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.
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	29/07/2024 11:53 (SGT)
Reported by	Actual Driver
Date of Accident	27/07/2024 14:40 (SGT)
Exact Location of Accident	Somerset Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD6499P

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	Strides Premier Taxi Pte Ltd
Company Reg No	1XXXXX369K
Email Address	sparc@stridespremier.com.sg
Mobile Phone No	(Phone) +65-65446676
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Prius
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 - Claiming third party
Vehicle Category	Taxi
Transmission	Auto
CC	1800

INSURANCE COMPANY

Name of Insurance Company	MS First Capital Insurance Ltd
Policy Number / Cover Note Number	D-24102275MFSH

DRIVER

Name of Driver	VETRIVEL S/O RAMAMOORTHY
NRIC No	SXXXX675C
Date Of Birth	21/07/1972
Occupation	Outdoor

Driving Pass Date	10/06/1993
Driving experience	31 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-65446676
Alt. Phone Number	-
Email Address	sparc@stridespremier.com.sg
Address	11
Address complement	-
Postcode	-
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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	Side Swipe
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?	Yes
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	Hougang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004890999
Alt. Police Station Phone No	(Fax) +65-63128989
Police Station Address	60 Hougang Ave 9 Singapore 538775
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT - T//20240727/2079

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	SHD7258L
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Taxi
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SGJ8212S
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	UNKNOWN
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SGJ8212S
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	Yes

SKETCH PLAN

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

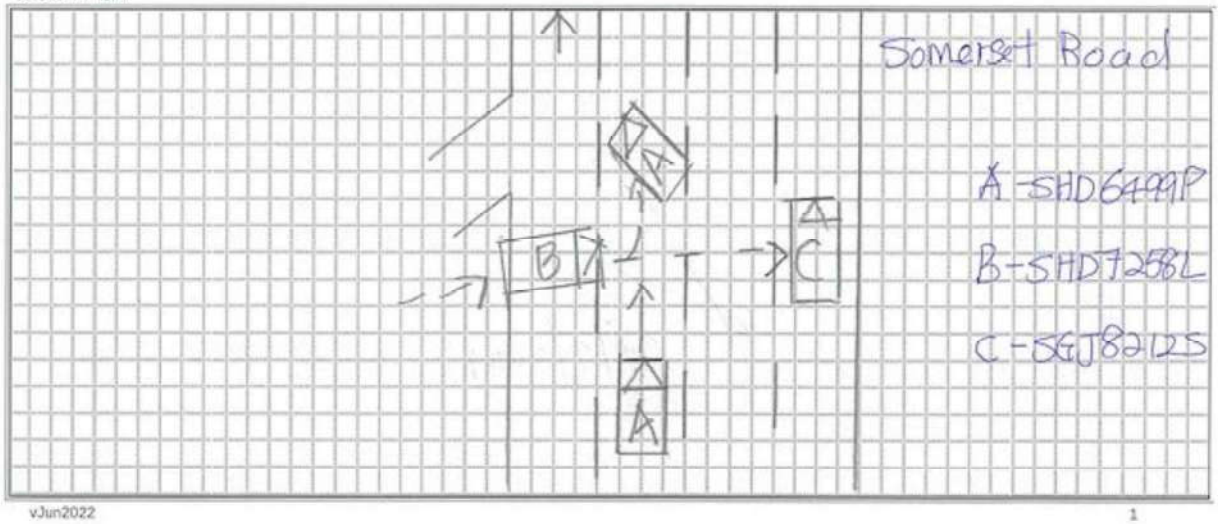
PREMIER TAXI PTE LTD STRIDES

29/7/2024

29.7.2024

Policyholder's Signature / Date & Time	Actual Driver's Signature (if driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

