

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	04/05/2018 12:52
Date Of Accident	03/05/2018 19:00
Exact Location Of Accident	TPE TOWARDS PIE 1 KM
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GU1068E
Insured/Policyholder	
Name Of Registered Owner	EITA SERVICES PTE LTD
Co Reg No	-
Email Address	ROYTAN.EITA@GMAIL.COM
Mobile Phone No	(LOCAL) +65-83110142
Alternative Phone No	OFFICE-83110142

Vehicle Particulars

Manufacturer	NISSAN
Model	-
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	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	18-MB028445-R08
Cover Note Number	

Driver

Name of Driver	GANESAN SELVARAJ
Passport No/FIN	G6936709M
Date Of Birth	22/06/1988
Occupation	OUTDOOR
Date Of Driving Pass	22/01/2018
Driving Experience	0 YEAR AND 3 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-83110142
Fax Number	
Contact Number	OFFICE-83110142
E Mail Address	ROYTAN.EITA@GMAIL.COM

Address	EITA SERVICES PTE LTD
Postcode	
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 REAR
Weather Conditions	CLOUDY
Road Surface	WET

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)	1

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

PLS REFER TO THE POLICE REPORT : T/20180503/2192

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	VW5433
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

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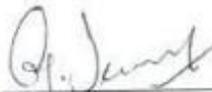
8. Consent under the Personal Data Protection Act (PDPA)

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' 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.

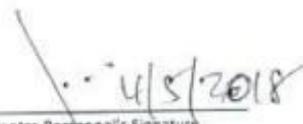

Policyholder's Signature

Date & Time:


Driver's Signature

(If driver is not the policyholder)

Date & Time:


Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

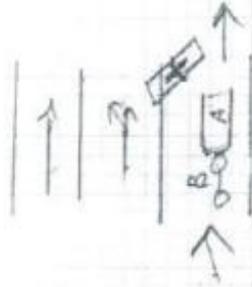

INAIR TECHNOLOGY PTE LTD
Block 28 Defu Lane 10 #01-144
Singapore 539200
Tel: 65 68411427 Fax: 65 68410438
E-mail: inair@singrat.com.sg


EITA SERVICES PTE LTD
53 UBI AVENUE 1, #03-22
PAYA UBI INDUSTRIAL PARK
SINGAPORE 408904 Fax: 65-6844 3481
TEL: 65-6844 3482 (2 LINES)
E-mail: sales@eita.com.sg

Sketch Plan #2

SKETCH PLAN

TPE Towards PIE 1km.



A - GU1068E
B - VW5433

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Handwritten text in the accident description box: "pls Refer to the Police Report - T/20180503/2192"

DECLARATION

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

~~Signature~~
Policyholder's Signature

Date & Time:

~~Signature~~
Driver's Signature
(If driver is not the policyholder)

Date & Time:

~~Signature~~ 4/5/2018

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

~~INAIR TECHNOLOGY PTE LTD~~

~~Block 28 D'Almeida Lane 10/01-104~~

~~Singapore 599609~~

~~Tel: 65 68411427 Fax: 65 68411038~~

~~E-mail: inair@singtel.com.sg~~

EITA SERVICES PTE LTD

53 UBI AVENUE 1, #03-22

PAYA UBI INDUSTRIAL PARK

SINGAPORE 408934 Fax: 65-6844 3481

TEL: 65-0844 3482 (3 LINES)

E-mail: sales@eita.com.sg

Sketch Plan #3



**SINGAPORE
POLICE FORCE**



T/20180503/2192

2 of 3

Report No. T/20180503/2192

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

CONTINUATION OF REPORT

Driver			
Name	GANESAN SELVARAJ		ID No. G6936709M
Related Vehicle	GU1068E (Lorry)		Contact No. 83110142
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 2B,3 Date of Expiry: 05/10/2022
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 03/05/2018 at about 1900hrs I was driving my vehicle GU1068E along TPE towards PIE. Suddenly an unknown car encroached into my path. I then applied my brakes to avoid a collision however I felt an impact from the rear. I then realized that my vehicle was rear ended by a Malaysian registered vehicle. The rider of the vehicle was injured and was conveyed to Changi General Hospital. I managed to take several photos of the accident before the rider conveyed. The traffic police officer then told me to lodge a traffic police report at the nearest police station.

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



T/20180503/2192

1 of 3

Report No. T/20180503/2192

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

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 03/05/2018 22:41	Vide Report No.: G/20180503/0168	Station Diary No.: 136
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Informant's Particulars			
Name of Informant: GANESAN SELVARAJ		Address:	
ID Type / ID No.: FIN NO / G6936709M		Contact No.: Home/Office:	Mobile: 83110142
Nationality: INDIAN		Email:	
Sex: Male	Age: 29	Date of Birth: 22/06/1988	Type of Informant: Driver
Race: Indian		Language:	Institution / School Name:
Occupation: Lorry driver		Driving Licence Information: Class:	Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 03/05/2018 19:00	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 TAMPINES EXPRESSWAY PAN ISLAND EXPRESSWAY TPE TOWARDS PIE 1KM				
Weather: Cloudy		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GU1068E	Lorry				Slightly Damaged	1
VW5433	Motorcycle				Slightly Damaged	1

Details of Person Involved	
Any Pedestrian Involved: No	Use of Pedestrian Crossing: NA
No. of Pedestrians Injured: NIL	

Police Report



**SINGAPORE
POLICE FORCE**



T/20180503/2192

2 of 3

Report No. T/20180503/2192

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

CONTINUATION OF REPORT

Driver		ID No.		G6936709M	
Name	GANESAN SELVARAJ			Contact No.	83110142
Related Vehicle	GU1068E (Lorry)			Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: 05/10/2022
Hospital/Clinic	NIL			Date Discharge	NIL
Date Treatment	NIL		Degree of Injury	NIL	
No. of Days granted Medical Leave	NIL				

Brief Details.

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Police Report



SINGAPORE
POLICE FORCE



T/20180503/2192

3 of 3

Report No. T/20180503/2192

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

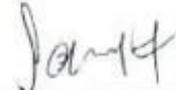
CONTINUATION OF REPORT

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 DZULRAIHAN BIN KAMALUDIN 
Signature Of Interpreter: Not applicable
Officer In Charge Of Case: TP / AEIT / Sgt 2 YEO KIA HUAT Contact No.: 65476325

Signature Of Informant: 
Date/Time: 03/05/2018 22:41
Classification Of Case:

Authentication Stamp
NP168

