

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 Authorised 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 ability
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 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 Report	06/09/2016 10:05
Date Of Accident	05/09/2016 10:30
Exact Location Of Accident	KITCHENER LINK
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBD9433E
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Insured/Policyholder

Name Of Registered Owner	MANIK ENGINEERING AND CONSTRUCTION PTE LTD
Co Reg No	201219274W
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-91994870

Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA 3.0 M
Exact Purpose for which vehicle was being used at time of accident	WORK
Are you claiming under your own insurance policy for repair to your vehicle?	No
If No, Please state action to be taken	Reporting Only
Vehicle Category	Commercial Vehicle

Insurance Company

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type Of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMCVSN3073871600
Cover Note Number	

Driver

Name of Driver	THARUMARAJAN VENKATESAN
NRIC No	G7556667R
Date Of Birth	20/07/1980
Occupation	Outdoor
Date Of Driving Pass	06/01/2009
Driving Experience	7 Years And 7 Months
Gender	Male
Mobile Number	(Local) +65-90625450
Fax Number	
Contact Number	
EMail Address	VENKATG20780@GMAIL.COM

Address	648 LORONG 3 GEYLANG
Postcode	389025
Was driver an employee of the Insured's Company	Yes
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	Collision- Head to Side
Weather Conditions	Clear
Road Surface	Dry

Other Information

Was any foreign vehicle involved in this accident?	No
Was any body injured in the Accident?	No
Was any other material or property damaged?	Yes
Was there any video captured by Car Camera?	No
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	No
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	No
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO THE ATTACHED SKETCH PLAN.

Are accident photos available for attachment?	Yes
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DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHD9653R
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	ABDUL KADAR BIN MOHAMED ZAKARIA
NRIC/Passport Number	S1414643A
Contact Number	86448063
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

Details of Witness

Name	
Phone Number	
Email Address	

Sketch Plan

SKETCH PLAN

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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' law yers/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' law yers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

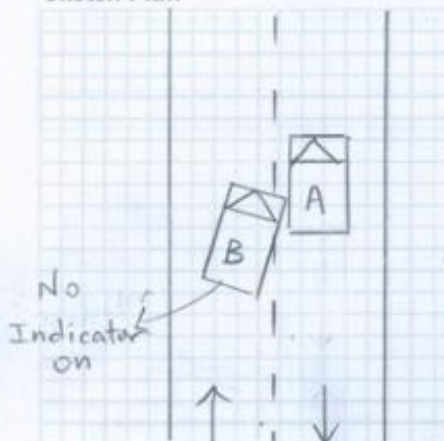
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



Policyholder's Signature / Date & Time
5/9/16 1805 hrs
Sketch Plan

Driver's Signature (If driver is not the policyholder) / Date & Time
5/9/16 1805 hrs

Witnessed by Reporting Centre Personnel



Kitchener Link

A: GBD 9433E

B: SHD 9653R

Accident Date: 05-09-2016



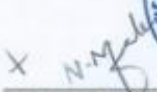
Sketch Plan #2

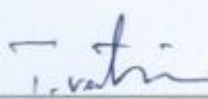
Describe Circumstances of the Accident

I was travelling along Kitchener Link behind a taxi: SHD9653R, then it stopped without any indication, I waited for a while, but it did not move off, so I overtook him, when I was driving pass vehicle B, it suddenly turned right and hit onto my vehicle's left hand portion.

Declaration

We declare the foregoing particulars are true in every respect.

X  
Policyholder's Signature / Date &
Time 5/9/16 1805 hrs


Driver's Signature (if driver is not the policyholder) / Date
& Time 5/9/16 1805 hrs


Witnessed by Reporting Centre
Personnel

Driving License

S PASS
Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore

Employer:
MANIK ENGINEERING AND CONSTRUCTION PTE. LTD.

Sector: **CONSTRUCTION**

Name:
THARUMARAJAN VENKATESAN

Occupation:
SUPERVISOR





S Pass No.:
0 3294521-

Date of Application:
13-07-2015

Date of Issue:
22-07-2015

Date of Expiry:
22-07-2017

L5862456



REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: **G7556667R**



Name:
THARUMARAJAN VENKATESAN

Birth Date: **20 Jul 1980**

Issue Date: **14 Nov 2013**

Valid Till: **05 Jan 2019**

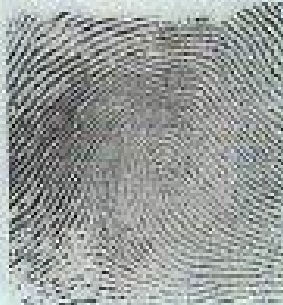
002245668A



Identification Card

VISIT PASS
Immigration Regulations

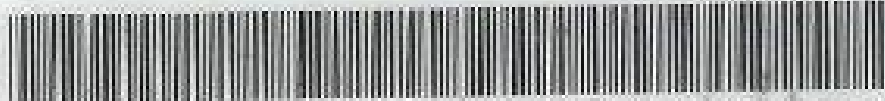
Name
THARUMARAJAN VENKATESAN



Date of Birth	Sex	Nationality
20-07-1980	M	INDIAN
FIN	Date of Issue	Date of Expiry
G7556667R	22-07-2015	22-07-2017

MULTIPLE JOURNEY VISA ISSUED

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

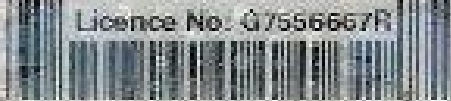
		EFFECTIVE DATE
Class 2B	Motorcycles ≤ 200 CC	06 Jan 2009
Class 3	Motor cars ≤ 3000 kg with ≤ 7 passengers, exclusive of the driver; and motor tractors/vehicles ≤ 2500 kg	06 Jan 2009
Class 4	Heavy motor cars and motor tractors > 2500 kg	26 Apr 2014

G7556667R

S / No. 9000204637

NP 428A

Licence No: G7556667R



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

