

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	16/05/2018 09:46
Date Of Accident	15/05/2018 09:30
Exact Location Of Accident	ADMIRALTY RD WEST (NEAR TO SEMBAWANG SHIPYARD)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YN5714X
Insured/Policyholder	
Name Of Registered Owner	SOON YONG TRADING PTE LTD
Co Reg No	198801857Z
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-63823935

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	CANTER-3.0 D FEB21ER4SDEB (CBU) (M)
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN1744971700
Cover Note Number	

Driver

Name of Driver	BALASUBRAMANIAN RAMESH
Passport No/FIN	G7648307N
Date Of Birth	02/04/1984
Occupation	OUTDOOR
Date Of Driving Pass	24/03/2009
Driving Experience	9 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-98256400
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	APT BLK 466D SEMBAWANG DRIVE #05-353 SPRING LODGE
Postcode	754466
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	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?	YES
If Yes, Please state which Police Station	
Police Station Name	ROCHOR N.P.C. 11 KAMPONG KAPOR ROAD, SINGAPORE 208678
Police Station Address	ROAD: 11 KAMPONG KAPOR ROAD , POSTCODE: 208678 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN.

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	21797MID
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	GOVERNMENT
Name of Driver	BERNARD CHUNG WEI HAO
NRIC/Passport Number	S9350445C
Contact Number	
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:

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

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

DRIVER'S NRIC AND DRIVING LICENCE Pg. 1

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

Employer
SOON YONG TRADING PTE LTD

Sector: **CONSTRUCTION**

Name
BALASUBRAMANIAN RAMESH

Occupation
ASSISTANT SUPERVISOR

S Pass No.
O 33122063

Date of Application
31-08-2016

Date of Issue
15-09-2016

Date of Expiry
24-09-2018

L7203175

REPUBLIC OF SINGAPORE DRIVING LICENCE

Identification Number **G7648307N**

Name
BALASUBRAMANIAN RAMESH

Birth Date **20 Apr 1984**

Issue Date **02 Oct 2014**

Valid Till **01 Oct 2019**

002351914C

VISIT PASS
Immigration Regulations

Name
BALASUBRAMANIAN RAMESH

Date of Birth **20-04-1984** Sex **M** Nationality **INDIAN**

FIN **G7648307N** Date of Issue **15-09-2016** Date of Expiry **24-09-2018**

MULTIPLE JOURNEY VISA ISSUED

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 CLASS(ES)

EFFECTIVE DATE

Class 3 Motor Cars < 3000kg with < 7 passengers, exclusive of the driver; and other motor vehicles < 2500kg **24 Mar 2009**

NP 428A

Licence No: G7648307N

CERTIFICATE OF INSURANCE Pg. 1



中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Co. Reg. No. 200208384E

MZ300/C

N SN

AN0196A

Cov.Type: C

PLM 281949

MOTOR COMMERCIAL VEHICLE

CERTIFICATE OF INSURANCE
Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

ORIGINAL

CERTIFICATE No.

DMCVSN1744971700

Engine No :4P10B20034

ChasNo:FEB212A00507

1. Index Mark and Registration
Number of Vehicle

YN5714X

AutoSafe

2. Name of Policy Holder

M/S SOON YONG TRADING PTE LTD

3. Effective date of the Commencement of
Insurance for the purposes of the Regulations,
Ordinance or Enactment

22 July 2017

Excess Sect I S\$550.00

EX ON WINDSCREEN S\$100.00

4. Date of Expiry of Insurance

21 July 2018

5. Persons or Classes of Persons entitled to drive*

Any person who is driving on the Policyholder's order or with their permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to use:

(1) Use in connection with the Policyholder's business.

(2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.

(3) Use for social, domestic or pleasure purposes.

The Policy does not cover.

(1) Use for hire or reward or racing, pace-making, reliability trial or speed testing.

(2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Malaysia), are not to be included under these headings.

I/We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By:

Authorised Officer

Authorised Signatory

POLICE REPORT Pg. 1



**SINGAPORE
POLICE FORCE**



T/20180515/2106

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

1 of 3

Report No. T/20180515/2106

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 15/05/2018 15:44		Vide Report No.: F/20180515/0089		Station Diary No.: 129
Informant's Particulars				
Name of Informant: BALASUBRAMANIAN RAMESH		Address: APT BLK 466D SEMBAWANG DRIVE #05-353 SPRING LODGE SINGAPORE 754466		
ID Type / ID No.: FIN NO / G7648307N		Contact No.: Home/Office: Mobile: 98256400		
Nationality: INDIAN		Email:		
Sex: Male	Age: 34	Date of Birth: 20/04/1984	Type of Informant: Driver	
Race: Indian		Language: English	Institution / School Name:	
Occupation: Lorry driver		Driving Licence Information: Class: 3		Date of Expiry: 01/10/2019

General Information of the Accident				
Type of Accident:	Non-Injury Government Vehicle	Drink Drive: No	Date/Time of Accident: 15/05/2018 00:00	Type of Location: Straight Road
Location: Along Road 1 ADMIRALTY ROAD WEST				
Near to Sembawang Shipyard, lamp post 249				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
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
21797MID	Truck				Slightly Damaged	0
YN5714X	Lorry				Slightly Damaged	0

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

POLICE REPORT Pg. 1



**SINGAPORE
POLICE FORCE**



T/20180515/2106

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Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

Report No. T/20180515/2106

CONTINUATION OF REPORT

Driver Name		BALASUBRAMANIAN RAMESH		ID No.	G7648307N
Related Vehicle		YN5714X (Lorry)		Contact No.	98256400
Hospital/Clinic		NIL		Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: 01/10/2019
Date Treatment		NIL		Date Discharge	NIL
No. of Days granted Medical Leave		NIL		Degree of Injury	NIL
Driver Name		BERNARD CHUNG WEI HAO		ID No.	S9350445C
Related Vehicle		NIL		Contact No.	NIL
Hospital/Clinic		NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment		NIL		Date Discharge	NIL
No. of Days granted Medical Leave		NIL		Degree of Injury	NIL

Brief Details.

On the above mentioned date, time and location, while driving along Admiralty Road West, I noticed that there were 2 army trucks moving slowly along the 1st lane from the left. I then decided to overtake the trucks after giving my signal. After overtaking the trucks, I went back to the left lane. While I was travelling in that lane, I felt my lorry being hit from the back very hard. As a result, my lorry lurched forward and mounted the kerb, and hit the lamp post. I came down from my lorry and noticed that the army truck driver had already stopped his truck at the side of the road. He did not say anything to me and a member of public assisted to call the Police. When the Traffic Police arrived at scene, I gave my particulars to the officer. I was then advised to lodge a Police report. Nobody was injured in the accident.

As a result of the accident, the rear right side panel of my lorry is damaged, and the front bumper was also badly dented. The army truck left front side was also damaged as a result of the accident. That is all.

POLICE REPORT Pg. 1



SINGAPORE
POLICE FORCE



T/20180515/2106

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11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

3 of 3

Report No. T/20180515/2106

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: A / Sgt 2 SAADIAH BTE HAMZAH	Signature Of Informant: B. Ramesh.
Signature Of Interpreter: Not applicable	Date/Time: 15/05/2018 15:44
Officer In Charge Of Case: TP / GIA / Staff Sgt TANG SIEW PING Contact No.: 65476430	Classification Of Case:

Authentication Stamp
NP168

Singapore Police Force