

## 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	10/07/2018 14:35
Date Of Accident	14/06/2018 13:50
Exact Location Of Accident	10 DUNLOOP ST
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBE6392D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ADAPATIVE TECH ENGINEERING PTE LTD
Co Reg No	201510681Z
Email Address	ADAPTIVEKUMAR@YAHOO.COM
Mobile Phone No	
Alternative Phone No	Office-96141708

### Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA-3.0 D (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	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1800009975
Cover Note Number	

### Driver

Name of Driver	SELVARANGAM VASUDEVAN
Passport No/FIN	G7731620K
Date Of Birth	15/05/1979
Occupation	OUTDOOR
Date Of Driving Pass	02/02/2015
Driving Experience	3 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96141708

Fax Number	
Contact Number	
EMail Address	NOEMAIL
Address	105 DUNLOOP ST
Postcode	209424
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?	
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

REFER TO REPORT ATTACHED

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

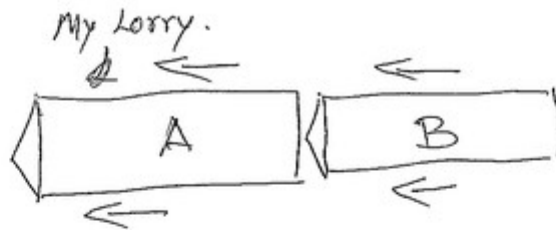
#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLR8286C
Vehicle Make/Model/Colour	TOYOTA /SALOON
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

## Sketch Plan



A - GBE 6392 D  
B - SR 886 C.

Dear Sir

① Selvarangam Vasudevan 14/06/18 That day  
Afternoon 2pm Some buy things So I park my lorry (GBE 6392 D).  
I go buy my things thing 1 by ready I move my lorry just go back  
after I go back. In front, after I see my said mirror I see  
one person stand he hand, again I park my lorry after I go  
meet the person he say you touch my lorry, I ask when he  
show me one point, OK. we do forgive how much, you need  
money, he say \$200 I say OK after he No call me, he  
send me SMS \$200 I need. I say OK but he No call me  
one few days after my office call me someone & complain  
for you so you go to complain. That's why I come to combine

S. Vasudevan  
Selvarangam Vasudevan

#### 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.:

14/7/18

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.:






10/7/18


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

Employer:  
**ADAPTIVE TECH ENGINEERING PTE. LTD.**

Name:  
**SELVARANGAM VASUDEVAN**

Work Permit No.: **0 33281757** Sector: **CONSTRUCTION**

 **K0439987**

**REPUBLIC OF SINGAPORE DRIVING LICENCE**

Licence Number: **G7731620K**

Name:  
**SELVARANGAM VASUDEVAN**

Birth Date: **15 May 1979**  
Issue Date: **02 Feb 2015**  
Valid Till: **01 Feb 2020**

 **002392126J**



**VISIT PASS**  
Immigration Regulations

Name:  
**SELVARANGAM VASUDEVAN**

FIN:  
**G7731620K**

Date of Birth: **15-05-1979** Sex: **M**

Nationality:  
**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.**



Download SGWorkPass App to check status

21-05-2018

**YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)**

	EFFECTIVE DATE
Class 2B Motorcycles =< 200 cc	02 Feb 2015
Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg	02 Feb 2015

NP 428A





Auto  
Consultants  
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Our Ref: CC6/AIG18011226/Aea3

26<sup>th</sup> June 2018

**Adaptive Tech Engineering Pte Ltd**  
105 Dunlop Street  
Singapore 209424

Dear Sirs,

**ACCIDENT INVOLVING GBE 6392D AND SLR 8286C ON 14/06/2018 ALONG /  
AT 10 DUNLOP STREET**

We, LKK Auto Consultants Pte Ltd has been appointed to act on the behalf of your insurer, AIG Asia Pacific Insurance Pte Ltd (AIG) to settle a THIRD PARTY claim against you for an accident which happened on the above-mentioned date and location.

Kindly proceed to lodge your GIA report within five (05) working days of receipt of this letter, giving the version of the accident amongst other things related to the accident. The GIA report can be lodged at any of AIG reporting centres. You may refer to your Certificate of Insurance for the list of the reporting centres.

If you have any information to add or any amendments to make, please contact the undersigned within five days from the date of this letter.

Please note that the standing of your insurance policy such as NCD, premium & etc would be affected.

Yours faithfully,

Asher Sng  
Claims  
Tel : 6841 6051  
Fax: 6741 4108  
Email : AsherSng@lkkauto.com

c.c. *Claims Manager*  
*AIG Asia Pacific Insurance Pte Ltd*  
*(Motor Claims Dept)*





COMMERCIAL AUTOPLUS COMMERCIAL VEHICLE

Name of Policyholder : Adapative Tech engineering pte ltd  
 Period of Insurance : 03 Feb 2018 To 02 Feb 2019  
 Engine No. : 1KD2563556  
 Chassis No. : KDY2318022069

Vehicle No. : GBE6392D  
Policy No. : 1800009975  
Endorsement No. :  
Issued Date : 29 Jan 2018

## ABOUT THE COVER

Make/Model	TOYOTA DYNA 3.0 M
Engine Capacity/Tonnage	1.9 Tonnage
Driver Restriction	NA

Sum Insured : Market Value  
Off Peak Car No

First Year of Registration	2016
Insuring with COE/PARF	Yes

## Person or Classes of Persons Entitled to Drive\*

Person or Classes of Persons Entitled to Drive

\* Subject to the condition of sale of the DPU and to the Driver Inexperienced Driver Express ("DIRE") if you are a New Authorized Driver (named or unnamed) is under the age of 25 years on the date of purchase of the DPU.

