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Veh No: yp 20360	E-mail (within Shrs, AIC 2hrs)			
D.O.A: 13/6/18-17:10	i-Motor Claim Form	MT/099 8747-001	14/6/18	20:53
OD TP) Reporting Only	i-Motor W/O (Within: OD 2h	rs, TP 4brs)		
OD 11 Reporting Only	i-Photo Uploaded			4
TP Insurer:	Assessment/Survey Report	34100011-23880		
Transurer.	Ass't Report by Fax / Hand	to Owner/Wksp		
Preferred Wksp / INC Assign Wksp / QW: (		Tel: F	ax:	)
TP Particulars: Veh No: 6	v9042 . INC(	)/Non-INC( )	Q.	
Owner / Driver: (		Tel:	)	
Policy No: (	Period: ( )	Cover Type: (	) _	
Confirmed by : (	Date:	Time:	)	
Insured/Driver Liability: ( %	) [Note-Est. Status (WO): N: 0-2	20%; P: 21-79%. F: 30-1	00%]	
Year of Registration: ( )		)		
	51,000 ( )/\$2,000 ( )		<del></del>	
General Remarks:-			1.00 B	1.
( ) Walk-In Customer : Customer's i	information strictly Confidential & S	trictly NO refer of repairer.		
( ) Total Loss Case : to e-mail Ins	surer URGENTLY.			
Drive-In ( )/ Towed-In ( ); Invo	oice: YES ( ) / NO ( );	Fowing Co: (		)
Remarks:- (INC hotline: 6788 6616		Date&Time Completed	Done	by
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### SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
   Information provided must be as truthful and accurate 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

	ACCIDENT STATEMENT
Date Of Report	14/06/2018 12:02
Date Of Accident	13/06/2018 17:10
Exact Location Of Accident	ALONG AMK AVE 6 OPP YIO CHU KANG MRT STATION
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	YP2036D
Insured/Policyholder	
Name Of Registered Owner	SWEE BUILDERS PTE LTD
Co Reg No	199801449R
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-65470091
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	CANTER 3.0 DIESEL MANUAL
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5099182381
Cover Note Number	
Driver	

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Name of Driver	NAGARAJAN KASIVISWANATHAN
Passport No/FIN	F8225675W
Date Of Birth	08/07/1976
Occupation	OUTDOOR
Date Of Driving Pass	02/06/2015
Driving Experience	3 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90258072

Fax Number

OFFICE-90258072 Contact Number

EMail Address NOEMAIL Address

19A TANNERY ROAD

Postcode

347731

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

WET

### Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles involved in the accident

2

NO

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

ambulance?

YES

Was any other material or property damaged? I have been approached by unknown person(s)

NO

soliciting/offering accident claims assistance. Number of Passengers (Including Driver)

10

Passenger 1

NAME:

GENDER:

: MALE

Passenger 2

NAME:

NAME:

.

Passenger 3

GENDER: : MALE

GENDER:

: MALE

Passenger 4

NAME:

GENDER:

: MALE

Passenger 5

NAME: GENDER:

: MALE

Passenger 6

NAME:

GENDER:

: MALE

Passenger 7

NAME:

2812

GENDER: : MALE

Passenger 8

NAME:

. -

GENDER:

: MALE

Passenger 9

NAME:

GENDER:

: MALE

# **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 STATED DATE AND TIME MY VEHICLE WAS STATIONARY ALONG LANE 2 AMK AVE 6 AS IT WAS RED LIGHT. SUDDENLY VEHICLE B HIT ONTO MY VEHICLE REAR PORTION.

### 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

GU904Z

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

COMMERCIAL VEHICLE

Name of Driver

MOHAMAD SHEFRI BIN ABU OSMAN

NRIC/Passport Number

S8219666H

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

1

### SKETCH PLAN

#### IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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:
  - 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 Signatu Name:

NRIC/FIN No.:

Shafweeby ilders com su

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

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DECLARATIOND

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

Policyholder's Signature Date & Time: N. Kasim stromathom Driver's Signature (If driver is not the policyholder) Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No .:



#### S PASS

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

Employer SWEE BUILDERS PTE LTD

Sector: CONSTRUCTION



NAGARAJAN KASIVISWANATHAN

SITE SUPERVISOR

0 31877970

20-10-2017

Oate of Issue 24-11-2017 02-12-2018



### VISIT PASS Immigration Regulations

NAGARAJAN KASIVISWANATHAN



08-07-1976 M

F8225675W 24-11-2017

02-12-2018

INDIAN

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.





Class 2B Class 3

MOTORCYCLES NOT EXCEEDING 286 CC MOTOR CARS AND MOTOR TRACTORS THE WERGH OF WHICH UNLADEN HOPS NOT EXCESS 2806 KILOGRAMS HEAVY MOTOR CARS AND SIGTOR TRACTORS THE WEGGS OF WHICH UNLADEN EXCEED 2860 KILOGRAMS

S / No. 9000174897

NP 428A

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						Search				
	Select	Policy No.	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
	0	5099182381	SWEE BUILDERS PTE LTD	199801449R	GCV	Comprehensive	YP2036D	YP2036D	13/04/2018	12/04/2019
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Page 1 of 1



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	Walter Street			10000000						
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amed driver Name	NAGARAJAN KASIVISI	WANATHA	Driver NRIC	FB225675V	W		Driver DOB		08/07/15	176
ster Date of Driver License	02/06/2015		Driver Age	41		9	Driving Experience		3	
tact No.(Mobile)	90258072		Contact No.(Office)	0		9	Contact No.(Home)		0	
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