MNA118064420 / National Assessment Centre Services - Ubi ENTRY DATE & TIME: 17/05/2018 15:26 SUBMITTED BY: Jackson Ho Zhao Tian

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 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. | is a sub-artiful to the sub-sub-sub-sub-sub-sub-sub-sub-sub-sub- |
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| | ACCIDENT STATEMENT |
| Date Of Report | 17/05/2018 15:26 |
| Date Of Accident | 30/03/2018 14:15 |
| Exact Location Of Accident | YISHUN INDUSTRIAL PARK A NEAR BLK 1019 |
| Country/State of Loss | SINGAPORE |
| D | DETAILS OF OWN VEHICLE |
| Vehicle Registration Number | YN5440K |
| Insured/Policyholder | |
| Name Of Registered Owner | LIQUORLAND DISTRIBUTION PTE LTD |
| Co Reg No | 200810278K |
| Email Address | NOEMAIL |
| Mobile Phone No | |
| Alternative Phone No | OFFICE-89999999 |
| Vehicle Particulars | |
| Manufacturer | MITSUBISHI |
| Model | CANTER FEB71ER4SDEC (CBU) |
| Exact Purpose for which vehicle was being used at time of accident | PRIVATE USE |
| 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 | NTUC INCOME INSURANCE CO-OPERATIVE LTD |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | 5090705066 |
| Cover Note Number | |
| Driver | |
| | |

Name of Driver SARAN RAJ S/O SELVARAJOO

NRIC No S9739429F

Date Of Birth 16/10/1997

Occupation OUTDOOR

Date Of Driving Pass 15/09/2016

Driving Experience 1 YEAR AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91469549

Fax Number

Contact Number OFFICE-91469549

EMail Address NOEMAIL

Address BLK 944 JURONG WEST STREET 91

#05-499

Postcode 640944

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 Registration Number of Driver's Own

-

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident NO COLLISION

Weather Conditions RAINING
Road Surface WET

Other Information

Was any foreign vehicle involved in this accident? NO Number of vehicles involved in the accident 2

Was any body injured in the Accident?
Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES

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

NO 1

NO

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name

JURONG WEST NEIGHBOURHOOD POLICE CENTRE

NO

Police Station Address ROAD: 700 CORPORATION ROAD, POSTCODE: 649818, COUNTRY:

SINGAPORE

Police Station Contact **TEL NO**: 1800-2689999 - **FAX NO**: 62672438

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT - T/20180414/2014.

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 GBB6325P

Vehicle Make/Model/Colour

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)

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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- 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 liability.
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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)

Lunderstand, 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

NA0120

Date & Time:

Driver's Signature

(if driver is not the policyholder)

Date & Time:

nel's Signature Reporting Centre Per

NRIC/FIN No.:

Accident Sketch Plan

| ETCH PLAN | | |
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| CLARATIONORG | 1 | |
| e declare the foregoing particula | irs are true in every respect. | N |
| The Second | /DL | |
| Element A | for the second | Kon |
| icyholder's Signature | Driver's Signature | Reporting Centre Personnel's Signature |
| e & Time: | (If driver is not the policyholder) | Name: |
| | Date & Time: | NRIC/FIN No.: |





Police Station Of Origin: Jurong West N.P.C 700 Corporation Road SINGAPORE 649818 Tel No: 1800-2689999 1 of 3 Report No. T/20180414/2014

| REPORT | F A TRAFFI | CACCIDENT | | |
|--------------------|--------------------------|------------------------------|--|----------------------------|
| | ne Report M 018 02:28 | Made: | Vide Report No.: | Station Diary No. 38 |
| Informa | nt's Partic | ulars | | |
| | Informant RAJ S/O S | ELVARAJOO | Address: APT BLK 944 JURONG WES SINGAPORE 640944 | T STREET 91 #05-499 |
| | / ID No.: 0 / S97394 | 29F | Contact No.: Home/Office: | Mobile; 91469549 |
| National SINGAP | ity: PORE CITIZ | EN | Email: | |
| Sex: Male | Age: 20 | Date of Birth: 16/10/1997 | Type of Informant: Driver | |
| Race: Indian | | | Language: | Institution / School Name: |
| Occupat | tion: | 2 | Driving Licence Information: Class: 3 | Date of Expiry: |

