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.

- 4. The issue and acceptance of this is form by instrained 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 29/06/2024 12:49 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 28/06/2024 15:06 (SGT) Exact Location of Accident Kim Keat Link Additional Location Information exit to PIE Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

BMW

Vehicle Registration Number **SJR9219P**

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner Mega Engineering (S) Pte Ltd Company Reg No 2XXXXX136N Email Address rajan@mega-gondola.com Mobile Phone No (Phone) +65-90613271 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model 740li Variant Exact purpose for which vehicle was being used at time of accident Private use

Are you claiming under your own insurance policy for repair to No - Claiming third party your vehicle?

Vehicle Category Private car Transmission Auto CC 2998

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Policy Number / Cover Note Number 7240061345

DRIVER

Name of Driver Rajan S/O Samyappan NRIC No SXXXX504Z Date Of Birth 25/04/1964 Occupation Indoor

Driving Pass Date 30/04/2004 Driving experience 20 YEARS AND 2 MONTHS Gender Mobile Number (Phone) +65-90613271 Alt. Phone Number Email Address rajan@mega-gondola.com Address Blk 191A Rivervale Drive #09-922 Address complement Postcode 541191 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Director Does Driver Own Other Vehicles? Nο 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 Side Swipe Weather Conditions Raining Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 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) 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 Bishan Neighbourhood Police Centre Police Station Phone No (Phone) +65-18005529999 Alt. Police Station Phone No (Fax) +65-65561905 Police Station Address 20 Bishan Street 23 Singapore 579757 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT Please refer to the sketch plan. ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number XE7463R Vehicle Manufacturer

Vehicle Model
Vehicle Variant

Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	Kumaravelu Sankaralingam
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

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
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- Information provided must be as teathful 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.
- 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 socident 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 dalms, (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 Vicinity Imms), which may be sited outside of Singapore, for one or more of the above Purposes.

Poscyholder's Signature / Date & Type

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

KIM KENT

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

Sketch Plan

A: SJR9219P B: XE7463R

PIE

1

Describe Circumstance of the Accident					
Refer to police report attached					
7 20240628 2077					
30140628 3047					
	1				
40					

Declaration

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

older'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) Jenny Lim

2





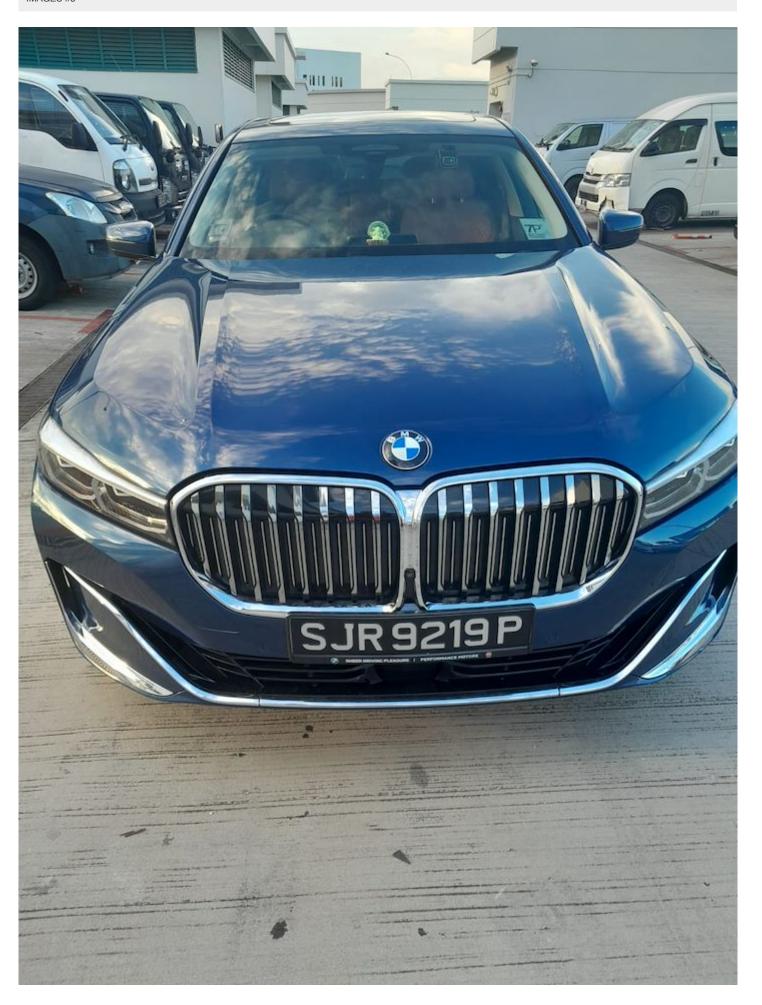




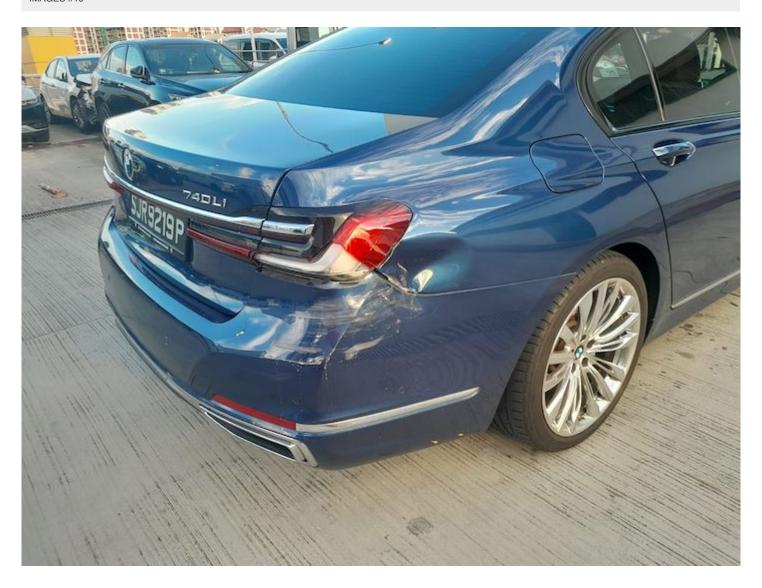


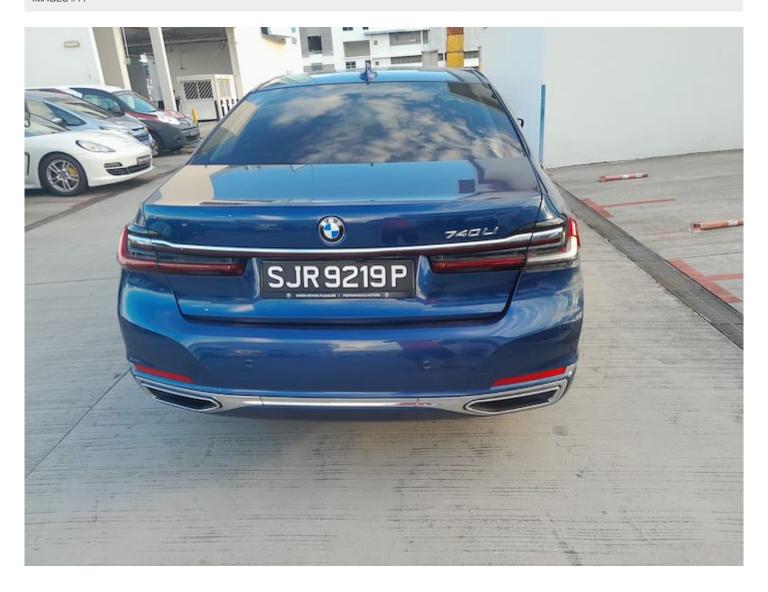






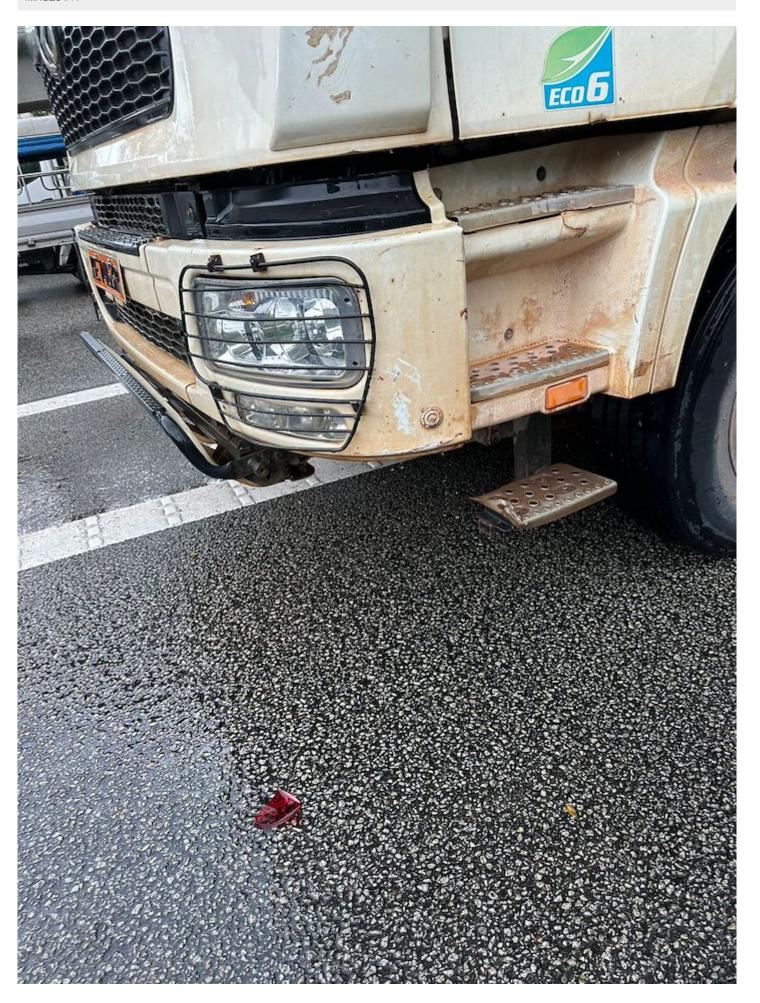


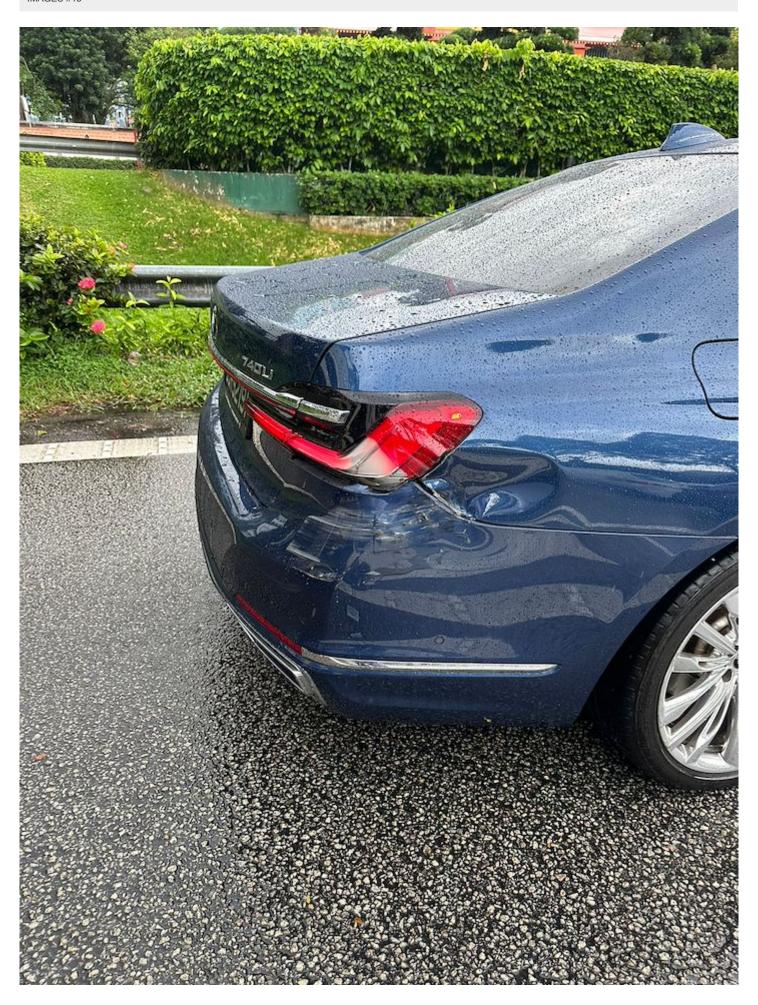


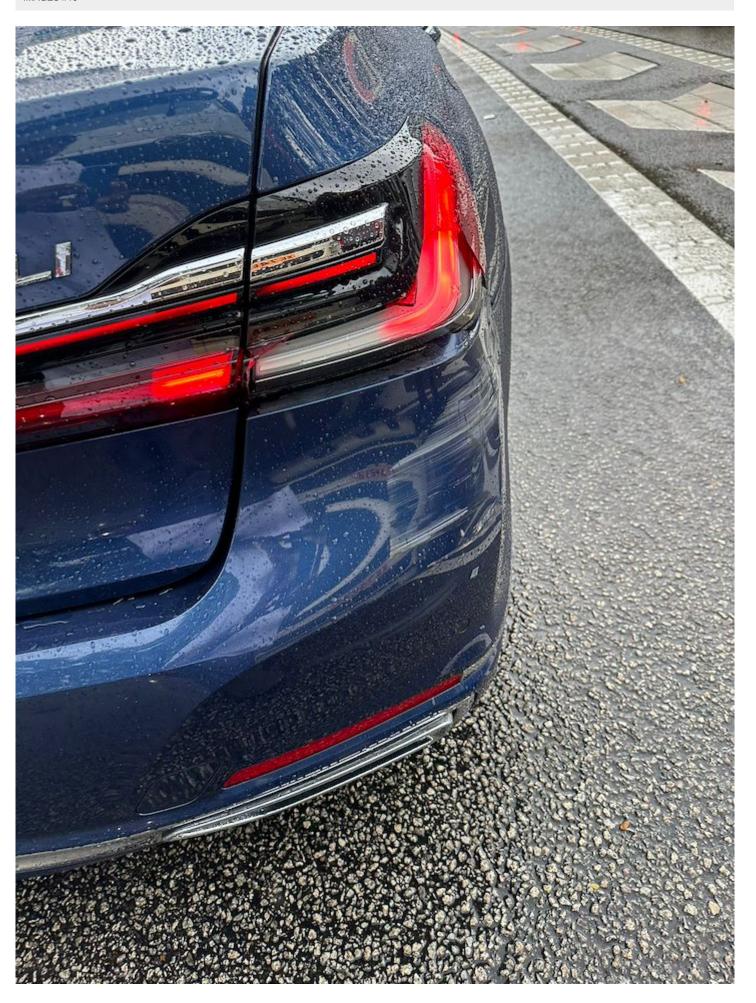


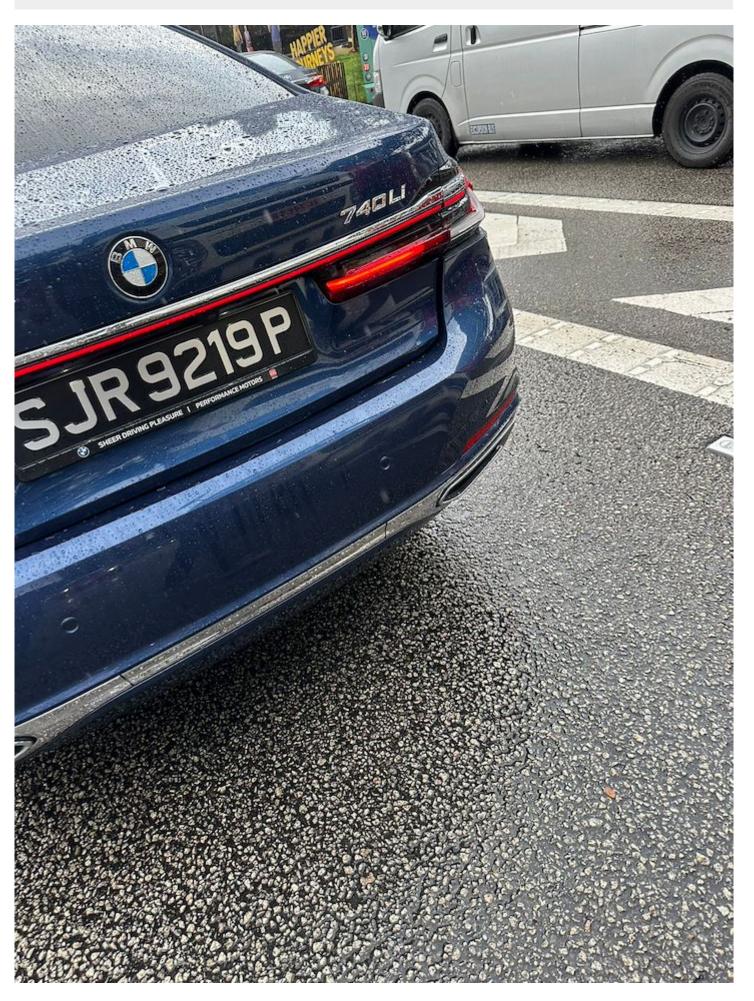












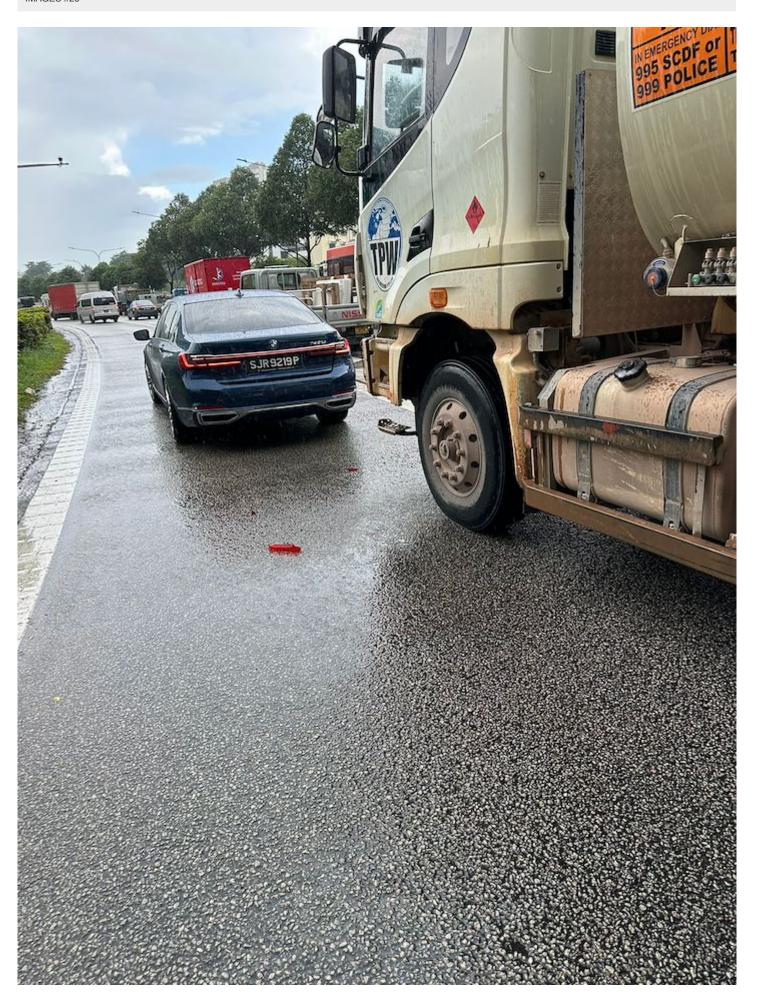


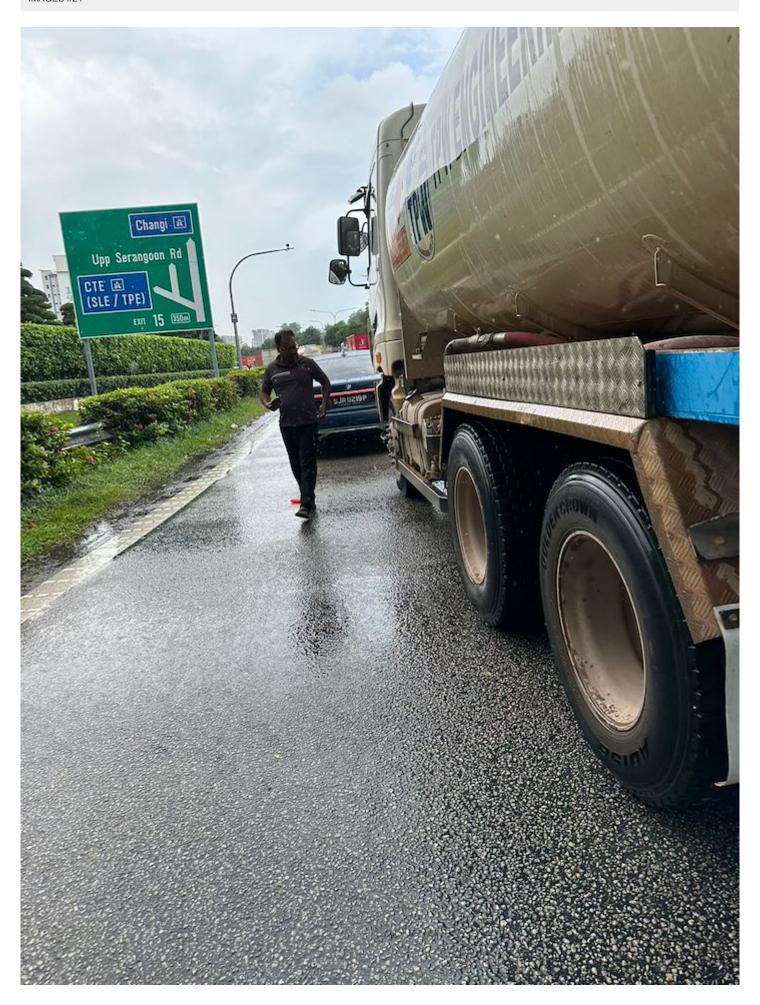


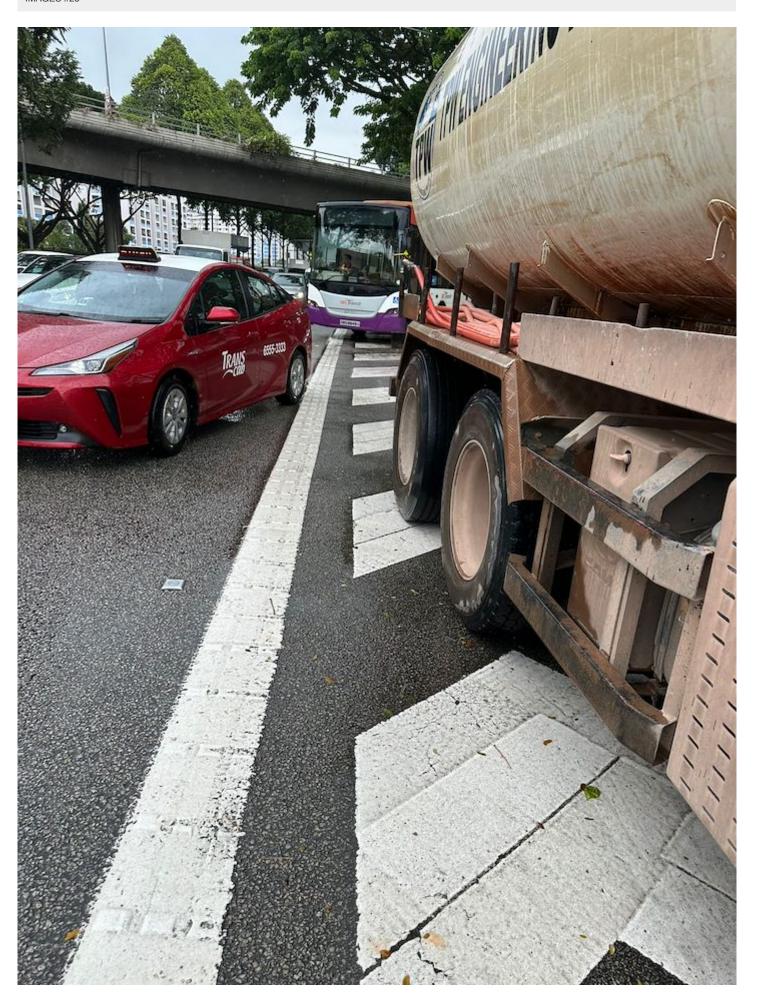




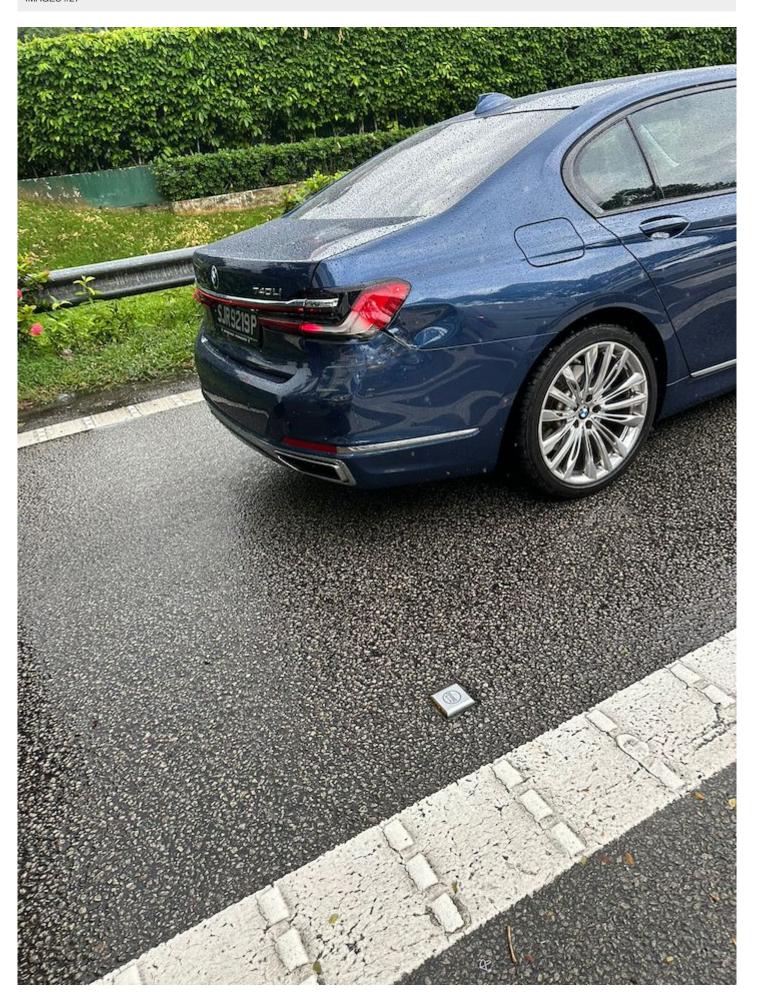
















T/20240628/2077

Police Station Of Origin:

Bishan N.P.C

20 Bishan Street 23 SINGAPORE 579757

Tel No: 1800-5529999

1 of 3

Report No. T/20240628/2077

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/06/2024 18:11			Vide Report No.:	Station Diary No.: 69		
Informa	nt's Partic	ulars	11 de 64 f			
