

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	11/07/2023 15:26 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	10/07/2023 11:15 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	PIE TOWARDS UPPER SERANGOON ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBD8561A
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	KBE AIR CONDITIONING AND ENGINEERING PTE LTD
Company Reg No	2XXXXX683C
Email Address	JOSEPH_ONG60@YAHOO.COM.SG
Mobile Phone No	(Phone) +65-96874657
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Nv200
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	1500

INSURANCE COMPANY

Name of Insurance Company	Great Eastern General Insurance Limited
Policy Number / Cover Note Number	2022-V01130390-VCV

DRIVER

Name of Driver	YAP KOK VAI
Passport No/FIN	FXXXX820K
Date Of Birth	11/10/1971
Occupation	Outdoor

Date Of Driving Pass	02/09/2020
Driving experience	2 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96874657
Alt. Phone Number	-
Email Address	JOSEPH_ONG60@YAHOO.COM.SG
Address	53 UBI AVE 1 #05-56 PAYA UBI INDUSTRIAL PARK
Address complement	-
Postcode	408934
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 - 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?	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?	Yes
Police Station Name	Tanglin Division Headquarters
Police Station Phone No	(Phone) +65-18003910000
Alt. Police Station Phone No	(Fax) +65-63964900
Police Station Address	21 Kampong Java Road Singapore 228892
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO THE SKETCH PLAN AND 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	YP2176H
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Commercial vehicle
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)	-

INJURED PERSONS DETAILS

INJURED 1

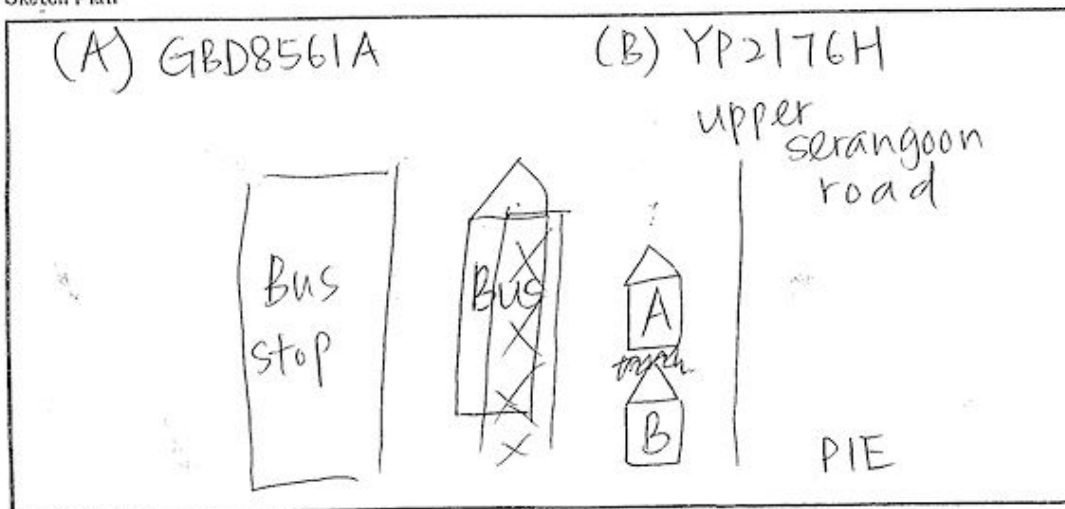
Name of injured person	YAP KOK VAI
Gender	Male
Phone No	(Phone) +65-96874657
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	PAIN IN THE BACK AND NECK AREA
Injured person in which vehicle?	GBD8561A
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

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.

Sketch Plan



Policyholder's Signature / Date & Time

11/7/23
2:45pm

yng

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

11/7/23
2:45pm

Witnessed by Reporting Centre Personnel

AH LIM MOTOR COMPANY

Date of accident: 10/7/2023 Time: 11:15am Location: PIE towards upper serangop road
 My Vehicle A: GBD8561A Vehicle B: YP2176H Vehicle C:

SKETCH PLAN

Describe Circumstances of the Accident.

Refer to Police Report

Police Report No. E/20230711/7028

* Claim TP at Yee Auto Pte Ltd

Yeeautoptehd@gmail.com

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

☐ Claim OD/TP at Ah Lim Motor ☒ Claim OD/TP at other workshop ☐ Reporting Only

We declare the foregoing particulars are true in every respect.


 Policyholder's Signature / Date & Time
11/7/23
2:45pm

Yee
 Driver's Signature (if driver is not the policyholder) / Date & Time
11/7/23
2:45pm


 Witnessed by Reporting Centre Personnel
11/07/2023

AHLIM MOTOR COMPANY































**SINGAPORE
POLICE FORCE**



E/20230711/7028

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POLICE REPORT (NP299)

Report No. E/20230711/7028

Police Station Of Origin
Tanglin Division HQ
21 Kampong Java Road SINGAPORE
228892
Tel No:1800-3910000

Date/Time Report Made 11/07/2023 14:31	Vide Report No.		Station Diary No.	
Name Of Informant YAP KOK VAI	Address			
ID Type / ID No. FIN NO / F7213820K	Contact No. Home/Office:		Mobile: 96261816	
Nationality MALAYSIAN	Email Address JOSEPH ONG60@YAHOO.COM.SG			
Occupation Air-conditioning/Refrigeration engineering technician	Sex Male	Age 51	Date of Birth 11/10/1971	Race Chinese
Institution/School Name	Language English			
Date/Time Of Incident 10/07/2023 11:15	Location Of Incident 265 KIM KEAT AVENUE KIM KEAT BEACON SINGAPORE 310265			

Brief details.

On 10 July 2023 at 11:15am I was driving my vehicle (A) GBD8561A along PIE towards Upper Serangoon Road. As I was going straight to give way the bus at the left side which coming out. I slow down and stopped my vehicle to give way. Suddenly I felt an impact from behind that the vehicle (B) YP2176H hit onto my vehicle rear portion. After accident I felt unwell and go to see doctor given 5 days MC

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 11/07/2023 14:31
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE
POLICE FORCE**



E/20230711/7028

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. E/20230711/7028

Subjects Involved			
Victim			
Person Name	YAP KOK VAI		
ID Type	FIN NO	ID No	F7213820K
Gender	Male	Age	51
Race	Chinese	Language	English
Occupation	Air-conditioning/Refrigeration engineering technician	Mobile No	96261816
Is Informant A Victim?	Yes		
Person Name	YAP KOK VAI (Informant)		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 11/07/2023 14:31
Officer In-Charge Of Case:	Classification Of Case:



CERTIFICATE OF INSURANCE

ORIGINAL

The Motor Policy to which this Certificate relates is issued in accordance with the provisions of the following Legislation:
 Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189 of the Revised Edition) (Singapore)
 Motor Vehicles (Third-Party Risks and Compensation) Act Rules, 1996 Edition (Singapore)
 Motor Vehicles (Third-Party Risks) Rules, 1959 (of Federation of Malaysia)
 Road Transport Act 1987 (of Malaysia)
 Road Transport Act (Amendment) Act 2019 (of Malaysia)

Policy No. : 2022-V0110390-VCV
 Product Type : Commercial Vehicle
 Cover : Comprehensive Any Workshop
 Name of Insured : KBE AIR-CONDITIONING & ENGINEERING PTE LTD
 Period of Insurance : From 23/12/2022 to 22/12/2023 (both dates inclusive)
Risk Number 001
 Vehicle Registration : GBD8561A
 Vehicle Make & Model : NISSAN NV200 1.5L MT ABS AIRBA
 Hire Purchase : -

PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE *

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 regulation 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 regulations 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 the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
- (3) Use for social, domestic and 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 (of Malaysia) are not to be included under these headings.

Signed for and on behalf of the Company

Authorised Signature

Great Eastern General Insurance Limited (A wholly-owned subsidiary of Great Eastern Holdings Limited) | 1 Pickering Street, #01-01 Great Eastern Centre, Singapore 048659 | Company Registration No: 192000003W | T: +65 6248 2888 | F: +65 6327 3080 | greateasterngeneral.com

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Form MZ300