Sketch Plan



vJun2022

1

Describe Circumstance of the Accident

Declaration

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

PREMIER TAXI PTE LTD STRIDES

29/7/2024

29.7.2024

Policyholder's Signature / Date & Time

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

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

vJun2022

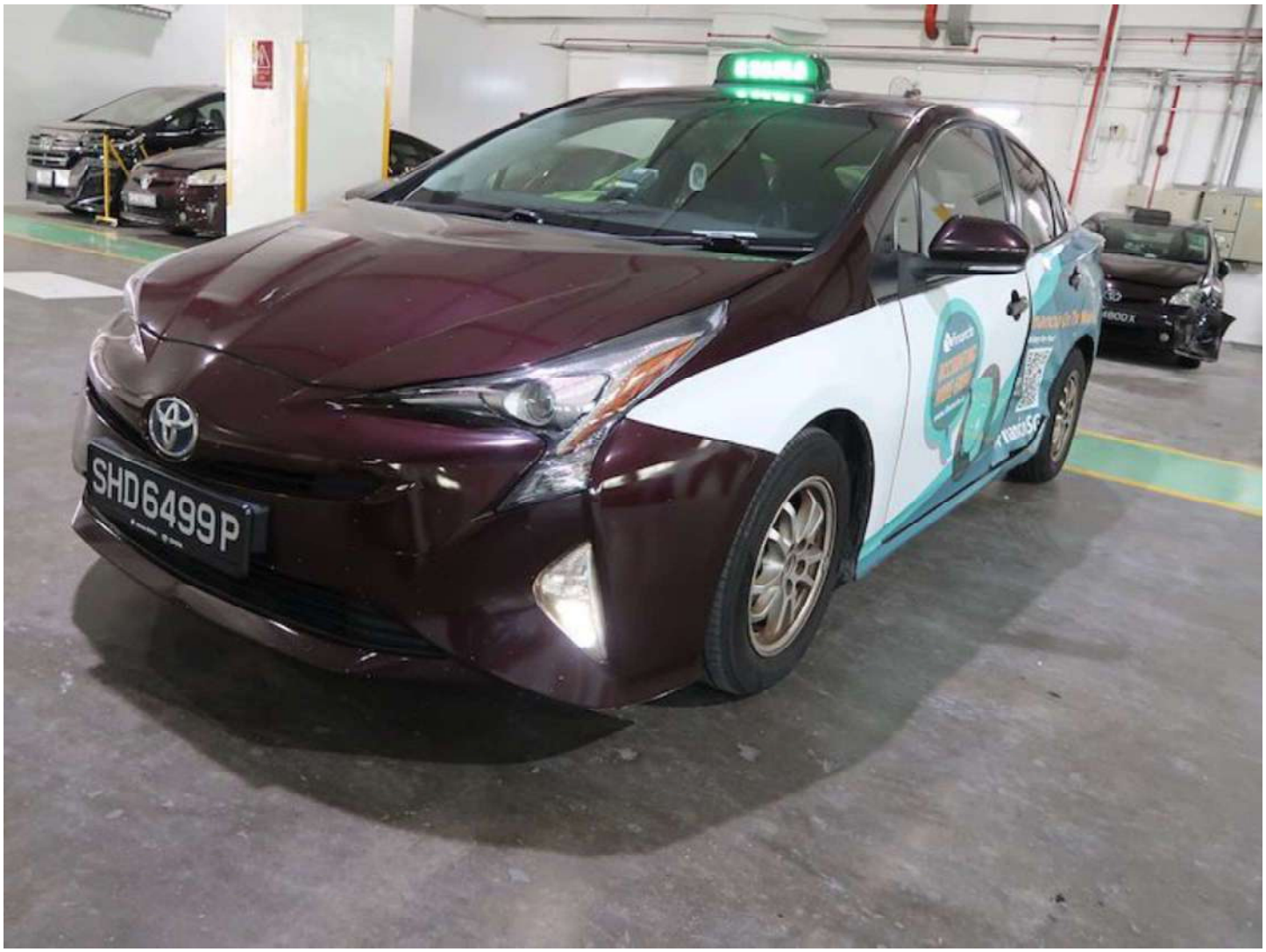
2


TOYOTA MOTOR CORPORATION
JTDKB3FU40357 42274
1790 kg
2515 kg
1-1020 kg
2- 975 kg
MODEL ZVW50R-AHXEBW
S/TR
218 /FB20
A/TM
-01A/P610
PLANT A42
317 7
SRS SIDE AIRBAG

