

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	10/08/2018 14:23
Date Of Accident	23/07/2018 21:00
Exact Location Of Accident	BELILIOS LANE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBE6825Y
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Insured/Policyholder

Name Of Registered Owner	CERTIS CISCO SECURITY PTE LTD
Co Reg No	200410167W
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-68428851

Vehicle Particulars

Manufacturer	YAMAHA
Model	YBR125-124CC (M)
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	THIRD PARTY
Vehicle Category	MOTORCYCLE

Insurance Company

Name of Insurance Company	GREAT AMERICAN INSURANCE COMPANY
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	
Cover Note Number	

Driver

Name of Driver	SRITERAN PARASU RAMAN
Passport No/FIN	G2754431U
Date Of Birth	01/10/1993
Occupation	OUTDOOR
Date Of Driving Pass	05/12/2017
Driving Experience	0 YEAR AND 7 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-96609276
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	97 JALAN GAYA 3, TAMAN SALENG GAYA 81400 KULAI, JOHOR
Postcode	
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?	YES
If Yes, Please state which Police Station	
Police Station Name	ROCHER N.P.C
Police Station Address	ROAD: 11 KAMPONG KAPOR ROAD , POSTCODE: 208678 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2949999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

AS PER POLICE REPORT

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	YN8655M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	G7749527X
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

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:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 26/07/2018
10:35 AM

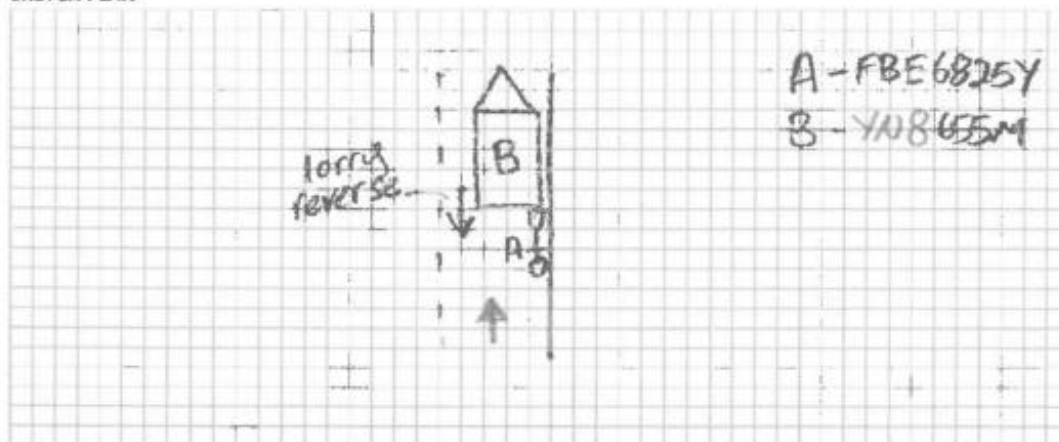
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

UNIQUE MOTORSPORTS PTE LTD
GST Reg. No. 200907910H
11 Tannery Lane
Singapore 347774
Tel / Fax: 6292 5578 / 6295 5579

GIA/IRAC SketchplanForm_v18

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report: T/20180723/2187

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: 24 / 07 / 2017

10:40 AM

Reporting Centre Personnel's Signature

Names:

NRIC/FIN No.:

UNIQUE MOTORSPORTS PTE LTD

GST Reg. No. 200907910H

11 Tannery Lane

Singapore 347774

Tel / Fax: 6292 5578 / 6295 5579

Police Report



**SINGAPORE
POLICE FORCE**



72019072302187

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapor Road SINGAPORE
206678
Tel No: 1800 2649998

Page 1 of 3
Report No: 72019072302187

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 23/07/2018 22:48		Video Report No.		Station Diary No. 223
Informant's Particulars				
Name of Informant SRITERAN PARASU RAMAN		Address: 27 Jalan Gaya 3, Taman Salang Gaya 81400 Kulai, Johor		
ID Type / ID No. PIN NO / 527544310		Contact No. Home/Office Mobile: 88309276		
Nationality MALAYSIAN		Email:		
Sex: Male	Age: 24	Date of Birth: 01/10/1993	Type of Informant: Rider	
Race: Indian		Language: English		Institution / School Name:
Occupation: Auxiliary police officer		Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident: Non-Injury Others	Drink Drive: No	Date/Time of Accident: 23/07/2018 21:00	Type of Location: Back lane	
Location: Along Road 1 BELUKOS LANE Back lane				
Weather: Clear	Road Surface: Dry	Road Speed Limit:		
Traffic Flow: Two Way	Traffic Control: Not Controlled	Traffic Volume: No Traffic		
Type of Collision: Moving Vehicle Against - Parked Vehicle			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No	Type	Make	Model	Color	Condition	No of Passenger
FE6825Y	Motorcycle	YAMAHA		White	Seriously Damaged	0
YN8005M	Lorry	ISUZU		White	No Damage	0

Details of Persons Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: Nil	Use of Pedestrian Crossing: NA

Police Report



**SINGAPORE
POLICE FORCE**



15/04/2024

Police Station Of Origin:
Anchor N.P.O.
11 Kembangan Road, Singapore
200078
Tel No. 1800 2546699

