## 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 <u>truthful and accurate</u> 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 aforesaid

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	07/08/2018 17:07
Date Of Accident	05/08/2018 01:00
Exact Location Of Accident	JALAN SAYANG AND JALAN TEMENGGONG AHMAD
Country/State of Loss	MALAYSIA/JOHOR DARUL TAKZIM
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKB3326A
Insured/Policyholder	
Name Of Registered Owner	CAR COVE LEASING PTE LTD
Co Reg No	201602573M
Email Address	EDWIN@CARCOVE.COM.SG
Mobile Phone No	(LOCAL) +65-82987357
Alternative Phone No	OFFICE-82987357
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	SANTA FE
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	999994935/100835160-00023
Cover Note Number	
Driver	
Name of Driver	D THIA CADA IA

Name of Driver P THIAGARAJA
NRIC No S9629713J
Date Of Birth 19/08/1996
Occupation OUTDOOR
Date Of Driving Pass 10/07/2018

Driving Experience 0 YEAR AND 0 MONTH

Gender MALE

Mobile Number (LOCAL) +65-82987357

Fax Number

Contact Number OTHERS-82987357

EMail Address EDWIN@CARCOVE.COM.SG

**BLK 77 INDUS ROAD** Address

#12-499

Postcode 160077

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - HIRER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

**General Information of the Accident** 

**COLLISION - CROSS JUNCTION** Type Of Accident

Weather Conditions **CLEAR** Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? YES

Foreign Vehicle Registration Number **UNKNOWN (PRIVATE CAR)** 

Number of vehicles involved in the accident Was any body injured in the Accident? YES 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) 3

Passenger 1 NAME: : SARAVANAN

> GENDER: : MALE

Passenger 2 NAME: : GOKULAN

> **GENDER:** : MALE

**Details of Police Action** 

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name YISHUN SOUTH NEIGHBOURHOOD POLICE CENTRE

NO

Police Station Address ROAD: 32 YISHUN ST 81. POSTCODE: 768456. COUNTRY: SINGAPORE

Police Station Contact TEL NO: 1800-8522999 - FAX NO: 68522239

Was notice of intended Prosecution given?

If Yes, against whom?

**Circumstances of Accident** 

PLEASE REFER TO POLICE REPORT F/20180806/2248

Attachment(s)

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

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number UNKNOWN

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)

# **DETAILS OF INJURED PERSON 1**

Name P THIAGARA

Approximate Age

Injuries Sustain SLIGHT INJURY

Injured person in which vehicle? SKB3326A

Were seat belts worn? YES

Was this injured conveyed to hospital by

ambulance?

NO

Address Postcode

# **DETAILS OF INJURED PERSON 2**

Name SARAVANAN

Approximate Age

Injuries Sustain SLIGHT INJURY

Injured person in which vehicle? SKB3326A

Were seat belts worn?

YES

Was this injured conveyed to hospital by

ambulance?

NO

Address Postcode

# **DETAILS OF INJURED PERSON 3**

Name GOKULAN

Approximate Age

Injuries Sustain SLIGHT INJURY

Injured person in which vehicle? SKB3326A

Were seat belts worn? YES

Was this injured conveyed to hospital by

ambulance?

NO

Address

Postcode

### **Accident Sketch Plan**

### SKETCH PLAN

# **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.
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- 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")
- 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 Pers

lame: AC

NRIC/EIN N

Clarks, Secondarian (4)

# **Accident Sketch Plan**

SKETCH PLAN			
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		JALAN	TEMENIGOGG AHMAD
(10)			
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2	E TO		B) SKB 3326A B) UNKNOYON MALAYSIBA
3	3 Action of		B) UNIKNOUN MOCKYSIBA
1.1			CAR
DESCRIBE CIRCUMSTANCES	OF THE ACCIDENT		
	REFER 70	POLICE	REPORT
			,
- HESSTER			
DECLARATION			
DECLARATION  I/We declare the foregoing part	iculars are true in every carry	act	
Cal Con	/ espe		///
(* ( )*)	Mig		a 00/08/2018
Policyholder's Signature	Driver's Signature		Reporting Centre Personnel's Signature /
Date & Time:	(If driver is not the po Date & Time:	olicyholder)	Name: NRIC/FIN No. DOX 1 WO A A

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### POLICE REPORT





1 of 3

Report No. F/20180806/2248

# POLICE REPORT (NP299)

Police Station Of Origin Yishun South N.P.C 32 Yishun Street 81 SINGAPORE 768456 Tel No: 1800-8522999

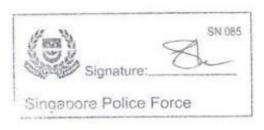
Date/Time Report Made 06/08/2018 23:38	Vide Report No.		Station Diary No 126	
Name Of Informant P THIAGARAJA	Address APT BLK 77 INDUS ROAD #12-499 SINGAPORE 160077			
ID Type / ID No. NRIC NO / S9629713J	Contact No. Home/Office		Mobile 82987357	
Nationality SINGAPORE CITIZEN	Email Address			
Occupation DELIVERY SERVICES	Sex Male	Age 21	Date of Birth 19/08/1996	Race
Institution/School Name	Language English			
Date/Time Of Incident 05/08/2018 01:00	Location Of Incident Johor Bharu MALAYSIA			

# Brief details.

On 05/08/2018 at about 0100hrs, I was driving a rental car bearing registration plate number (SKB3326A) at Malaysia, Johor Bahru from Jalan Petri towards Jalan Temenggong Ahamad. I was at the Cross-junction and had signaled right as I was about to turn to the right side towards Jalan Abdullah. While I was turning right, I spotted a vehicle unknown registration plate number speeding from the left side as such I immediately applied emergency brake.

