE LEAVES (SINGAPORE) TRADING ENTERPRISE PTE LTD
三叶 (新加坡) 贸易公司
CO. REG. NO. S18030988 GST. REG. NO. M903354448

280 Woodlands Industrial Park E5 #06-35/36
Harvest @ Singapore 757322

HP 97578360 TEL: 67942592 FAX: 67947882
E-MAIL: 11340001@threeleaves.com.sg

Policyholder's Signature & Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Refer to Annex 1

Describe Circumstances of the Accident

Refer to Annex 2

Declaration



THREE LEAVES (SINGAPORE) TRADING & LEASING CO., LTD.

三叶 (新加坡) 贸易公司

CO. REG. NO. 21613078B GST. REG. NO. W100354441

280 Woodlands Industrial Park E5 #06-35/36

Harvest @ Singapore 757322

HP 97578369 TEL: 67942592 FAX: 6794788

Email: tl.sg@hotmail.com

Policyholder's Signature / Date & Time

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

[Signature]

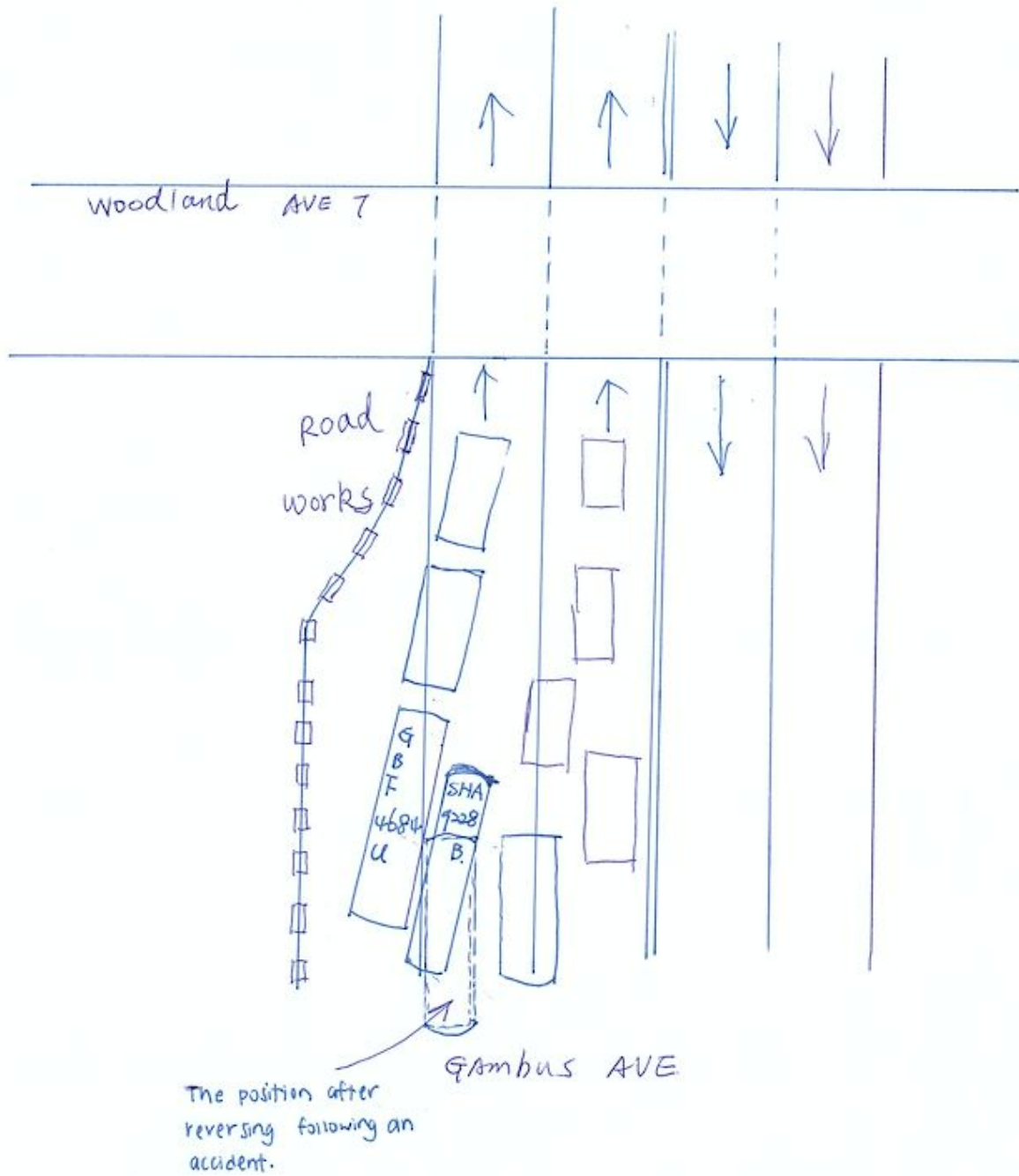
09-06-23 18:31

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

[Signature]

Witnessed by Reporting Centre Personnel

Annex 1



Annex 2

Traffic Collision involving GBF4684U and SHA9228B

On the noted occasion, my vehicle GBF4684U was stationed at a traffic signal, awaiting the transition from red to green. Subsequently, vehicle SHA9228B, approaching from the right rear, initiated a reverse motion and subsequently made contact with GBF4684U, thereby initiating a collision.

After i alight from my vehicle, GBF4684U, it was noted that vehicle SHA9228B was still engaged in reverse gear, thereby persistently scraping the side of the vehicle of GBF4684U. I advise the driver of SHA9228B, stating "Continuous reversing will not help the current situation but will cause further damage." Following this interjection, the driver of SHA9228B ceased the act of reversing and exited his vehicle.

It is hoped that this report will aid in resolving the situation and mitigating any further inconveniences. Please find attached hand drawn drawings and car camera footage.

涉及 GBF4684U 和 SHA9228B 的交通事故

在指定的场合，我的车辆 GBF4684U 停在一个交通信号灯处，等待从红灯变绿灯的过渡。随后，从右后方驶来的车辆 SHA9228B 开始倒车并与 GBF4684U 发生碰撞，引发了一次事故。

我下车后，注意到 SHA9228B 仍然处于倒车状态，持续刮擦着 GBF4684U 的侧面。我告诫 SHA9228B 的驾驶员：“持续倒车不会改善当前的情况，反而会造成进一步的损害。”在我的干预下，SHA9228B 的驾驶员停止了倒车并下车。

希望这份报告能够帮助解决这一情况并减少任何进一步的不便。请查看附上的手绘示意图和车载摄像头录像。

