2402

Report No. 1021402740247

CONTINUATION OF REPORT

Name	SRIERAM MANASI RAMAN		ID No.	G2764431U
Related Vehicle	FSE51257 (Motorcycle)		Contact No.	85509215
Hospital/Clinic	Nil		Class of Driving License & Expiry Date	Class: NIL Date of Expiry: Nil
Date Treatment	Nil		Date Discharge	NIL
No. of Days granted Medical Leave	Nil		Degree of Injury	Nil
Name	Arundhati Mahalingam		ID No.	G7740587X
Related Vehicle	YN9608M (Lorry)		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving License & Expiry Date	Class: NIL Date of Expiry: Nil
Date Treatment	Nil		Date Discharge	NIL
No. of Days granted Medical Leave	Nil		Degree of Injury	Nil

Brief Details

I am working as a part-time auxiliary police officer doing my patrol work at the area. I parked the company's motorcycle at the area along Selegie Road (back lane). A lorry drove past and the back of the lorry hit the motorcycle. The motorcycle was damaged with broken front view and left foot supporter was broken. No one was injured at the point of time. The lorry was not damaged. I am lodging this report for my company's insurance claim.

Police Report



**SINGAPORE
POLICE FORCE**



T2018072002187

Police Station Of Origin:
Rochor N.P.C
11, Kampong Kapur Road SINGAPORE
208878
Tel No. 1800-2949988

1 of 3

Report No. T2018072002107

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474586 stating the report number as reference.

Signature Of Officer Recording The Report: A/ Sgt 2 BENJAMIN LOW WEE FU	Signature Of Informant: C
Signature Of Interpreter: Not applicable	Date/Time: 23/07/2018 22:46
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No. 65478151	Classification Of Case:
Authentication Stamp NRP08	

Singapore Police Force

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Driving License

LESEN MEMANDU
DRIVING LICENCE

MALAYSIA

SRITERAN AL PARASU RAMAN



Warganegara / Nationality No. Pengesahan / Identity No.
MALAYSIA 931001085559

Kelas / Class
B2

Tarikh / Validity
05/12/2017 - 01/10/2019


Alamat / Address
NO 97
JALAN GAYA 3
TAMAN SALENG GAYA
81400 SENAI
JOHOR

- JPL6**
- A. **Keperluan Biasa (Carat)** (Maksimal 870 kg, termasuk 450 kg
 Annel Carriage (Motor Cycle) termasuk weight not exceeding 450 kg
- A1. **Keperluan Biasa (Carat)** (Maksimal 870 kg, termasuk 350 kg
 Annel Carriage (Motor Cycle) termasuk weight not exceeding 350 kg
- B. **Motorsikal** (maksud 300 cc
 Motor Cycle termasuk 500 cc
- B1. **Motorsikal** (maksud 300 cc
 Motor Cycle not exceeding 500 cc
- B2. **Motorsikal** (maksud 300 cc
 Motor Cycle not exceeding 250 cc
- C. **Motorsikal Tiga Roda**
 Three wheeled Motor Cycle
- D. **Motorsikal 870 kg** (maksud 3500 kg
 Motor Car termasuk weight not exceeding 3500 kg
- D1. **Motorsikal Tiga Roda** (maksud 3500 kg
 Motor Car Without Chain Drive termasuk weight not exceeding 3500 kg
- E. **Motorsikal 870 kg** (maksud 3500 kg
 Motor Car termasuk weight exceeding 3500 kg
- E1. **Motorsikal 870 kg** (maksud 3500 kg
 Heavy Motor Car termasuk weight not exceeding 3500 kg
- E2. **Motorsikal 870 kg** (maksud 3500 kg
 Heavy Motor Car termasuk weight not exceeding 3500 kg
- F. **Traktor/Landam Berputar** (maksud 3500 kg, termasuk 3500 kg
 Tractor/Tram (Motorcycle) Light (maksud termasuk weight not exceeding 3500 kg
- G. **Traktor/Landam Berputar** (maksud 870 kg, termasuk 5000 kg
 Tractor/Tram (Motorcycle) Light (maksud termasuk weight not exceeding 5000 kg
- H. **Traktor/Landam Berputar** (maksud 870 kg, termasuk 5000 kg
 Tractor/Tram (Motorcycle) Heavy (maksud termasuk weight 5000 kg
- I. **Traktor/Landam Berputar** (maksud 870 kg, termasuk 5000 kg
 Tractor/Tram (Motorcycle) Heavy (maksud termasuk weight 5000 kg
- M. **Motorsikal Motosikal**
 Motor Cycle
- 209023 81b4q7w**


Kelajuan Pengangkutan Jalan




Identification Card

VISIT PASS		Immigration Regulations		20-05-2015	
Name		SRITERIAN PARASU RAMAN			
FIN		G2754431U			
Date of Birth		01-10-1993		Sex	
Nationality		MALAYSIAN		M	
					
YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.					
					

Identification Card

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


Employer of
CERTIS CISCO AUXILIARY POLICE FORCE PTE. LTD.





Name
SRI TERAN PARASU RAMAN

Work Permit No.
4 05491214

Section
SERVICE







K0431995