Signature Of Officer Recording The Report:	Signature Of Informant:
F / Staff Sgt CHIANG FENG YU, SHONN	This
Signature Of Interpreter: Not applicable	Date/Time: 06/08/2018 23:38
Officer In-Charge Of Case: F / Yishun South N.P.C / SI MOHAMED JUSRI BIN MOHAMED Contact No.: 68522999	Classification Of Case:

Authentication Stamp



### POLICE REPORT





2 of 3

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20180806/2248

However, this said vehicle still hit onto my front left tire and started to drag my vehicle for quite a distance. After both vehicles came to a stop, 2 of them alighted from the said vehicle and started to put the blame on me. At that juncture, a few passersbys suddenly appeared and joined in the blaming stating it was my fault. Subsequently, 2 tow trucks came without any of us calling for their services. 1 of the tow truck took the said vehicle away while the other tow truck's driver, 1 Chinese male subject then informed me to proceed to the nearest Police station from my location and that he will be towing my vehicle there to meet me.

I then proceeded to the Police station, Trafik Muar and spoke to Officer Ahmad Bin Harun who then helped me lodged a Malaysian Police report, TRAFIK MUAR/006198/18 with the damages sustained by my vehicle as follows: Damages to the front left bumper, Front left spotlight, both car's side mirror turned outwards, front left rim also damaged. Thereafter, the male Chinese subject who was the driver of the tow truck of my vehicle came to the Police station (without my vehicle) and talked to the Police officer which the Police officer then summoned me a sum of RM300/-. The said Chinese subject initially threatened that he will not return the vehicle back to my possession but after he received a few phone calls, he relented and my vehicle came to the temple which I had previously went there for prayers.

The same Chinese subject also quoted RM1300/- for his service to tow my vehicle back to Singapore, initially I was not agreeable as I did not even call for him to tow my vehicle however, I still did pay the sum and he then towed my vehicle back to the borderline between Malaysia and Singapore. Which then I engaged my own tow trucks services to tow the vehicle back into Singapore.

I wish to inform that I felt that the thing is a scam as coincidentally after the collision between my vehicle

Signature Of Officer Recording The Report:	Signature Of Informant:
F / Staff Sgt CHIANG FENG YU, SHONN	- Jung
Signature Of Interpreter: Not applicable	Date/Time: 06/08/2018 23:38
Officer In-Charge Of Case: F / Yishun South N.P.C / SI MOHAMED JUSRI BIN MOHAMED Contact No.: 68522999	Classification Of Case:
Authentication Stamp	



### POLICE REPORT





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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20180806/2248

and the unknown Malaysian vehicle, 2 tow trucks immediately came down to the accident location. I also wish to inform that my vehicle was rented from a Singapore Car rental company, Car Cove Leasing Pte Ltd and I am lodging this report for car rental company's actions and my own record purposes. I also with to add on that when I passed through the Johor Bahru immigration together with the tow truck, I recalled that my passport was not chopped by the Malaysian Immigrations.

Signature Of Officer Recording The Report:

F / Staff Sgt CHIANG FENG YU, SHONN

Signature Of Interpreter: Not applicable

Officer In-Charge Of Case: F / Yishun South N.P.C / SI MOHAMED JUSRI BIN MOHAMED Contact No.: 68522999

Signature Of Informant:

Date/Time: 06/08/2018 23:38

Classification Of Case:

Authentication Stamp

SN 085 ngapore Police Force



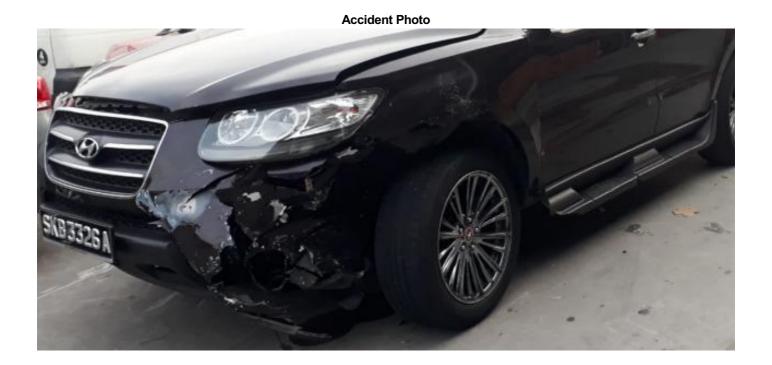


# **Accident Photo**



# **Accident Photo**





# Accident Photo Rev is assigned to 135251 in the control of the co