

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	06/04/2018 15:00
Date Of Accident	03/04/2018 20:00
Exact Location Of Accident	SIMS AVENUE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBF5972G
Insured/Policyholder	
Name Of Registered Owner	A DELI CONSTRUCTION PTE LTD
Co Reg No	-
Email Address	ADELICONSTRN@GMAIL.COM
Mobile Phone No	
Alternative Phone No	Office-67431869

Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA
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
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100497020-01
Cover Note Number	06/01/2018 TO 05/01/2019

Driver

Name of Driver	PAN WENXING
Work Permit No	f7738163p
Date Of Birth	28/08/1973
Occupation	OUTDOOR
Date Of Driving Pass	08/05/2015
Driving Experience	2 YEARS AND 10 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-81278351
Fax Number	
Contact Number	
E-Mail Address	WENXINGPAN528@GMAIL.COM
Address	APT BLK 1 LORONG 32 GEYLANG #03-04 LESHAN GARDENS (S) 398265
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
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 REAR
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?	YES
Was any injured conveyed to hospital by ambulance?	YES
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)	4
Passenger 1	Name: : hosen mahammed akram / g2548910t Gender: : Male
Passenger 2	Name: : luo shi sheng Gender: : Male
Passenger 3	Name: : he jiang ming Gender: : Male

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	GEYLANG N.P.C
Police Station Address	ROAD: 132 PAYA LEBAR ROAD , POSTCODE: 409014 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

refer with police report t/20180403/2161

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLT7762R
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	KEERTHI KESAAAN S/O SARAVANAN
NRIC/Passport Number	S9829260H
Contact Number	98552354
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	HOSEN MAHAMMED AKRAM / G2548910T
Approximate Age	
Injuries Sustain	TAN TOCK SENG HOSPITAL
Injured person in which vehicle?	GBF5972G
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

Accident Sketch Plan

SKETCH PLAN

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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.:



6/4/2018 3.14PM

SKETCH PLAN

A: GEF 5972G

B: SLT 7762R

refer with police report.

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

1/6/2018 6/4/2018 3:14pm

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





**SINGAPORE
POLICE FORCE**



T/20180403/2161

Station Of Origin:
Geylang N.P.C
132 Paya Lebar Road SINGAPORE 409014
Tel No: 1800-8486999

1 of 4

Report No. T/20180403/2161

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 03/04/2018 23:00		Vide Report No.: G/20180403/0193		Station Diary No.: 131	
Informant's Particulars					
Name of Informant: PAN WENXING			Address: APT BLK 1 LORONG 32 GEYLANG #03-04 LESHAN GARDENS SINGAPORE 398265		
ID Type / ID No.: FIN NO / F7738163P			Contact No.: Home/Office: Mobile: 81278351		
Nationality: CHINESE			Email:		
Sex: Male	Age: 44	Date of Birth: 28/05/1973	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Building Construction Supervisor and general foreman			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 03/04/2018 20:00	Type of Location: Straight Road
Location: Along Road 1 SIMS AVENUE				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBF5972G	Lorry				Slightly Damaged	3
SLT7762R	Car				Slightly Damaged	1

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
GBF5972G	AIG ASIA PACIFIC INSURANCE PTE. LTD.	2100497020-01	06/01/2018	05/01/2019

police report



**SINGAPORE
POLICE FORCE**



T/20180403/2161

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Police Station Of Origin:
Geylang N.P.C
132 Paya Lebar Road SINGAPORE 409014
Tel No: 1800-8486999

Report No. T/20180403/2161

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Passenger			
Name	Hosen Mohammed Akram	ID No.	G2548910T
Related Vehicle	GBF5972G (Lorry)	Contact No.	82371583
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	03/04/2018	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight
Driver			
Name	PAN WENXING	ID No.	F7738163P
Related Vehicle	GBF5972G (Lorry)	Contact No.	86278351
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
Driver			
Name	Keerthi Kesaan S/O Saravanan	ID No.	S9829260H
Related Vehicle	SLT7762R (Car)	Contact No.	98552354
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.

On 03/04/2018 at about 1955hrs, I was driving my company's vehicle(Silver, Toyota, GBF5972G) along Sims Avenue towards Eunos on lane 3 when the vehicle(Green, Honda, SLT7762R) in front of me suddenly brake due to the change in traffic light. I tried to brake however, my vehicle did not managed to stop in time hence I hit the rear of the vehicle in front of me.

As the accident happened in the middle of the road, we moved our vehicles to the side of the road and exchanged particulars. We did not managed to settle privately as my boss wants the other party to claim insurance instead. The other party then called for police and ambulance.

police report



**SINGAPORE
POLICE FORCE**



T/20180403/2161

Police Station Of Origin:
Geylang N.P.C
132 Paya Lebar Road SINGAPORE 409014
Tel No: 1800-8486999

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Report No. T/20180403/2161

CONTINUATION OF REPORT

The ambulance then conveyed one of my worker who were seated at the back of my vehicle to Tan Tock Seng Hospital as he complained that his right arm and right toes are in pain. Traffic police came and inform us to lodge a police report at any police post.

I wish to inform that the worker is currently awaiting treatment at Tan Tock Seng Hospital.

