

MSME1805053 / SME Motor Pte Ltd - Kaki Bukit
 ENTRY DATE & TIME: 08/05/2018 16:18
 SUBMITTED BY: Chia Pei Ying

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 08/05/2018 16:18
 Date Of Accident 07/05/2018 12:15
 Exact Location Of Accident TRAFFIC JUNCTION OF KALLANG BAHRU
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBB5998D
Insured/Policyholder
 Name Of Registered Owner NEW MULTI FOODSTUFF
 Co Reg No 53009771X
 Email Address NOEMAIL
 Mobile Phone No
 Alternative Phone No OFFICE-62522768

Vehicle Particulars

Manufacturer MITSUBISHI
 Model FUSO
 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 THIRD PARTY
 Vehicle Category COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company SOMPO INSURANCE SINGAPORE PTE. LTD.
 Type Of Coverage COMPREHENSIVE
 Fleet Policy NO
 Policy Number D17MTPCVE002919
 Cover Note Number

Driver

Name of Driver KALIRAJAN KALEESWARAN ALAIS VIGNESHWARAN
 NRIC No G3070775W
 Date Of Birth 27/12/1988
 Occupation INDOOR
 Date Of Driving Pass 11/06/2015
 Driving Experience 2 YEARS AND 10 MONTHS
 Gender MALE
 Mobile Number (LOCAL) +65-90844410
 Fax Number
 Contact Number

08/05 2018 TUE 16:45 FAX

002/005

Address 6 CHIN BEE AVE #07-07
Postcode 619930
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 -
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? 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? NO
If Yes, Please state which Police Station
Was notice of intended Prosecution given? NO
If Yes, against whom?

Circumstances of Accident

ON 07/05/2018 AT ABOUT 12.15PM, DUE TO RED LIGHT, MY LORRY (G8B5998D) WAS STATIONARY BEHIND THE VAN (GV8686U) AT THE TRAFFIC LIGHT JUNCTION OF KALLANG BAHRU. OUT OF SUDDEN, (GV8686U) HAD REVERSED HIS VAN TOWARDS MY LORRY FRONT PORTION. IMMEDIATE WITHOUT DELAY, I HORNED AT HIM CONTINUOUSLY TO STOP HIM FROM REVERSING. BUT HIS VAN RIGHT PORTION HAD HIT AGAINST MY LORRY FRONT LEFT WHEN HE HAD NOTICED MY SIGNAL HORN AND MY LORRY.

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 GV8686U
Vehicle Make/Model/Colour
Details Of Properties VEHICLE B
Vehicle Category COMMERCIAL VEHICLE
Name of Driver MATTHEW POH
NRIC/Passport Number
Contact Number 88666766
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Sketch Plan Pg. 1

SKETCH PLAN

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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:

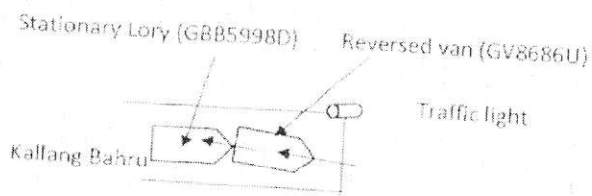
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

LUIS BROTHIER

Sketch Plan #2 Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 07/05/2018 at about 12:15 hours, due to "Red" light, my lorry GBB5998D was stationary behind the van GV8686U at the traffic Junction of Kallang Bahru.

At the sudden, GV8686U had reversed his van towards my lorry front portion. Immediate without delay, I had horned at him continuously, to stop him for reversing. But his van right portion had hit against my lorry front left when he had noticed my signal horn and my lorry.

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 #3 Pg. 1

TO GBB5998D

I reverse and hit your
front of your vehicle.

My vehicle number is
EV8886U.

Do contact me for any
minor cost involved

. Sorry

Matthew Ash
S7100783I

88666766

Al

7/5/18
12:10PM

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:	Business
Owner ID:	9771X

Vehicle Details

Vehicle No.:	GBB5998D
Vehicle to be Exported:	Yes
Intended De-registration Date:	08 May 2018
Vehicle Make:	MITSUBISHI
Vehicle Model:	FB70BB1SRDEA
Primary Colour:	White
Manufacturing Year:	2007
Engine No.:	4M42A50990
Chassis No.:	FB70BBA10331
Maximum Power Output:	-
Open Market Value:	\$21,808.00
Original Registration Date:	17 Dec 2007
First Registration Date:	17 Dec 2007
Transfer Count:	2
Actual ARF Paid:	\$0.00

Intended PARF Rebate Details

PARF Eligibility:	No
PARF Eligibility Expiry Date:	-
PARF Rebate Amount:	\$0.00

Intended COE Rebate Details

COE Expiry Date:	30 Sep 2022
COE Category:	C - Goods Vehicle & Bus
COE Period(Years):	5
PQP Paid:	\$20,268.00
COE Rebate Amount:	\$17,813.00
Total Rebate Amount:	\$17,813.00

Message

Please note that all future COE renewals for this vehicle can only be for a 5-year period, subject to the statutory lifespan (if applicable) of the vehicle.

The information contained herein is correct as at 08 May 2018

OK