| Type of Accident: | Non-Injury Hit and Run | Drink Drive: No | Date/Time of Accident: 13/03/2018 14:18 | Type of Location Straight Road |
|--------------------------|---|-----------------------|---|-----------------------------------|
| 55 YISHUN I Weather: | I USTRIAL PARK A NDUSTRIAL PARK A | Road Surface: | 9 | Road Speed Limit: |
| Drizzling | | Dry Traffic Control: | 0.000.00 | Traffic Volume: |
| | | | the second section of the second section is | Heavy |
| Traffic Flow: Two Way | | Controlled by Oth | iers e.g. vvorkmen | Anyone conveyed by |

| Vehicle No. | The state of the s | Make | Model | Color | Condition | No of Passenger |
|--|--|------------|-------|-------|---------------------|-----------------|
| AND RESIDENCE OF THE PARTY OF T | The second second | CITROEN | | Red | Slightly Damaged | 0 |
| YN5440K | Lorry | MITSUBISHI | | White | 'No Damage | 0 |

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





Police Station Of Origin: Jurong West N.P.C 700 Corporation Road SING 2 of 3 Report No. T/20180414/2014

700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

CONTINUATION OF REPORT

| Driver | | | | | | |
|------------------|-------------------|----------|-----------|-----------------------------------|----------|---------------------------------|
| Name | SARAN RAJ S/O S | ELVARAJO | 00 | ID No | | S9739429F |
| Related Vehicle | YN5440K (Lorry) | | Conta | ict No. | 91469549 | |
| Hospital/Clinic | NIL | | | Class Drivin Licen Expir | g | Class: 3 Date of Expiry: NIL |
| Date Treatment | NIL | | Date Disc | charge | NIL | |
| No. of Days gran | ted Medical Leave | NIL | Degree o | finjury | NIL | |

Brief Details.

On 4/04/2018, a male Chinese subject came to my company and informed my boss that one of the driver from Celebration had collided against his vehicle in a hit and run accident. Subsequently, we established that I was the driver on that day.

The said male subject then informed me that he had a CCTV footage of a white lorry had driven past his vehicle and it had caused his vehicle to shake thus, he assumed that I had collided against his vehicle's left rear body panel. He had also seen my company's contact number which was on the side of my vehicle and had subsequently discovered the contact number belongs to Celebration.

I then agreed to compensate the driver and tried to liaised with him but I informed him that I would like to see the footage however, he refuses. He then insisted to know my vehicle license plate number but I did not provide him. He has also informed me that he had lodged a hit and run accident report.

On 13/03/2018 at 1415hrs, I was driving , a Mitsubishi lorry, YN5440K along 55 Yishun Industrial Park A. I did not feel any collision while driving along the road.

I do not have any dash camera.

I am lodging this report for my own record purpose to safeguard against any allegations that I did not want to compensate the driver and will not be compensating the said driver as of now.





Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999 CONTINUATION OF REPORT

3 of 3 Report No. T/20180414/2014

Sketch Plan

NP168

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.

| V | New Mer |
|--|--------------------------------|
| Signature Of Interpreter: Not applicable | Date/Time: 14/04/2018 02:28 |
| Officer In Charge Of Case: TP / HRT / SI ABDUL KAREEM BIN ABDUL HAGUE Contact No.: 65476079 | Classification Of Case: |

| NP 108 No : 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | AMI TEOTHEONIT | NDMENT Same: Same: Same: NRIC No: Lef No: Date: | Server Tologo Blanc June 3 Server June 3 Server June 3 Server June 3 Server June 3 Server June 3 |) 5-(1-2) 20-51 |
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| Dear Sir Madam | d as follows: | | The same and the | |
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| Yours faithfully Neighbourhood Po No 3 Queenwa Singapore 14 | wp | | | |

