IMAGES #2

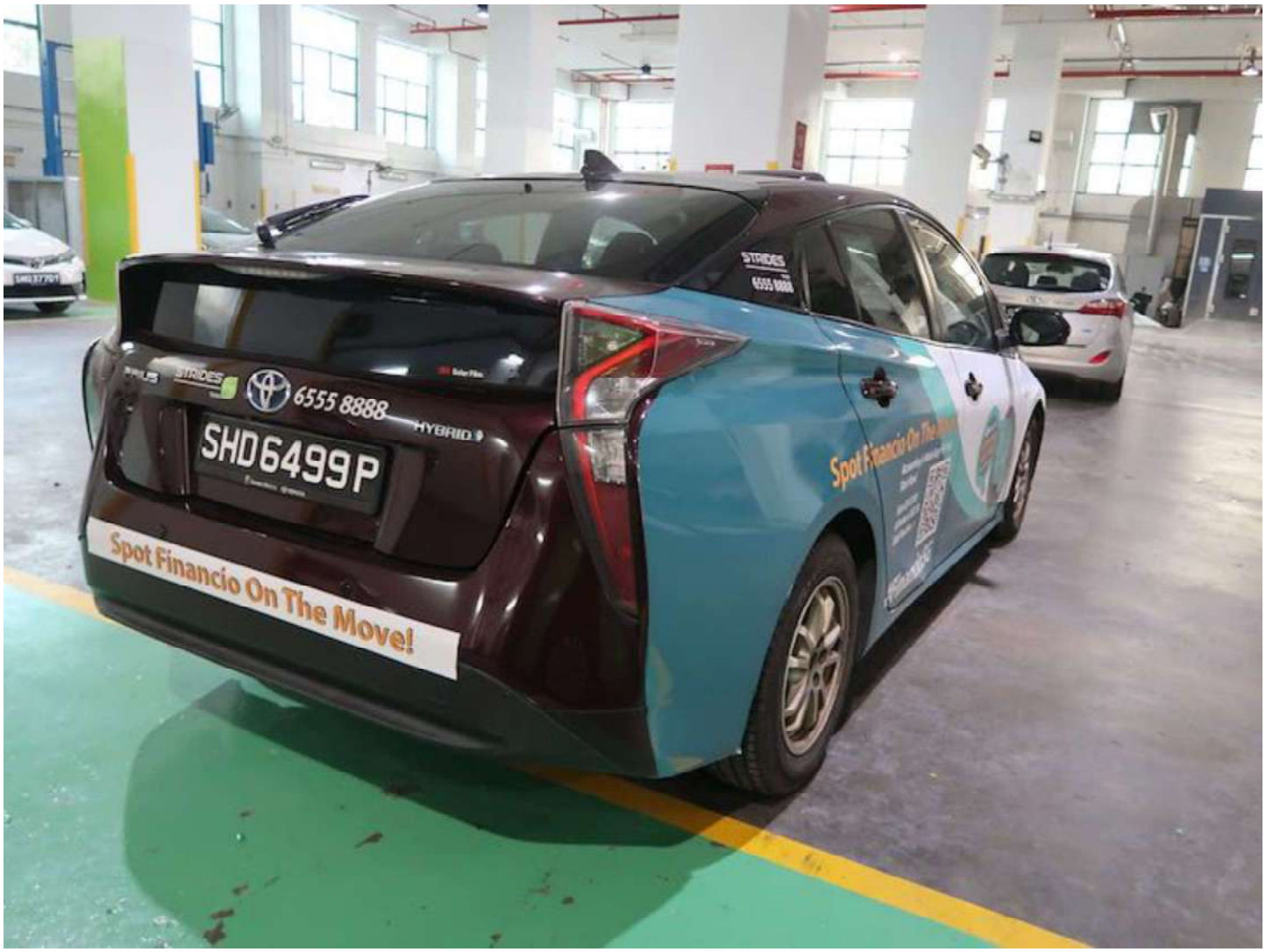
IMAGES #3

IMAGES #4

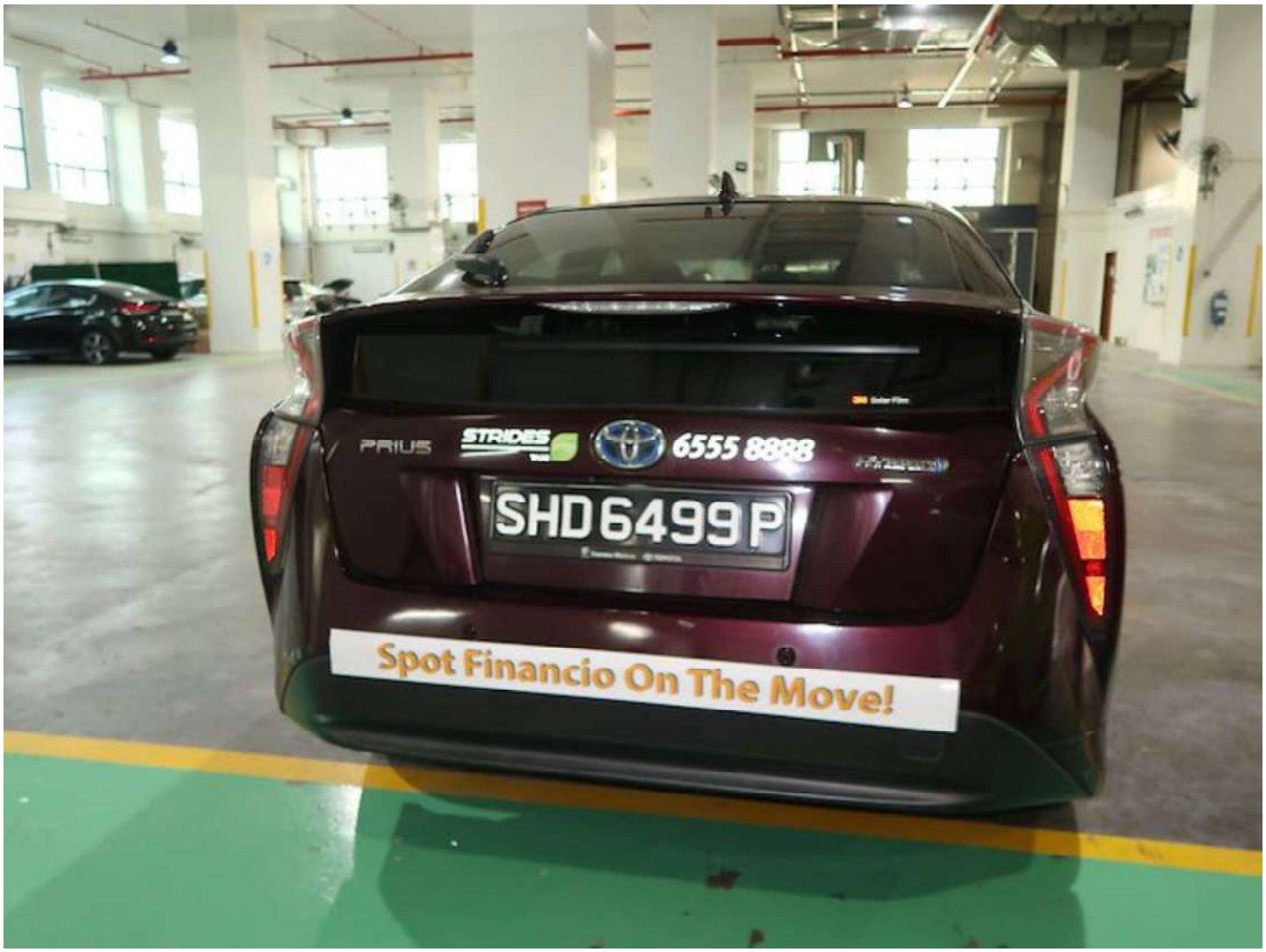


IMAGES #5

IMAGES #6


STRIDES
6555 8888
HYBRID
SHD6499P
Spot Financio On The Move!

