### 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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	24/11/2017 15:17
Date Of Accident	18/11/2017 08:00
Exact Location Of Accident	PUNGGOL RD TWDS SENGKANG
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	YN7103X
Insured/Policyholder	
Name Of Registered Owner	AETOS SECURITY MANAGEMENT PTE LTD
Co Reg No	-
Email Address	MURUGAN.ARUNACHALM@AETOS.COM.SG
Mobile Phone No	(LOCAL) +65-90870885
Alternative Phone No	OFFICE-90870885
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	SPRINTER
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?	YES
If No, Please state action to be taken	
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	FIRST CAPITAL INSURANCE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D-17087376MFCV/9
Cover Note Number	

Driver

Name of Driver RANJEET KUMAR S/O MUTHUSAMY

NRIC No S8414330H

Date Of Birth 12/05/1984

Occupation OUTDOOR

Date Of Driving Pass 27/03/2006

Driving Experience 11 YEARS AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-90870885

Fax Number

Contact Number OTHERS-90870885

EMail Address MURUGAN.ARUNACHALM@AETOS.COM.SG

Address BLK 250 CHOA CHU KANG AVE 2

#05-464

Postcode 680250

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 Vegistration Number of Briver's Own

Insurance Company of Driver's Own Vehicle

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**General Information of the Accident** 

Type Of Accident HIT BY FALLEN TREE / OTHER OBJECTS

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
I have been approached by unknown person(s) soliciting/offering accident claims assistance.

**Details of Police Action** 

Was the accident reported to the police?

If Yes, Please state which Police Station

Number of Passengers (Including Driver)

Was notice of intended Prosecution given? NO

If Yes, against whom?

**Circumstances of Accident** 

PLS REFER TO THE INCIDENT REPORT.

Attachment(s)

Are accident photos available for attachment? YES
Was there any video captured by Car Camera? YES
Remarks/ Reasons: REVERT
Was there any audio recorded? NO

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number HITCURB

Vehicle Make/Model/Colour

**Details Of Properties** 

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

**Details of Witness** 

Name

Phone Number

**Email Address** 

### Sketch Plan

#### SKETCH PLAN

### IMPORTANT NOTICE

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- 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.
- The 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.
- By the lodgment 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:
  - 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time:

Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personne 's Signature

Name: NRIC/FIN No.:

### Sketch Plan #2

Punggal 1d to Senguang

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RATION eclare the foregoing particulars are true in every respect.	

Policyholder's Signature Date & Time: Driver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature Name: NRIC/FIN No.:



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Same Line

### **AETOS AUXILIARY POLICE FORCE**

#### INCIDENT REPORT

Nature of Incid	dent/Arre	st			Locatio	on of Incident/Arrest	
SSB vehicle Y	N 7103 X	Ac	cident		Punggo	Rd towards Sengkang	
Date/Day:	18 N	lov	2017 (Saturday)	Informant:	PC (AP	F) T10688 Ranjeet Kumar	
Time:	0800	0800 hrs		Team:	Team SW 7 (CRD)		
Particulars of	Subject/s				-		
Name		:	PC (APF) T10688	Ranjeet Kumar			
Sex/Age		:	Male				
NRIC/FIN No:		:	S8414330H				
Nationality		:	Singaporean				
Address		:	NA				
Occupation		:	APO				
Company		:	AETOS SECURITY HOLDING PTE LTD				
Vehicle No		:	YN 7103 X				
Contact No		:	+65 9087 0885				

- On the mentioned date and time, Informant driver PC (APF) T10668 Ranjeet Kumar together with Guardsman L/CPL (APF) T11191 Gan Chen Wea and RO PC (APF) T11146 Seet Chun Kit were on duty for section One (CRD) team SW 7. The mentioned team was on the way to replenish ATM machine id : at Punggol Field from the last location at Hougang ATM machine id :
- 2. While the vehicle travelling on the left lane along Punggol Rd towards Sengkang at about 60-70km/h before the traffic light junction of Sengkang West Ave found 01 metal object on the road, to avoid from run over the metal object driver swilled the vehicle to the left and mount the front tyre on the curb follow by the rear tyre hit the curb, cause the front and rear left rim dented and the both tyre burst.
- Driver called SSB OPS Centre and informed OPS In Charge SGT (APF) 9401 Ravindran on the incident. ACC
  DO Insp. Azroy was informed about the incident and activated Response Team. At about 0830hrs OPS In Charge
  SGT (APF) 9401 and ATL CPL (APF) 5873 left Aetos Complex with the replacement vehicle YP 3608 Y to the
  incident location.
- 4. At 0849 hrs Response Team L/CPL (APF) T10602 and WPC (APF) T08143 arrived at location. At 0900 hrs SGT (APF) 9401 and ATL CPL (APF) T05873 arrived at location with the replacement vehicle and transfer all the cassettes from YN 7103 X to YP 3608 Y safely after ensure the location is safe to transfer the cassettes. Completed transfer all the cassettes at 1010 hrs. Team SW 7 resumed duty at 1015 hrs with the vehicle YP 3608 Y after done a security checked on the accident vehicle to ensure there is no items left behind. At 1020 hrs Response Team resumed rounds.
- At 1022 hrs tow truck YN 7890 G arrived at location, driver Mr Bai Xiaowei (G 5348621 K). At 1050 hrs vehicle YN 7103 X towed away to Cycle & Carriage.
- PC (APF) T10688 Ranject Kumar is driving Aetos vehicle for the past 2 years and with 10 years of driving experience.

### Sketch Plan #4

### Declaration:

The above incident report was read over and explained to me in English and I affirmed it to be true, correct and No injuries not require medical attention. I was offered to make any changes to the incident report but I declined.





Front Left Wheel

Rear Left Wheel

Recorded by : CPL (APF) T05873 VIVEK SAMUEL P					Signature: (2)		Date : 18.11.2017( Sat)			
Ops Driver	: 3[	10118	Parinel	Kumar	Signature:		Date :		$\overline{}$	
Replenish Offic	er: LCP	11146	Sect	Chun 14+	Signature:		Date :	24	11/1	7
Guardsman	:44	11191	Gan	Chen Wea	Signature:		Date :	20	/11	117



















