

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	10/06/2023 14:17 (SGT)
Reported by	Actual Driver
Date of Accident	09/06/2023 15:10 (SGT)
Exact Location of Accident	Near 38 Benoi Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GZ910D
-----------------------------------	--------

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	Boon Koon Hardware Pte Ltd
Company Reg No	1XXXXX240G
Email Address	william@boonkoonhardware.com
Mobile Phone No	(Phone) +65-62964033
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Nv350
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?	Yes
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	2488

INSURANCE COMPANY

Name of Insurance Company	ERGO Insurance Pte. Ltd.
Policy Number / Cover Note Number	DMCG23004023

DRIVER

Name of Driver	Sun Yunan
Passport No/FIN	GXXXX628U
Date Of Birth	27/06/1991

Date Of Driving Pass	22/04/2019
Driving experience	4 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97235756
Alt. Phone Number	-
Email Address	william@boonkoonhardware.com
Address	1 Jalan Taman St Michael's place
Address complement	#05-03 Singapore
Postcode	329022
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 - Cross Junction
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)	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 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	GBF9692M
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	Aw Chuan Joo
NRIC No	XXXXX802B

Contact Number	(Phone) +65-91090660
Address	-
Address complement	-
Postcode	-
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	Sun Yunan
Gender	Male
Phone No	(Phone) +65-97235756
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	GZ910D
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	-

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 (lawyer's) lawyers/law firms) which may be sited outside of Singapore, for one or more of the above Purposes.

BOON KOON HARDWARE PTE LTD

NO. 45/45A, DICKSON ROAD

SINGAPORE 209520

TEL: 6296 4033/4 FAX: 6291 0582

CO. REG. NO. 1982-05240-G

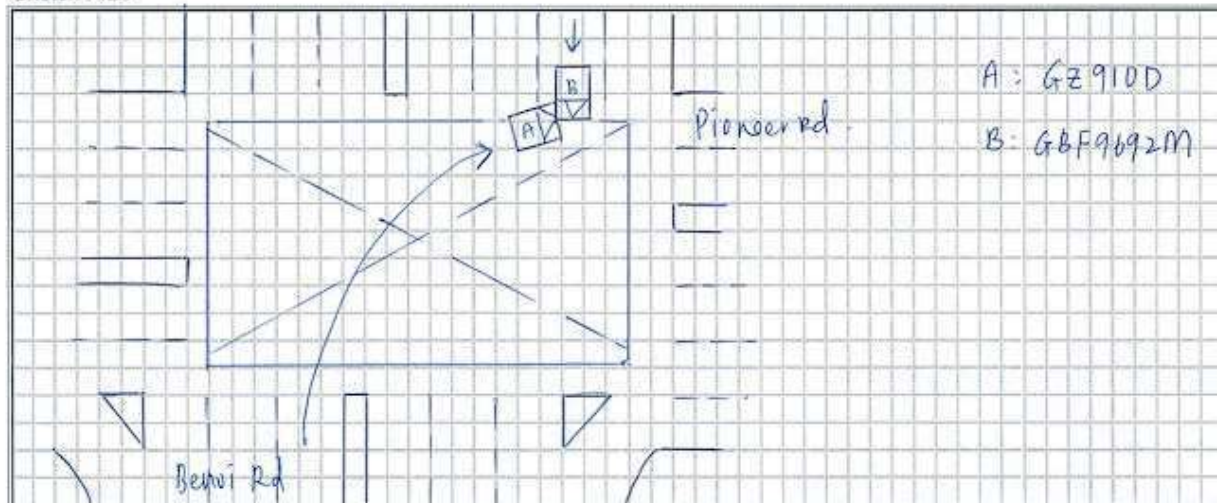
GST REG. NO. M2-0058824-0

Policyholder's Signature / Date & Time

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

我从 Benoi Rd 要去 Pioneer Rd 经过红绿灯 我在等红绿灯
看到向右侧的箭头, 我开始起步, 起步的过程中看到对面一辆车
飞速向我驶来然后我撞到我的车。

I was driving from Benoi road to Pioneer Rd waiting traffic light
and turned right
to turn green. When the traffic light turned green, I drove
forward and turned right. Suddenly, the veh B (GBF9692M)
come forward and hit my car on opposite road.

BOON KOON HARDWARE PTE LTD
NO. 45/45A, DICKSON ROAD
SINGAPORE 209520
TEL: 6296 4033/4 FAX: 6291 0582
CO. REG. NO. 1982-05240-G
POL. REG. NO. M2-0058824-0

Declaration

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

文坤五金 (私人) 有限公司
BOON KOON HARDWARE PTE LTD
NO. 45/45A, DICKSON ROAD
SINGAPORE 209520
TEL: 6296 4033/4 FAX: 6291 0582
CO. REG. NO. 1982-05240-G
POL. REG. NO. M2-0058824-0

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

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



































ERGO**Certificate of Insurance**

MOTOR 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)
 ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA)

Certificate/Policy Number : DMCG23004023

Vehicle Registration Number : GZ910D

Cover Type : Comprehensive

Policy Type : Commercial Vehicle (Pte Use)

Name of Policyholder/Insured : BOON KOON HARDWARE PTE. LTD.

Commencement Date of Insurance : 08/04/2023

Expiry Date of Insurance : 07/04/2024

Excess:	EXCESS: (SECTION I).....	S\$	500.00
	ADD'L EXCESS: NON-AUTH WORKSHOPS (SECTION I).	S\$	300.00
	EXCESS: WINDSCREEN COVER(VEH BELOW 10 TONS).	S\$	100.00
	YOUNG&INEXP DRIVERS(SECTION I)	S\$	2,500.00

Finance Company/Hire Purchase Owner : HITACHI CAPITAL ASIA PACIFIC PTE. LTD.

*Persons or Classes of Persons entitled to drive:

1. The Policyholder
2. Any Person who is driving on the Policyholder's order or 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

* Limitations as to Use:

- 1) Use in connection with the Policyholder's business
- 2) Use for carriage of passengers (other than for hire or reward) in connection with the Policyholder's business
- 3) Use for social domestic and pleasure purposes

This Policy does not cover:

- 1) Use for hire or reward, racing, pace-making, reliability trial or speed-testing
- 2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle

Limitations rendered inoperative by Section 5 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 (*).

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), the Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia), Part IV of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019 (Malaysia).

For and on behalf of **ERGO Insurance Pte. Ltd.**
 Approved Insurer



Authorized Signature

A000503	KCB INVESTMENTS PTE LTD	Contact Number: 83913811
Vehicle Chassis Number: JN1MC2E26Z0001873; Vehicle Engine/Motor Number: YD25345703A		CP1, 13/03/2023 16:51