Name of Informant: RAJAN S/O SAMYAPPAN			Address: 191A RIVERVALE DRIVE #09-922 SINGAPORE 541191			
ID Type / ID No.: NRIC NO / S1676504Z			Contact No.: Home/Office:	Mobile: 90613271		
Nationality: SINGAPORE CITIZEN		Email:				
Sex: Age: Date of Birth: Male 60 25/04/1964		Type of Informant: Driver				
Race: Indian		Language:				
Occupation: Company director			Driving Licence Information: Class: 3 Date of Expiry:			

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 28/06/2024 14:30	Type of Location Kim Keat Rd Exit leading to PIE	
Location: KIM KEAT RO	DAD				
Weather:		Road Surface: Wet			
Traffic Flow:		Traffic Control: Not Controlled		Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			3	Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of Passenge
SJR9219P	Motor car	BMW	740LI ALED SR	Blue		0
XE7463R	Lorry	CAMC	HN3251X40 C3M6	White		0



T/20240628/2077

Police Station Of Origin: Bishan N.P.C 20 Bishan Street 23 SINGAPORE 579757 Tel No: 1800-5529999 2 of 3 Report No. T/20240628/2077

CONTINUATION OF REPORT

Details of Perso	on Involved	000 - ED	MC 15 (5) (2)	4381	R \$016	He was the
Any Pedestrian	Involved: No	AND DESCRIPTION OF THE PARTY OF	22400 - 2	26/8/8-208	A CONTRACTOR	NAME AND DESCRIPTIONS OF PERSONS
No. of Pedestrians Injured: NIL Use of F				edestrian Crossing: NA		
Driver				14363		
Name	RAJAN S/O SAMYA	RAJAN S/O SAMYAPPAN			Э.	S1676504Z
Related Vehicle	SJR9219P (Motor car)			Contact No.		90613271
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL			Class of Driving Licence & Expiry		Class: 3 Date of Expiry: NIL
Date Treatment	NIL	-0 -0	Date Disc			
No. of Days granted Medical Leave 03			Degree of		NIL	
Driver			ALC: NOT THE REAL PROPERTY.	E121/2	THE LA	
Name	KUMARAVELU SANKARALINGAM			ID No.		F8120851N
Related Vehicle	XE7463R (Lorry)			Contact No.		90841103
Hospital/Clinic	NIL			Class of Driving Licence & Expiry		Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Disch	arge	NIL	
No. of Days grant	ted Medical Leave	NIL	Degree of		NIL	

Brief Details.

On the above-mentioned date, time and location. I was driving SJR9219P along Kim Keat Road exiting towards PIE. After exiting Kim Keat Road, one vehicle XE7463R from PIE lane 1 drove onto the chevron marking resulting in a merging of my lane and collided onto the rear of my vehicle. I alighted from the vehicle and exchanged particulars with the driver. I also have an in-car camera installed in my vehicle. I had made a check on my vehicle and the right rear of my vehicle damaged. After the accident, i felt pain on my body as such i visited Mount Alvernia Hospital and received 3 Days MC.





Police Station Of Origin: Bishan N.P.C 20 Bishan Street 23 SINGAPORE 579757 Tel No: 1800-5529999

3 of 3 Report No. T/20240628/2077

CONTINUATION OF REPORT

Signature of Officer Recording The E / SGT 2 SHAWN KOH	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 28/06/2024 18:11
Officer In Charge Of Case: TP / GIA / INSP (1) BOON YEN KIAN Contact No.: 65472079	Classification Of Case:
NP168	



CERTIFICATE OF INSURANCE

AUTOPLUS PRIVATE VEHICLE

Name of Policyholder : MEGA ENGINEERING (S) PTE LTD Period of Insurance : 20 Apr 2024 To 19 Apr 2025 Vehicle No. : SJR9219P Policy No. : 7240061345 Engine/Motor No. : A0906609B58B30C Endorsement No. : 000000000557702 Chassis No. : WBA7T22090CJ44074 Issued Date : 07 May 2024 9:11

ABOUT THE COVER

: BMW 740Li Luxury

Engine Capacity/Tonnage : 2,998.00 CC Driver Restriction : NA

Sum Insured : Market Value Off Peak Car : No

First Year of Registration : 2022 Insuring with COE/PARF : Yes

Person or Classes of Persons Entitled to Drive*;

Any person who is driving on the Policyholder's order or with their permission.
This Policy will indometry the Policyholder or any authorized driver only it he/she meets the specified age condition.

You have to pay an additional sum of \$\$\$3,000 as "Young and/or inexperienced Driver (Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has loss than 2 years' driving experience.

Age Condition

: All Age Condition

Mileage Condition

Limitation as to use* :

Use only for social, demestic and pleasure purposes and for the Policyholder's business.
This Policy does not cover use for hire or reward, driving test, driving test, draing, pace-making, reliability trial of speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purposes in connection with Motor Trade.

Loss of Use 1500cc - 1600cc Optional

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act 1960, Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings

EXCESS

Section f
Fire - 50 Own Damage - \$1600 Theft - 50 Theft Outside Singapore Cover - \$0 Flood Cover - \$1600

Section 2

Property Damage - \$0

Named Driver and Excess (where applicable)

null

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

Any additions require to the Vehicle must be carried out by one of our Authorised Repairers. Within the first 3 years of the first registration of the Vehicle in Singapore, You have the option of having the society registration of the Sole Agent's workshop.

For other Approved Reporting Centres/AIS Authorised Repairers, please contact our 24-hour accident emergency bolline at +05 638 6200, Alternatively, You may refer to AIS website www.aig.ag.

IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: NA

We hereby config that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act 1960, Part RV of the Road Transport Act, 1987 (Malaysla), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third-Party Risks) Rules, 1999 (Malaysla), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third-Party Risks) Rules, 1999 (Malaysla), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third-Party Risks) Rules, 1999 (Malaysla), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third-Party Risks) Rules, 1999 (Malaysla), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third-Party Risks) Rules, 1999 (Malaysla), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third-Party Risks) Rules, 1999 (Malaysla), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third-Party Risks) Rules, 1999 (Malaysla), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third-Party Risks) Rules, 1999 (Malaysla), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third-Party Risks) Rules, 1999 (Malaysla), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third-Party Risks) Rules, 1999 (Malaysla), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third-Party Risks) Rules, 1999 (Malaysla), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third-Party Risks) Rules, 1999 (Malaysla), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third-Party Risks) Rules, 1999 (Malaysla), Rules, 199

0504709000

PJ INSURANCE AGENCIES PTE LTD

AIG Asia Pacific Insurance Pte. Ltd.

This computer generated document does not require a signature.

6 PETIR ROAD #19-10 MAYSPRINGS

SINGAPORE 678267

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

78 Shenton Way #09-16 AIG Building \$079120 | T +65 6419 2000 | www.arg.sg

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