

RESTRICTED

Serial No. WY 18/19 AF 002Date: 31 May 18

To: LKK Auto Pie Ltd  
 Paya Ubi Industrial Park  
 #01-25, Ubi Ave 1  
 S408933

Instrument of Demand to engage the services of an Insurance Claims Adjuster  
 (Period Contract No: CA32201 Vote Chargeable: GA 000019)

Unit	Date of Accident	Mindef Vehicle No.	Civilian Vehicle No.	Remarks
HQADOC	<u>24 May 2018</u>	<u>MID46307</u> (Mini Bus)	<u>SHB 7687S</u> (TAXI)	Along Depot Road towards CMPB.

Requesting Officer:

*WV*

(Signature)



Unit Stamp

Rank/Name: 2WO Sivakumar S/O Munisamy  
 Appointment: SA(TPT)/MSB/HQ SUPPLY

RESTRICTED

# SINGAPORE ARMED FORCES

## STATEMENT OF DRIVER / WITNESS

STATEMENT OF	CPL BRYAN LOR				ALIASES			
NRIC NO.	S9538138C	AGE	23	MALE/FEMALE		Male		
EMPLOYMENT	NSF	DRIVING LICENSE NO.	SAF/TPT/N/00441/17		NATIONALITY		Singaporean	
DIALECT	Hokkien	LANGUAGE SPOKEN	English		TEL NO		81893740	
ADDRESS	Blk 77A, Red Hill Road #23-20 S(151077)							
INTERPRETED BY		RANK		TIME		DATE		SIGN
RECORDED BY		RANK		TIME		DATE		SIGN
<p>On 24/05/2018 at about 1016 hrs, along Depot Road towards CMPB, I was driving SAF vehicle, 46307MID along the right lane of the two lane road. I then observe that there is a lorry parking at the side of the road, at some distance in front of me. There was a taxi, SHB7687S which had stop behind the lorry. The taxi did not signal its intention to filter to the right lane. After which the taxi started to inch out, towards the right lane. I then slow down to give way to the taxi.</p> <p>After which clearing the lorry, the taxi travel down a bit and suddenly stop at the uncontrolled traffic junction, in front of me. As the taxi did not signal it's intention, I was unable to stop in time to avoid colliding on to the rear of the taxi.</p> <p>After the accident, I alight from the SAF van and check on the taxi driver. At the point of time, no one had complaint of any pain or injuries. I then exchange particulars and contact number with the taxi driver. I also informed my superior about the accident. I was then directed by my superior to proceed, to lodge a traffic accident report. The damage to the taxi is a dent on the rear bumper and some scratch marks while the SAF van's front right light crack.</p>								
DATE	240518		SIGNATURE OF DRIVER / <del>WITNESS</del>		Bryan			

SAF 1201/91


All statements and further statements are to be timed and dated. Witness will be re-warned immediately prior to the recording of further statements. Statements and further statements will be signed by the Recording Officer and Interpreter.

Statements of witness must be signed by the Witness.



# SINGAPORE ARMED FORCES

## STATEMENT OF DRIVER / WITNESS

STATEMENT OF	CPL Toh Jun Jie			ALIASES	Jade		
NRIC NO.	S9612942D	AGE	22	MALE/FEMALE	Male		
EMPLOYMENT	NSF	DRIVING LICENSE NO.	S9612942D	NATIONALITY	Singaporean		
DIALECT	Hokkien	LANGUAGE SPOKEN	English, Chinese	TEL NO	92397978		
ADDRESS	443D Bukit Batok West Avenue 8 #07-785 Singapore 654443						
INTERPRETED BY		RANK		TIME		DATE	SIGN
RECORDED BY		RANK		TIME		DATE	SIGN
<p>On 24/05/2018 at about 1016 hrs, along Depot Road towards CMPB, our minibus rear-ended a taxi at a uncontrolled Junction. We were travelling at speed of approximately 30-40km/h. We were at the right lane as there was a stationary Lorry at the left lane at about 150m after the traffic light. Behind the lorry was a taxi about 1m apart, inching out to the Right towards our lane trying to overtake the stationary lorry. As the taxi did not signal right, driver Bryan slow down to Allow the taxi to come into our lane. After coming to our lane, the taxi travel forward for a few meter, passing the start of the lane divider curb, and when almost at the end of the space for vehicle to do a right turn, the taxi suddenly hit on brake and turn towards the right, inching out to the opposite direction lane bringing the car to a sudden stop and Again, did not signal its intention to turn. We at all times starting from us spotting the taxi behind the lorry to the point it Stop, did not see the Taxi braking at all (no brake light seen). Because of that, we assume that after the taxi turn into our lane, it will travel Forward as it was almost at the end of the turning space, I assume that the safety distance was Sufficient. But with that sudden stop in attempt to make a late right/U turn, me and driver Bryan couldn't react in time, he immediately jam brake But the minibus couldn't stop in time and hit the left rear bumper of the taxi. The taxi sustained Minor paint scratches While our minibus right headlight glass cover came off due to the impact. No passenger was the Onboard the taxi except Taxi driver. One HRMC dispatch clerk were onboard the minibus MID 46307 along with me as Vehicle Commander And Driver CPL Bryan Lor. No one from both vehicles sustain any form of injury.</p>							
DATE	24/05/18		SIGNATURE OF DRIVER / WITNESS				

SAF 1201/91

All statements and further statements are to be timed and dated. Witness will be re-warned immediately prior to the recording of further statements. Statements and further statements will be signed by the Recording Officer and Interpreter.

Statements of witness must be signed by the Witness.

# SINGAPORE ARMED FORCES TRAFFIC ACCIDENT REPORT

## Instructions to driver:

- (1) This form is to be completed for all traffic accidents (both internal & external) involving MINDEF vehicles.
- (2) Arrange for the relevant columns to be carefully and fully completed as possible at the scene of the accident.
- (3) Refrain from doing or saying anything which could be interpreted as an admission of liability.
- (4) Report the accident in person (where applicable) to the nearest Police Station within 24 hours of its occurrence.
- (5) Submit the completed report together with the accompanying signed and witnessed prepared by yourself and service witnesses (if any) to the OC of your unit for transmission to the appropriate authorities.

GENERAL PARTICULARS OF THE ACCIDENT AND THE OTHER PARTY			
Date of Accident <b>24 May 2018</b>	Time (hours) <b>1016hrs</b>	Place <b>Along Depot Road towards CMPB</b>	
Make <b>Nissan</b>	*Left-Hand / <b>Microbus</b>	Registration Number <b>MID 46307</b>	Year of Make <b>2011</b>
Name of Insurance Company <b>LKK Auto Consultants Pte Ltd</b>		Driver's Name & Address <b>SAF</b>	
Type of Vehicle/Object Involved <b>Minibus</b>		Owner's Name & Address <b>SAF</b>	
Nature of damage (in fullest detail) – use continuation sheet if necessary <b>Front right headlight assemble out of alignment</b> <b>Front Grille cracked</b> <b>Front bumper slight dent and crack</b>			Report to <b>MTWO</b>
PARTICULARS OF WITNESSES			
Witnesses (if in SAF, state NRIC & Unit)	Name	Address	Tel No.
	<b>CPL Toh Jun Jie</b>	<b>443D, Bukit Batok West Avenue 8, #07-785</b>	<b>92397978</b>
		<b>Singapore 654443</b>	
PARTICULARS OF INJURED PERSONS			
Witnesses (if in SAF, state NRIC & Unit)	Name	Address	Tel No.
	<b>NIL</b>	<b>NIL</b>	<b>NIL</b>
Upon completion of the above columns, please make a sketch of the accident on the third page of this form			

The Accident Slip below has been detached and given to \_\_\_\_\_ of \_\_\_\_\_

\_\_\_\_\_  
(This person should normally be driver of the other vehicle.)

However, in exceptional circumstances, it may be given to a police officer if one appears on the scene.)

\*Delete where applicable

If you have any enquiry, please contact us at Tel: 6256 3561 (Ext: 101 & 115) /  
Fax: 6741 4108 /

E-mail: [csi@lkkauto.com](mailto:csi@lkkauto.com).  
Motor Claims Section  
LKK Auto Consultants Pte Ltd  
51 Ubi Ave 1, #01-25 Paya Ubi Industrial Park, Singapore 408933



PARTICULARS OF VEHICLE & DRIVER FOR WHICH THIS REPORT IS MADE				
Make & nomenclature of service vehicle <u>Nissan Microbus</u>	*L.H / R.H Drive Register No. <u>MID 46307</u>	Date of last over-haul or inspection <u>09 March 2018</u>	Present location of vehicle <u>Bukit Gombak Camp</u>	
Describe (in fullest detail) the damage to service vehicle & load <u>Front right headlight assemble out of alignment</u> <u>Front Grille cracked</u> <u>Front bumper slight dent and crack</u>				
Name of Driver <u>BRYAN LOR WEN BIN</u>	NRIC <u>S9538138C</u>	Rank <u>CPL</u>	Age <u>23</u>	Sex <u>Male</u>
Date of Enlistment <u>04 Oct 2016</u>	ORD <u>03 Aug 2018</u>	Service Status <input type="checkbox"/> Regular <input type="checkbox"/> NSF <input type="checkbox"/> Nsmen <input type="checkbox"/> NUSAF <input type="checkbox"/> Civilian	Vocation <input type="checkbox"/> MT Specialist <input type="checkbox"/> Driver Class I <input type="checkbox"/> Driver Class II <input type="checkbox"/> Dual - Vocationalist <input type="checkbox"/> Non - Driver	
SAF Driving Permit No. <u>SAF/TPT/N/00441/17</u>	Class of Licence <u>CL 3 &amp; 4</u>	Type of Licence <input type="checkbox"/> Permit Holder, trained by STTS <input type="checkbox"/> Permit Holder, not trained by STTS <input type="checkbox"/> Letter of Authority		
Date of issue <u>02032018</u> Service Licence <u>SAF</u> Civilian Licence <u>NIL</u> Letter of Authority <u>NIL</u>	Date Passed Driving Test <u>02032018</u> Service Licence Civilian Licence	Driving Experience Service Driving <u>1</u> yr <u>2</u> mth Civilian Licence yr mth Mileage Driven by Driver <u>9600</u> km	Category A <input type="checkbox"/> B <input checked="" type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/>	
Number of previous accidents in which you have been: Involved <u>0</u> To Blame.....0.....		Number of attempts before passing driving test <u>2</u>		

\*Delete where applicable

Name	Rank	Service No.	Vehicle No.
Unit	Place of Accident		Date and Time

## SINGAPORE ARMED FORCES

## GENERAL INFORMATION OF THE ACCIDENT

<b>Driver's Degree of Injury</b> <input type="checkbox"/> Fatal <input type="checkbox"/> Serious <input type="checkbox"/> Minor <input checked="" type="checkbox"/> No injury	<b>Other Party's Degree of Injury</b> <input type="checkbox"/> Fatal <input type="checkbox"/> Serious <input type="checkbox"/> Minor <input checked="" type="checkbox"/> No injury	<b>Weather</b> <input type="checkbox"/> Rainy <input type="checkbox"/> Drizzling <input checked="" type="checkbox"/> Fine	<b>Visibility</b> <input checked="" type="checkbox"/> Clear <input type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Others (Specify) .....	<b>Classification of Accident</b> <input type="checkbox"/> External <input type="checkbox"/> Fatal <input type="checkbox"/> Major <input checked="" type="checkbox"/> Minor <input type="checkbox"/> Internal
<b>Location: Along Depot Road toward CMPB</b>  Accident occurred on (state road).....at.....km (specify land marks, if any).....  If accident occurred at a junction, name the road forming the junction. .....		<b>Area of Accident</b> <input type="checkbox"/> Camp Area <input type="checkbox"/> Car Park <input type="checkbox"/> Training Area <input type="checkbox"/> Overseas <input type="checkbox"/> Near school Vicinity <input type="checkbox"/> Public Housing Estate <input type="checkbox"/> Private Residential Area <input type="checkbox"/> Factory <input type="checkbox"/> Shopping Complexes <input type="checkbox"/> Shop Houses <input type="checkbox"/> In CBD Area (During non operational hours) <input type="checkbox"/> In CBD Area (During operational hours) <input checked="" type="checkbox"/> Others (specify) <u>Along Depot Road.</u>		
<b>Type of Road</b> <input checked="" type="checkbox"/> Main Road <input type="checkbox"/> One-way <input type="checkbox"/> Two-way <input type="checkbox"/> Dual-Carriage way <input type="checkbox"/> Multi-Carriage way <input type="checkbox"/> Side Road <input type="checkbox"/> Minor to Major <input type="checkbox"/> Major to Minor <input type="checkbox"/> Others (Specify) .....	<b>Road Surface</b> <input checked="" type="checkbox"/> Dry <input type="checkbox"/> Wet <input type="checkbox"/> Oily <input type="checkbox"/> Sandy <input type="checkbox"/> Others (Specify) .....	<b>Road Feature</b> <input type="checkbox"/> Narrow <input type="checkbox"/> Bend <input type="checkbox"/> Merging <input type="checkbox"/> U-turn <input checked="" type="checkbox"/> Straight Road <input type="checkbox"/> Sharp Turn <input type="checkbox"/> Blind Corner <input type="checkbox"/> Bridge <input type="checkbox"/> T-junction <input type="checkbox"/> Y-junction <input type="checkbox"/> X-junction <input type="checkbox"/> Box-junction <input type="checkbox"/> Flyover <input type="checkbox"/> Private Road <input type="checkbox"/> Others (Specify) .....	<b>Road Speed Limit</b> <input type="checkbox"/> < 40km/h <input type="checkbox"/> 50km/h <input checked="" type="checkbox"/> 60km/h <input type="checkbox"/> 70km/h <input type="checkbox"/> 80km/h  <b>Traffic Volume</b> <input type="checkbox"/> Heavy <input type="checkbox"/> Medium <input checked="" type="checkbox"/> Light	
<b>Type of Collision</b> (i) Between moving Vehicle <input type="checkbox"/> Head On <input checked="" type="checkbox"/> Head to rear <input type="checkbox"/> Head to side <input type="checkbox"/> Hit & Run <input type="checkbox"/> Side Swipe (Same Direction) <input type="checkbox"/> Side Swipe (Different direction) <input type="checkbox"/> Others (Specify) ..... (ii) Moving vehicle against <input type="checkbox"/> Parked vehicle <input type="checkbox"/> Lamp post <input type="checkbox"/> Animals <input type="checkbox"/> Road divi <input type="checkbox"/> Pedestrian <input type="checkbox"/> Others (Specify) .....		<b>Manoeuvre of Vehicle before Accident</b> <input type="checkbox"/> Stationary <input type="checkbox"/> Overtaking <input type="checkbox"/> Reversing <input checked="" type="checkbox"/> Stopping / Slowing Down <input type="checkbox"/> Moving Off <input type="checkbox"/> Changing Lane <input type="checkbox"/> Negotiating U-turn <input type="checkbox"/> Entering / Leaving Shoulder <input type="checkbox"/> Turning left - Waiting <input type="checkbox"/> Turning right - Waiting <input type="checkbox"/> Driving Ahead <input type="checkbox"/> Others (Specify) .....		
<b>Probable Cause of Accident</b>				
<b>Mil</b> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<b>Civ</b> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<b>Mil</b> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<b>Civ</b> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	Failure to give way Turning without care Changing Lanes Skidding Inattentive Driving Illegal  Improper Overtaking Tailgating Exceeding Speed Limit Others (Specify) <u>inaccurate assumption of civilian action</u>

## SINGAPORE ARMED FORCES

Show a sketch of accident indicating the following points.

1. Road layout and widths.
2. Position of vehicles before and after impact, with direction of travel of each vehicle.
3. Position and length of all skid marks
5. Obstructions, etc.
6. Street Road names.
7. Village names or distance away
8. White lines and studs in roadways
9. Warning signs, traffic signals and Pedestrian crossings.

See attached							
Unit	Address					Tel. No	Unit File Ref

I declare that the above particulars and my accompanying statements are true in every respect and that I have not wilfully suppressed any information.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\*Delete where applicable

I certify that the above vehicle was being driven:

(a)

\* On Duty / Not on duty

(b)

\* On authorised route / Not on authorised route

It \* is / is not intended to hold an \* inquiry / investigation into the cause of the accident because of the following reasons.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature