

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	11/08/2018 15:24
Date Of Accident	21/07/2018 16:30
Exact Location Of Accident	SHEARER AVENUE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	WC6539K
Insured/Policyholder	
Name Of Registered Owner	SAAY ENGINEERING PTE LTD
Co Reg No	201607121K
Email Address	SAAYENGINEERING@GMAIL.COM
Mobile Phone No	
Alternative Phone No	OFFICE-96786657

Vehicle Particulars

Manufacturer	ISUZU
Model	CYH52S
Exact Purpose for which vehicle was being used at time of accident	WORK
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN1759801700
Cover Note Number	

Driver

Name of Driver	THAMILARASAN VIJAYAGANESH
Passport No/FIN	G8131181T
Date Of Birth	30/07/1988
Occupation	OUTDOOR
Date Of Driving Pass	10/12/2013
Driving Experience	4 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82777590
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	672 CHANDER ROAD GHOLIA'S VILLAGE
Postcode	219557
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - SUB-COMPANY WORKER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	NO COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

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?	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 21/07/2018 AT ABOUT 1630HRS, I WAS NOT AWARE THAT ANYTHING HAPPENED ALONG SHEARER AVENUE. UNTIL THE INSURANCE CIMPANY SEND A LETTER SAYING I WAS INVOLVED IN THE ACCIDENT. HEREBY I AGAIN CINFIRMED I WAS NOT INVOLVED IN THE ACCIDENT AT THAT DATE AND TIME.

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	SGG9981P
Vehicle Make/Model/Colour	
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)	

Accident Sketch Plan

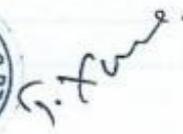
SKETCH PLAN

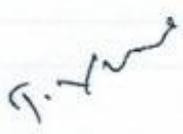
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8. **Consent under the Personal Data Protection Act (PDPA)**

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: 11/8/18


 Driver's Signature
 (If driver is not the policyholder)
 Date & Time: 10/8/18


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


Authorisation Letter



SAAY ENGINEERING PTE. LTD.

BLK 570, CHOA CHU KANG STREET 52
#09-236, LIMBANG GREEN, SINGAPORE - 680 570
Tel: 9678 6657 / Email: saayengineering@gmail.com

This is to certify that below mentioned driver has been taken as supply from SWASTIK ENGINEERING PTE LTD and he is working for SAAY ENGINEERING PTE LTD.

This is to authorize that below mentioned driver from SAAY ENGINEERING PTE LTD.

Driver details and truck details as follows.

Driver Name: THAMILARASAN VIJAYAGANESH

FIN No: G8131181T

Truck No: WC6539K

Drum No: 738

Sincerely,



SAAY ENGINEERING PTE LTD

570, Choa Chu Kang Street 52

09-236, Limbang Green

Singapore - 680570

Identification Card

REPUBLIC OF SINGAPORE **DRIVING LICENCE**



Licence Number: **G 8 1 3 1 1 8 1 T**
Name: **THAMILARASAN VIJAYAGANESH**

Birth Date: **30 Jul 1988**
Issue Date: **10 Dec 2013**
Valid Till **09 Dec 2018**

002254353E



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



Employer
SWASTIK ENGINEERING PTE. LTD.



Name
THAMILARASAN VIJAYAGANESH

Work Permit No. **0 34030472** Sector: **CONSTRUCTION**

0 34030472



K0326798

Driving Licence

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

		EFFECTIVE DATE
Class 2B	Motorcycles =< 200 CC	10 Dec 2013
Class 3	Motor cars =< 3000 kg with =< 7 passengers, exclusive of the driver; and motor tractors/vehicles =< 2500 kg	10 Dec 2013
Class 4	Heavy motor cars and motor tractors > 2500 kg	22 Dec 2016

G8131181T

S / No. 9000255092

Licence No. G8131181T

NP 428A

VISIT PASS 30-04-20

Immigration Regulations

Name
THAMILARASAN VIJAYAGANESH

Download SGWorkPass App to check status

FIN
G8131181T

Date of Birth Sex
30-07-1988 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.



Accident Photo

CHASSIS NO : JALCYH52 SD7000364
U/W : 13580 KG
M/L/W : 34000KG
PASS CAP : 02
TYRE SIZE : F 295-80R22-5(S)x2
: R 295-80R22-5(D)x2

Accident Photo



Driving License



Driving License



Accident Photo



Accident Photo



Accident Photo



Accident Photo

