

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 First Submission	25/10/2024 10:52 (SGT)
Reported by	Actual Driver
Date of Accident	11/10/2024 12:10 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	BAIN STREET
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YR2073K
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	MAGINET PLUMBING CONTRACTOR PTE. LTD
Company Reg No	201405827W
Email Address	Maginet8@yahoo.com
Mobile Phone No	(Phone) +65-97539541
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Hino
Model	XZU605R
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?	No - Reporting only
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	4009
Vehicle Fuel	-
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	Lonpac Insurance Bhd
Policy Number / Cover Note Number	Z24VC00115539

DRIVER

Name of Driver	KOHRI GURSAB SINGH
Passport No/FIN	G6989390U
Date Of Birth	06/09/1985
Occupation	Outdoor
Driving Pass Date	17/05/2023
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	1 YEAR AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-80154857
Alt. Phone Number	-
Email Address	Maginet8@yahoo.com
Address	B
Address complement	-
Postcode	-
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	2
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)	3
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	WORKER
Gender	Male

PASSENGER 2

Name	WORKER
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO 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 SNB7110T
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

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5. **Any false reporting may be referred to the Traffic Police Department for investigation.**
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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.



Policyholder's Signature / Date & Time

Logan

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



Florence Koh

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

Sketch Plan

vJun2022

1

Describe Circumstance of the Accident

Refer to police report

Note: No damage to my vehicle

3 pax.
clear / dry.

Declaration

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



Policyholder's Signature / Date & Time

Signature

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



*Phonice
WTH*

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















**SINGAPORE
POLICE FORCE**



T/20241024/7057

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20241024/7057

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/10/2024 14:38		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: Kohri Gursab Singh			Address: 30 Mandai Estate #02-09 Mandai Industrial Building SINGAPORE 729918		
ID Type / ID No.: FIN NO / G6989390U			Contact No.: Home/Office: Mobile: 80760340		
Nationality: INDIAN			Email: hr.magnet@yahoo.com		
Sex:	Age: 39	Date of Birth: 06/09/1985	Type of Informant: Driver		
Race:			Language: English		
Occupation: Worker not reporting any occupation			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 11/10/2024 12:10	Type of Location: Car Park
Location: BAIN STREET				
Weather:		Road Surface:		
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
YR2073K	Lorry					0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20241024/7057

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20241024/7057

CONTINUATION OF REPORT

Driver			
Name	KOHRI GURSAB SINGH	ID No.	G6989390U
Related Vehicle	YR2073K (Lorry)	Contact No.	80760340
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave (MC)	NIL	Degree of Injury	NIL

Brief Details.

Recently my company received a letter from the Singapore Police Force regarding "Traffic Accident Involving SNB7110T and YR2073K along cashin street on 11/10/2024 at about 12.10pm".

Reference Number: TP/IP/30153/2024

On 11 Oct 2024, while I was exiting my parking lot, after attempt to shift out from the carpark lot, my lorry not able to exit due to space constraint and also some vehicle obstructing.
Therefore, I reversed, and forward to get my vehicle out of the lot.
During the process, I felt the vehicle a little shaky. Both myself (the driver) and the passenger alighted to check.
We check around the vehicle and our surrounding vehicle. There was no damages. Therefore, we proceed to leave.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000



T/20241024/7057

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Report No. T/20241024/7057

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / AEIT /
CHUA SOON KEONG
Contact No.: 65476030

NP168

Signature Of Informant:
The identity of the person making this report has been
authenticated by Singpass. No signature is required.

Date/Time:
24/10/2024 14:38

Classification Of Case:



**SINGAPORE
POLICE FORCE**
SAFEGUARDING EVERY DAY

Our Ref: TP/IP/30153/2024

Date: 14/10/2024

MAGINET PLUMBING CONTRACTOR PTE. LTD.
30 MANDAI ESTATE
#02-09
SINGAPORE 729918

TRAFFIC POLICE
SINGAPORE POLICE FORCE
10 UBI AVENUE 3
SINGAPORE 408865
<https://eservices.police.gov.sg>

TRAFFIC ACCIDENT INVOLVING SNB7110T AND YR2073K ALONG CASHIN STREET ON 11/10/2024 AT ABOUT 12.10 PM

You are the registered owner of **YR2073K**. Traffic Police have received a report of a recent accident involving your vehicle.

2 You are required by law to provide the particulars of the driver involved in the accident within 14 days of receiving this letter. Please send the required information to the Investigation Officer via the FormSG link: <https://go.gov.sg/furnishdriverparticulars> or scan the QR code. Under the provisions of the Road Traffic Act 1961, it is an offence not to provide the driver's particulars, and the owner can be liable to a fine of up to \$1,000/- or 6 months' imprisonment.

3 In addition, please inform the driver to lodge an online **Traffic Accident Report** using Singpass via <https://www.eservices.police.gov.sg>. Failure to lodge a report may have adverse consequences for the driver.

4 The information provided by the driver in the report will be carefully considered. The driver may not be called upon for an interview if the information provided is sufficient for our investigation.

Yours faithfully,

**LIM KIAN HENG SAM, SUPT
CHIEF INVESTIGATION OFFICER
TRAFFIC POLICE**

This is a computer-generated letter. No signature is required.



A FORCE FOR THE NATION