Starluck Construction P/L
323 Changi Road
67422292

That's all.

police report



**SINGAPORE
POLICE FORCE**



T/20180403/2161

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Police Station Of Origin:
Geylang N.P.C
132 Paya Lebar Road SINGAPORE 409014
Tel No: 1800-8486999

Report No. T/20180403/2161

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:

G /
Staff Sgt JUHARD BIN SAADON

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / G /
Sr Staff Sgt MOHAMMAD ABDILLAH BIN PALIL
Contact No.: 65476246

Authentication Stamp

NP168

SIGNATURE

Signature Of Informant:

Date/Time:


03/04/2018 23:00

Classification Of Case:



driver's nric & license


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

Employer
STARLUCK CONSTRUCTION PTE. LTD.



 Name
PAN WENXING
 S Pass No.
O 58434663

Sector:
CONSTRUCTION






K0233770

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: **F7738163P**
 Name:
PAN WENXING
 Birth Date: **28 May 1973**
 Issue Date: **08 May 2015**
 Valid Till: **07 May 2020**


002424830B

driver's nric & license

Immigration Regulations

03 04 2018

Name
PAN WENXING



FIN
F7738163P
 Date of Birth
28-05-1973 Sex
M
 Nationality
CHINESE
MULTIPLE JOURNEY VISA ISSUED

Download SGWorkPass
App to check status.


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 CLASSES

		EFFECTIVE DATE
Class 3	Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg	08 May 2015

Licence No: F7738163P

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



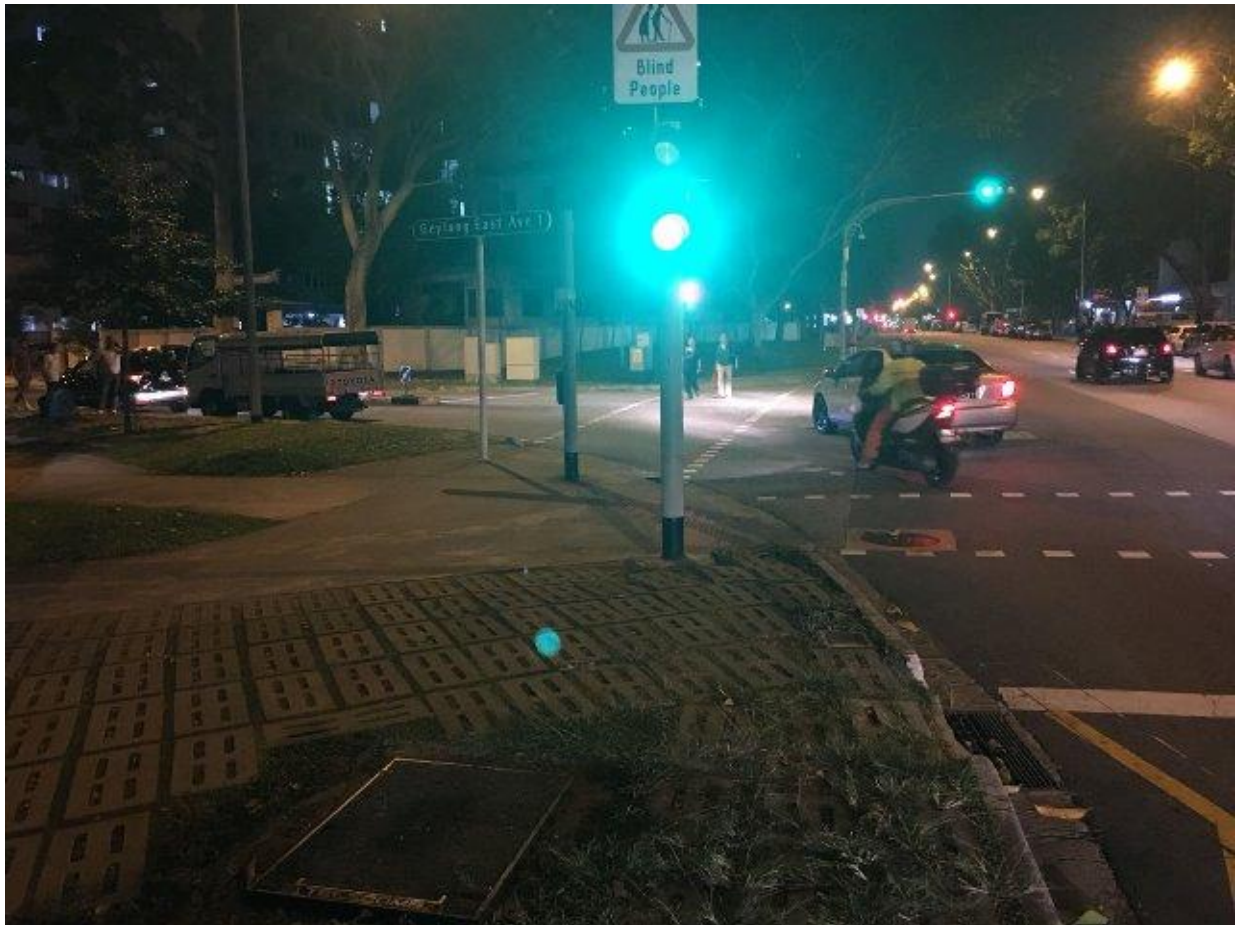
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Accident Photo



Accident Photo