IMAGES #7



SINGAPORE POLICE FORCE

T/20240727/2079

Report No. T/20240727/2079

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:	Vide Report No.:	Station Diary No.:
27/07/2024 19:44	E/20240727/0076	126

Informant's Particulars

Name of Informant: VETRIVEL S/O A RAMAMOORTHY			Address: 126 SERANGOON NORTH AVENUE 1 #02-77 SINGAPORE 550126
ID Type / ID No.: NRIC NO / S7229675C			Contact No.: Home/Office: Mobile: 88198343
Nationality: SINGAPORE CITIZEN			Email:
Sex: Male	Age: 52	Date of Birth: 21/07/1972	Type of Informant: Driver
Race: Indian			Language:
Occupation: Taxi driver			Driving Licence Information: Class: 2B,2A,3,4 Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 27/07/2024 14:40	Type of Location: Straight Road
Location: SOMERSET ROAD				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of Passenger
SGJ8212S	Motor car	TOYOTA			Seriously Damaged	1
SHD6499P	Motor car	TOYOTA	PRIUS HYBRID 1.8 CVT	Maroon	Seriously Damaged	0
SHD7258L	Motor car	HYUNDAI			Seriously Damaged	0

SINGAPORE POLICE FORCE

T/20240727/2079

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

Report No. T/20240727/2079

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Name	FEMALE PASSENGER	ID No.	NIL
Related Vehicle	SGJ8212S (Motor car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of	Slight
Driver			
Name	MR KEN	ID No.	NIL
Related Vehicle	SGJ8212S (Motor car)	Contact No.	91453607
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL
Driver			
Name	VETRIVEL S/O A RAMAMOORTHY	ID No.	S7229675C
Related Vehicle	SHD6499P (Motor car)	Contact No.	88198343
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 2B,2A,3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

SINGAPORE POLICE FORCE

T/20240727/2079

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

Report No. T/20240727/2079

CONTINUATION OF REPORT

Driver			
Name	MR BAI	ID No.	NIL
Related Vehicle	SHD7258L (Motor car)	Contact No.	96638535
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

I have been a taxi driver for STRIDES for the past 3 years.

On 27/07/2024 at about 1440hrs, I recalled driving my Taxi bearing plate no: SHD6499P along 111 Somerset Rd towards the direction of Grange Rd. When a traffic accident had took placed.

I remembered seeing one comfort delgro taxi bearing plate no: SHD7258L turning out of 111 Somerset Rd. The said Taxi is believed to have mount the curb when turning out. The said taxi then went up onto one pedestrian walkway before it collided into the left side of my vehicle that was travelling along the main road. The said collision have caused my vehicle to turn clockwise. Before the said comfort delgro taxi continued to inch forward and in colliding onto one vellfire vehicle bearing plate no: SGJ8212S. From my observation, no government property was damaged. However, one lady who was seated in the Vellfire vehicle was believed to be injured. There were also several damages (in terms of scratches/dents) observe on the exterior left of my vehicle. Some of us started calling for the police and ambulance.

While awaiting for the police and paramedics to arrive. We had all exchanged particulars among ourselves.

The police and paramedics were at scene shortly to assist on the matter. The said lady was observed to be conveyed by the paramedics to a nearby hospital for treatment. While, I had remained at scene to provide the necessary details to the police. My incar camera sd card was also seized by traffic police for their investigation. One case card and acknowledgedment slip was issued to me.

As instructed, I'm lodging this police report for my encounter.

SINGAPORE POLICE FORCE

T/20240727/2079

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

Report No. T/20240727/2079

CONTINUATION OF REPORT

Signature of Officer Recording The F / SGT 3 LUM HOW MUN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 27/07/2024 19:44
Officer In Charge Of Case: TP / GIT / SGT 3 MUHAMMAD KHAIRI SUFRIE BIN SUHAIMI Contact No.: 96207105	Classification Of Case:

NP168