#### 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	25/09/2018 15:53
	Date Of Accident	24/09/2018 14:40
	Exact Location Of Accident	YISHUN AVENUE1 /INSIDE ORCHID COUNTRY CLUB CARPARK
	Country/State of Loss	SINGAPORE
	D	ETAILS OF OWN VEHICLE
	Vehicle Registration Number	GBH5722B
	Insured/Policyholder	
	Name Of Registered Owner	M/S ROYAL 88 INTERIOR DESIGN PTE LTD
	Co Reg No	-
	Email Address	FLORENCETONG@ROYAL88.COM.SG
	Mobile Phone No	(LOCAL) +65-98699607
	Alternative Phone No	OFFICE-98699607
	Vehicle Particulars	
	Manufacturer	ТОУОТА
	Model	-
	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	COMMERCIAL VEHICLE
	Insurance Company	
	Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
	Type Of Coverage	COMPREHENSIVE
	Fleet Policy	NO
	Policy Number	DMCVSN1821901800
	Cover Note Number	
	Driver	
	Name of Driver	MURUGESAN MURUGANANTHAM

Passport No/FIN G2131501Q
Date Of Birth 19/02/1988
Occupation OUTDOOR
Date Of Driving Pass 10/11/2014

Driving Experience 3 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98699607

Fax Number

Contact Number OTHERS-98699607

EMail Address FLORENCETONG@ROYAL88.COM.SG

Address ROYAL 88 INTERIOR DESIGN PTE LTD

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 COLLIDED INTO PARKED VEHICLE

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?

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.

Number of Passengers (Including Driver)

**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

NO

0

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? NO

If Yes, against whom?

**Circumstances of Accident** 

PLS REFER TO THE POLICE REPORT: T/20180924/2083

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 YP6704H

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number 65703177

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

M001/004

2. 1/2

#### SKETCH PLAN

#### IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
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- 7. By the lodgment of this report to the insurers, you hereby consent to the erchiving of this report at the centre and to copies of the report being made available aforesald.
- 8. Consent under the Personal Data Protection Act (PDPA)

l understand, ecknowledge, agrae and consent that:

- 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 in turer(s) who have insured vahicle(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 relevan; government agency/authority (such as the police), for the purpose(s)
  - (i) processing, handling and/or dealing with my daims including the settlement of the daints and any necessary trivestigations 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 ma;
  - (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 deline (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 Furgouss; and
- my Personal information may/can be disclosed by any of the insurers and/or G/A to their third party service providers or agents(Including their lewvers/law firms), which may be sited outside of Singapore, for one or more of the elique Purposes.
- 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 dalms.
- 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 moneging fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

complying with requirements under any regulations, laws or court orders

Policyholder's Signature

great tenterioradore

Date & Time

Driver's Signasure (If driver is not the policyholder)

Date & Tinver

Reporting Centre Partidonel's Signatul

NRIC/FN No.:

Date & Time:

Date & Time:

P. 2/2 25-SEP-2018 15:32 SKETCH PLAN 2/5 Der 1 20/00/24 1 2083 DESCRIBE CIRCUINSTANCES OF THE ACCIDENT going particulars are true in every respect. Reporting Contre Personnel's Signature Driver's Signature Policyholder's Signature (If driver is not the policyholder)

Name:

NRIC/FIN No.

#### Sketch Plan #3



T/20180924/2083

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

2 of 3 Report No. T/20180924/2083

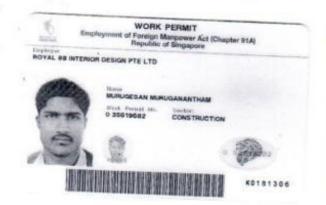
#### CONTINUATION OF REPORT

Driver	The State of the S	INDAMENT.				
Name	MURUGESAN MURUGANANTHAM  NIL  NIL			Carlottes Distriction		G2131501Q
Related Vehicle						98699607
Hospital/Clinic				Class Drivin Licen Expin	g	Class: 2B,3 Date of Expiry: NIL
Date Treatment NIL			Date Dies		NIL	-
No. of Days gran	ted Medical Leave	NIL		Date Discharge Degree of Injury		

#### Brief Details.

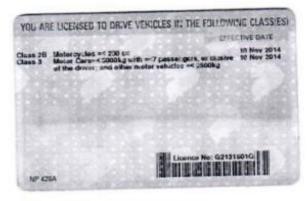
On 24/9/2018 at about 2.40pm, I realized that my left side mirror had been damaged. I saw a A4 size note sticking on my front mirror stating "Lorry YP6704H Hit ur lorry and run." I had enquired with the security officer from Orchid Country Club and they inform that they only allows police to view the CCTV footage. I am lodging this report for police assistance.

#### Sketch Plan #4

























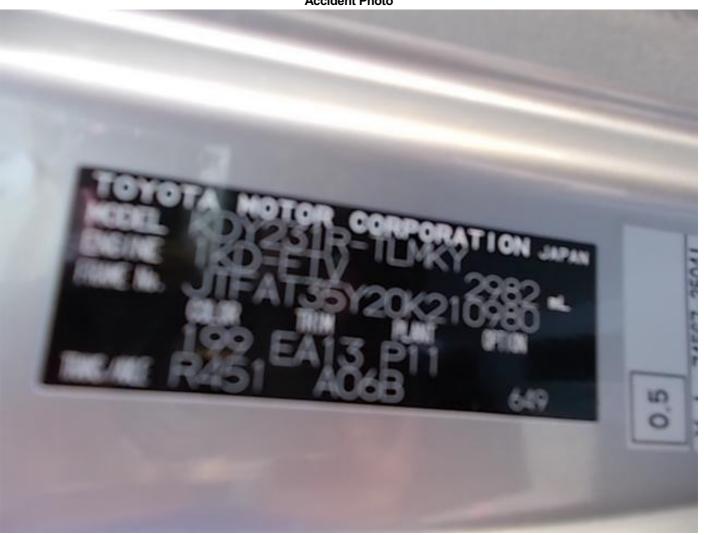






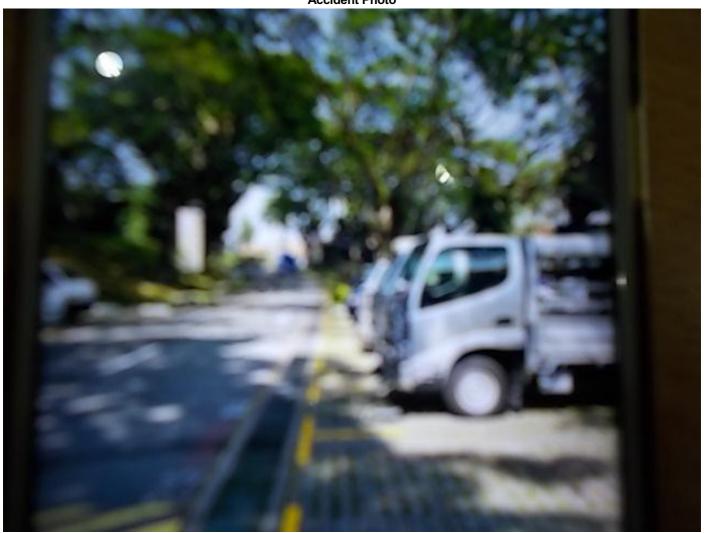


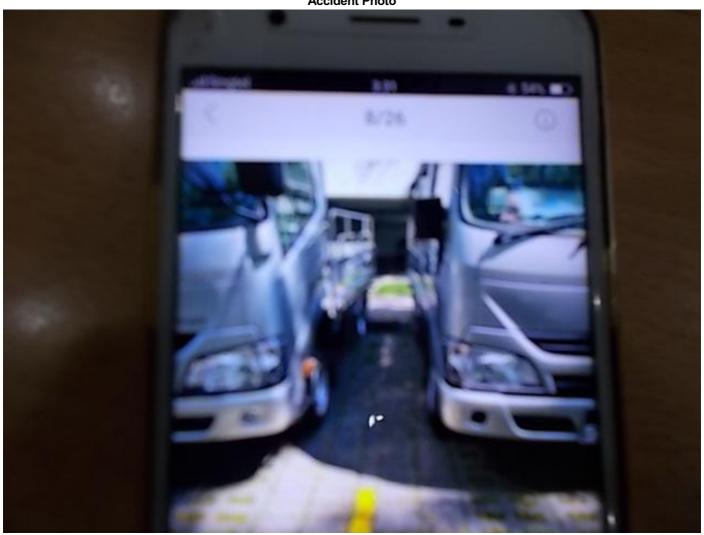


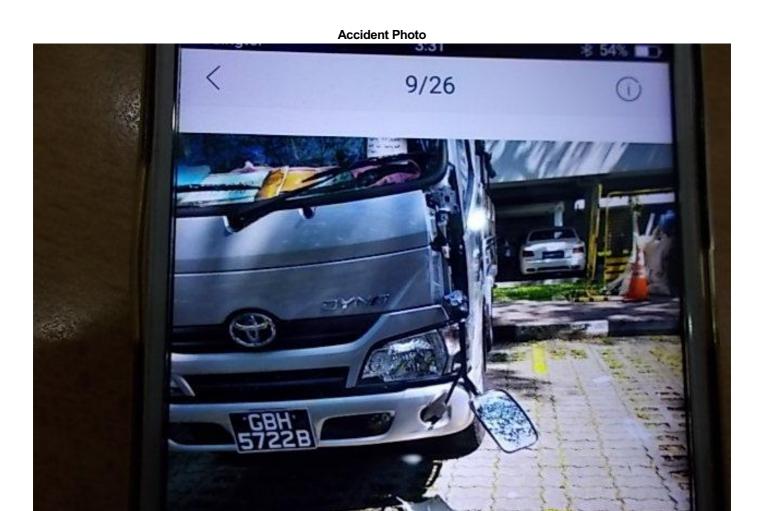


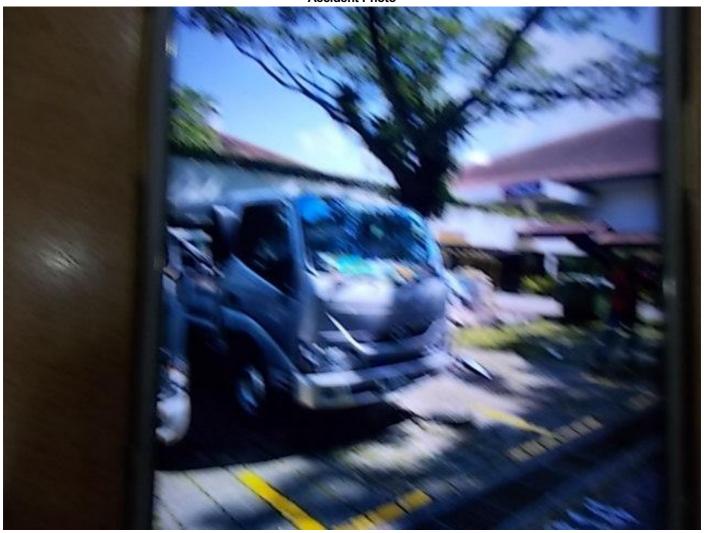


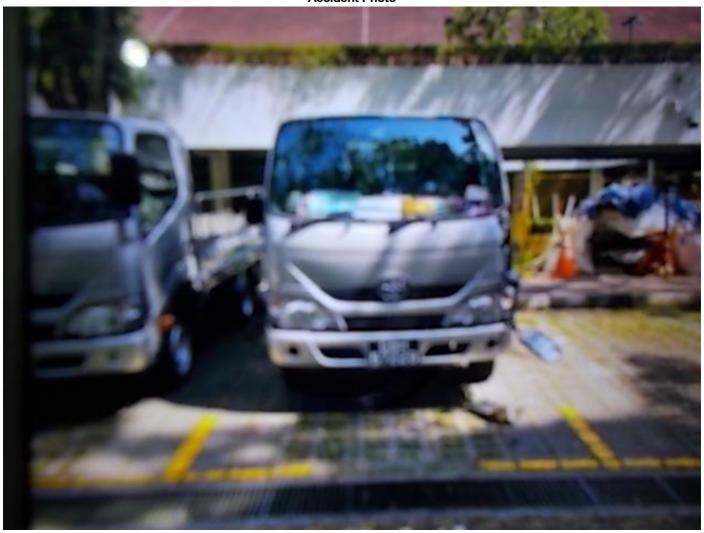


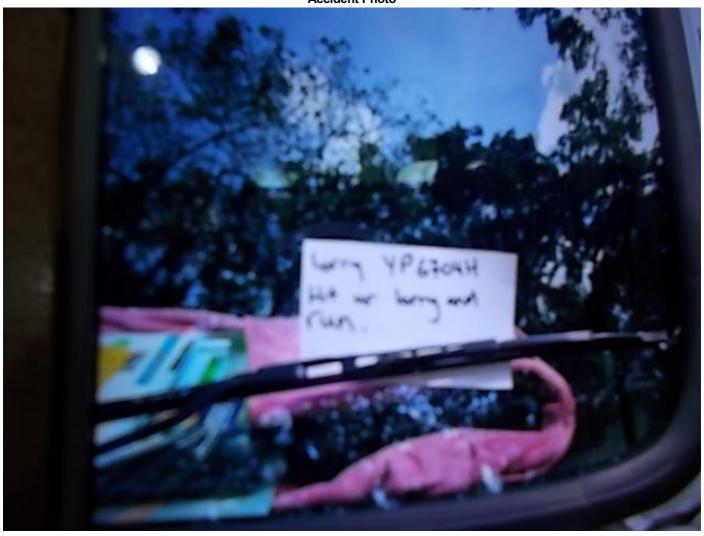




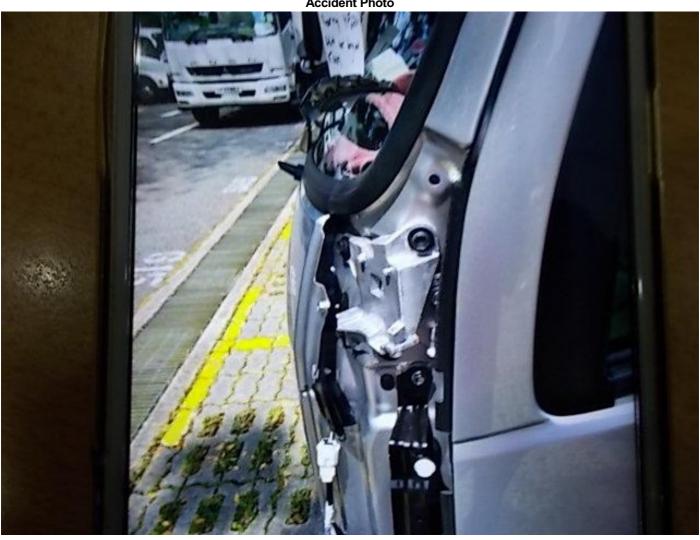












#### Police Report





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

1 of 3 Report No. T/20180924/2083

Date/Time Report Made: 24/09/2018 15:57			Vide Report No.:	Station Diary No.:		
Informa	nt's Partice	ulars				
	Informant: ESAN MUF	RUGANANTHAM	Address:			
	/ ID No.: / G2131501	10	Contact No.: Home/Office: Mobile: 98699607			
Nationality: INDIAN			Email:			
Sex: Age: Date of Birth: Male 30 19/02/1988			Type of Informant: Driver			
Race: Indian			Language: Institution / School Nar English			
Occupat	tion: RUCTION		Driving Licence Information: Class: 2B,3  Date of Expiry:			

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 24/09/2018 14:40	Type of Location Car Park	
		rk Road Surface:	F	Road Speed Limit:	
WWWATTHEFT		, toda ballada,	1000		
A CONTRACTOR OF THE PARTY OF TH		Dry		De l'eur - 1-4 March 10 C.	
Weather: Clear Traffic Flow:		Dry Traffic Control:	Т	raffic Volume:	

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenge
GBH5722B	Lorry			Grey	Slightly Damaged	0
YP6704H (Not Accurate)	Lorry				Slightly Damaged	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

#### **Police Report**



T/20180924/2083

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

2 of 3 Report No. T/20180924/2083

CONTINUATION OF REPORT

Driver		Para San San					
Name	MURUGESAN MURUGANANTHAM NIL			ID No.  Contact No.		G2131501Q 98699607	
Related Vehicle							
Hospital/Clinic	NIL				of g ce &	Class: 2B,3 Date of Expiry: NIL	
Date Treatment   NIL		Dat	Date Discharge NIL Degree of Injury NIL				
No. of Days gran							

#### Brief Details.

On 24/9/2018 at about 2.40pm, I realized that my left side mirror had been damaged. I saw a A4 size note sticking on my front mirror stating "Lorry YP6704H Hit ur lorry and run." I had enquired with the security officer from Orchid Country Club and they inform that they only allows police to view the CCTV footage. I am lodging this report for police assistance.

#### **Police Report**





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

3 of 3 Report No. T/20180924/2083

CONTINUATION OF REPORT

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-	K. 641		 - 1:	an

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 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: F / Sgt 2 WARREN TAN YU GE	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 24/09/2018 15:57
Officer In Charge Of Case: TP / HRT / SI KALESWARI PALANI Contact No.: 65476902	Classification Of Case:
Authentication Stamp NP168 Signature:	0N095