Age Condition	All Age Condition
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Limitation as to use<sup>a</sup>

Limitation as to use

1. The following conditions shall be subject to Section 2 of the State Welfare, Third Party Rules and Compensation Act (2010) and Section 95 of the Road Transport Act, 1950 (Madras) and 1930 (Central):

**EXPRESS**

Section 1  
 Case - 50, Court Damage - \$600, Theft - 50

Section 2  
Branch: Drydock - \$0

 $\text{stdscreen} = 2.00$ 

Named Driver and Excess (where applicable)

APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

APPROVED REPORTING CENTRES AUTHORIZED BY THE VEHICLE REGISTRATION AUTHORITY OF SINGAPORE

### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan THIAM HENG MOTOR

I hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risk) and Compensation Act 1967 (Malaysia) and the Road Transport Act, 1967 (Malaysia) and Motor Vehicles (Third Party Risk) Rules, 1958 (Malaysia).

ရက်စွဲ: ၂၀၁၈ ခုနှစ်၊ ဇူလိုင်လ ၁၀ ရက်

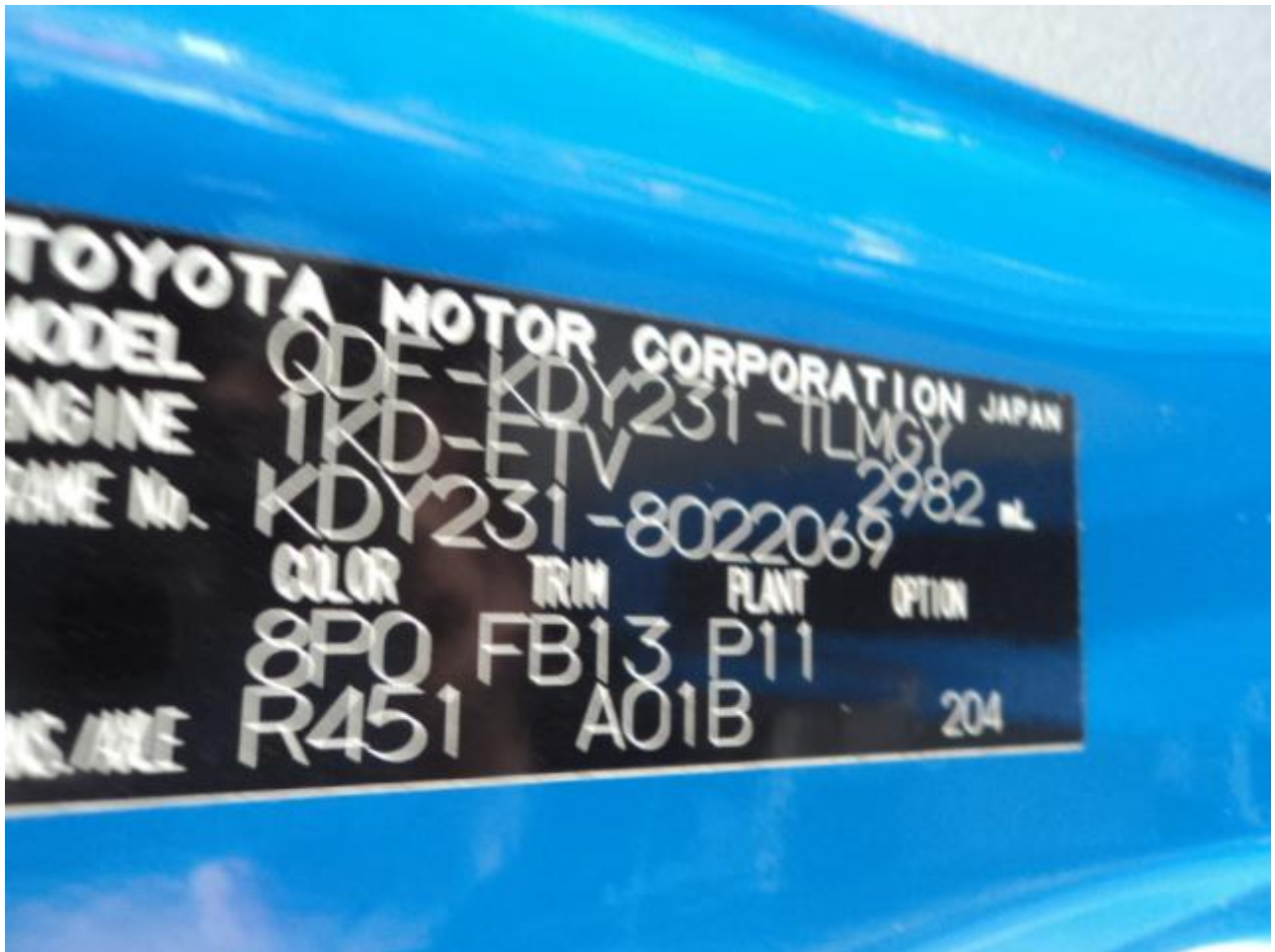
LEE EWE CHON  
38 COLDHILL AVE #02-44  
SINGAPORE 309021

SINGAPORE 309021  
Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.  
AUTHORISED REPRESENTATIVE

*Journal of Interpersonal Violence* 28(10) 2013-2016

Accident Photo



Accident Photo



Accident Photo





Accident Photo

