

### 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 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	16/03/2018 09:50
Date Of Accident	14/03/2018 10:50
Exact Location Of Accident	CTE TOWARDS PIE
Country/State of Loss	SINGAPORE

#### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB1367E
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SMRT TAXIS PTE LTD
Co Reg No	198905369K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-80000000

#### Vehicle Particulars

Manufacturer	TOYOTA
Model	PRIUS TAXI-1.8 (A)
Exact Purpose for which vehicle was being used at time of accident	HIRE AND REWARD
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	TAXI

#### Insurance Company

Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	D-17087562MFSH
Cover Note Number	

#### Driver

Name of Driver	REVEENDRAN VIJAYAN
NRIC No	S0121884J
Date Of Birth	29/06/1953
Occupation	OUTDOOR
Date Of Driving Pass	29/12/1979
Driving Experience	38 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	21
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-

#### General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	3
Passenger 1	NAME: : UNKNOWN GENDER: : FEMALE
Passenger 2	NAME: : UNKNOWN GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	WOODLANDS EAST N.P.C
Police Station Address	ROAD: 3 WOODLANDS DRIVE 63 , POSTCODE: 737890 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT - T/20180316/2035 On 14/03/2018 at 1055hrs, I was driving my SMRT taxi bearing SHB1367E along CTE. At the point of time, the traffic was heavy. All the vehicle was moving slowly. All of a sudden, a lorry drive out of Balestier towards CTE, I was driving straight and the lorry side swipe the left side of my taxi. I horn him and overtake him asking him to stop at the side of the road. When I came out of my taxi, he did not came out of the vehicle but instead he drove off. The entire left side of my vehicle was scratched by the lorry. I reported this accident to my SMRT company and they informed me to make a Police report. There is a in car camera inside my vehicle. While looking at the footage, my company found out that the lorry belong to TITANTT PTE LTD, TEL: 62544609 OR 4059, HP: 81218887. I only remember that the lorry vehicle number is GX7943 but I could not recall the last alphabet. I am not 100% sure that this is the correct vehicle plate number. The footage is currently with my SMRT company. This is the first time such incident happened.

#### Attachment(s)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GX7943Z
Vehicle Make/Model/Colour	LORRY
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLANIMPORTANT NOTICE

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5. Any false reporting may be referred to the Police for investigation.
6. 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.
7. 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:
  - (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.
- (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:
  - (i) 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:

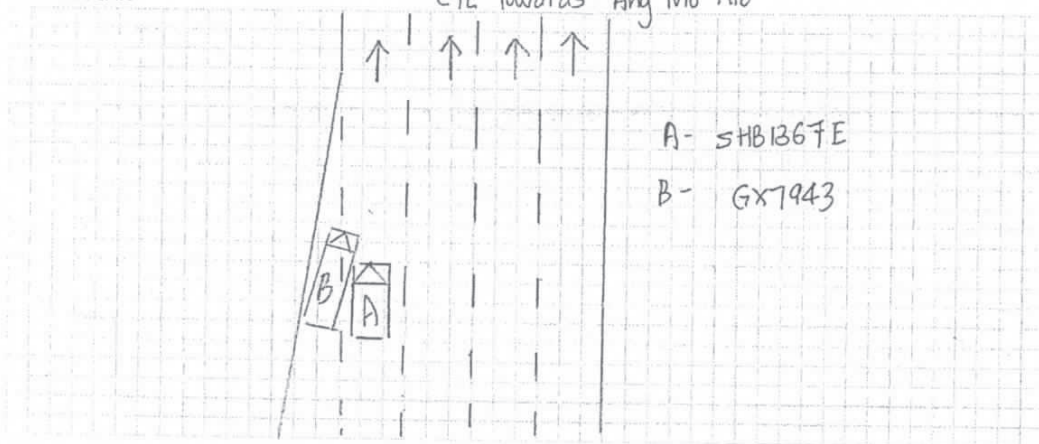
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:



## Sketch Plan Pg. 2

### SKETCH PLAN

CTE towards Ang Mo Kio.



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

[illegible]

## DECLARATION

I/We declare 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.: \_\_\_\_\_

## Sketch Plan Pg. 3



**SINGAPORE  
POLICE FORCE**



T/20180316/2035

Police Station Of Origin:  
Woodlands East N.P.C.  
3 Woodlands Drive 63 SINGAPORE 737890  
Tel No: 1800-7679999

1 of 3

Report No. T/20180316/2035

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 16/03/2018 10:52		Vide Report No.:		Station Diary No.: 64
<b>Informant's Particulars</b>				
Name of Informant: REVEENDRAN VIJAYAN		Address: 21 PARRY VIEW SINGAPORE 547081		
ID Type / ID No.: NRIC NO / S0121884J		Contact No.: Home/Office: Mobile: 90055120		
Nationality: SINGAPORE CITIZEN		Email:		
Sex: Male	Age: 64	Date of Birth: 29/06/1953	Type of Informant: Driver	
Race: Indian		Language: English	Institution / School Name:	
Occupation: Taxi driver		Driving Licence Information: Class: 3		Date of Expiry:

<b>General Information of the Accident</b>				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 14/03/2018 10:55	Type of Location: Straight Road
Location: Along Road 1 CENTRAL EXPRESSWAY				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 20 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No	

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
SHB1367E	Car				Slightly Damaged	2

<b>Details of Person Involved</b>	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE  
POLICE FORCE**



T/20180316/2035

Police Station Of Origin:  
Woodlands East N.P.C.  
3 Woodlands Drive 63 SINGAPORE 737890  
Tel No: 1800-7679999

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Report No. T/20180316/2035

CONTINUATION OF REPORT

<b>Driver</b>			
Name	REVEENDRAN VIJAYAN		ID No. S0121884J
Related Vehicle	SHB1367E (Car)		Contact No. 90055120
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

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I horn him and overtake him asking him to stop at the side of the road. When I came out of my taxi, he did not came out of the vehicle but instead he drove off. The entire left side of my vehicle was scratched by the lorry.

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Report No. T/20180316/2035

CONTINUATION OF REPORT

**Sketch Plan**

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: J / Sgt 1 TOH CHAI TEE	
Signature Of Interpreter: Not applicable	
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt ESTHER CHONG Contact No: 65476368	
Authentication Stamp NP	SN 130 Signature:
Singapore Police Force	

Signature Of Informant: 
Date/Time: 16/03/2018 10:52
Classification Of Case: