

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	02/10/2018 09:23
Date Of Accident	29/09/2018 14:00
Exact Location Of Accident	PAYA LEBAR ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBF1332E
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Insured/Policyholder

Name Of Registered Owner	HYY ENGINEERING (PTE) LTD
Co Reg No	201313599G
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-67636185

Vehicle Particulars

Manufacturer	NISSAN
Model	NV350 PANEL VAN 2.5 5MT 5DR EURO V
Exact Purpose for which vehicle was being used at time of accident	
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	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCPHQ18-003128
Cover Note Number	

Driver

Name of Driver	VISVANATHAN ANESHKUMAR
Passport No/FIN	G6536271L
Date Of Birth	24/06/1989
Occupation	OUTDOOR
Date Of Driving Pass	31/08/2017
Driving Experience	1 YEAR AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-83504430
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	38 WOODLANDS INDUSTRIAL PARK E1 #01-04
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 - CHANGE/CROSS LANE
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?	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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	WOODLANDS EAST N.P.C
Police Station Address	ROAD: 3 WOODLANDS DRIVE 63 , POSTCODE: 737890 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180930/2089

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	SH9333M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
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	VISVANATHAN ANESHKUMAR
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	GBF1332E
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	
Address	
Postcode	

SKETCH PLAN

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7. 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:
 - (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.

HYE ENGINEERING PTE LTD

(201313599G)

71, WOODLANDS IND PK E9, #02-01

WAVE 9, SINGAPORE 757048

X TEL: 6763 6185 FAX: 6258 0254

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

GIA/PMC SketchPlanForm_V2

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES			EFFECTIVE DATE
CI	Class 2B	Motorcycles <= 100 CC	14 Mar 2011
CI	Class 3	Motor cars <= 3000 kg with <= 7 passengers, exclusive of the driver; and motor tractors/vehicles <= 2500 kg	31 Aug 2017

S / No.9000302255

G6536271L



Licence No:G6536271L

NP 428A

VISIT PASS
Immigration Regulations

02-04-20

Name
VISVANATHAN ANESHKUMAR

Download SGWorkPass
App to check status



FIN
G6536271L
Date of Birth
24-06-1989
Sex
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.



REPUBLIC OF SINGAPORE **DRIVING LICENCE**

Licence Number **G 6536271 L**
Name: **VISVANATHAN ANESHKUMAR**

Birth Date: **24 Jun 1989**
Issue Date: **01 Mar 2016**
Valid Till: **13/03/2021**

002542611C

S PASS
Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore

Employer: **HYY ENGINEERING (PTE.) LTD.** **HP 83504430**

Name: **VISVANATHAN ANESHKUMAR**
S Pass No.: **0 34788413** Sector: **CONSTRUCTION**

0 34788413

K0235903

FAX +65 63330117 Tel: 65330117 65330300

EQ Insurance Company Limited
 5 Maxwell Road, #17-00 Tower Block, MND Complex, Singapore 069110
 tel 65-6223 9433 | fax 65-6224 3503 | www.eqinsurance.com.sg
 reg no. 1978-00400-N

eqinsurance
Unsure? Go to Frank

CERTIFICATE OF INSURANCE
 ROAD TRANSPORT ACT, 1987 (MALAYSIA)
 THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1958 (FEDERATION OF MALAYSIA)
 THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)
 (REPUBLIC OF SINGAPORE)
 THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1956 EDITION (REPUBLIC OF SINGAPORE)
 OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

COMMERCIAL VEHICLE PRIVATE (SCH I)
 Comprehensive

Certificate No. : DMCPHQ18-003128

1. Index Mark and Registration Number of Vehicles GBF1332E	Form: LCVP1 Excess: Section 1: YEID-AC Additional:	\$5,500.00 \$53,000.00
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2. Name of Policyholder:
HYE ENGINEERING (PTE) LTD

3. Effective Date of the Commencement of Insurance for the purpose of the Act
29/05/2018

4. Date of Expiry of Insurance
26/05/2019

5. Person or Classes of persons entitled to drive*
 Goods carrying - (MZ300) Authorised Driver.
 Any of the following :-
 1. The Policyholder
 2. Any person on the order or with the permission of the Policyholder

* Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act has not been cancelled at the time of accident loss or damage.

6. Limitation as to use*
 1) Use in connection with the Insured's business.
 2) Use for the carriage of passengers (other than for hire or reward) in connection with the Insured's business.
 3) Use for social domestic and pleasure purposes.

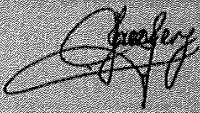
THE POLICY DOES NOT COVER
 1) Use for hire or reward or for racing pace-making reliability trial or speed testing.
 2) Use whilst drawing a greater number of trailers in all than is permitted by Law.
 3) Use for the carriage of passengers for hire or reward.
 4) Liability arising from or in connection with the carriage of hazardous materials, high explosives, inflammable liquid or gases including LPG in cylinders.

* Limitations rendered inoperative by Section 8 of the Motor vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.


I/WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or and Amendment, Act or Acts passed in substitution thereof.

Hire Purchase : UNITED OVERSEAS BANK LIMITED

A000342/Abwin Pte Ltd
 Date of Issue : 22/05/2018 11:34


 Authorised Signatory
 EQ Insurance Company Limited

Exp No. : DMCPHQ17-003241

 A Member of Citystate

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



T/20180830/2089

Police Station Of Origin:
Woodlands West N.P.C.
9 Marsiling Lane SINGAPORE 739146
Tel No: 1800-363 9999

1 of 3

Report No. T/20180830/2089

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 30/09/2018 20:02		Vide Report No.:		Station Diary No.: 53	
Informant's Particulars:					
Name of Informant: VISVANATHAN ANESHKUMAR			Address: APT BLK 408 WOODLANDS STREET 41 #03-11 NORTH COAST LODGE SINGAPORE 730408		
ID Type / ID No.: FIN NO / G6536271L			Contact No.: Home/Office: Mobile: 83504430		
Nationality: INDIAN			Email:		
Sex: Male	Age: 29	Date of Birth: 24/06/1989	Type of Informant: Driver		
Race: Indian			Language: English		Institution / School Name:
Occupation: AIRCON TECHNICIAN			Driving Licence Information: Class: 2B,3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Special Vehicle	Drink Drive: No	Date/Time of Accident: 29/09/2018 14:00	Type of Location: X-Junction
Location: Along Road 1 Traveling Toward Road 2 PAYA LEBAR ROAD EUNOS AVENUE 5 X-Junction between Paya Lebar Road and Eunos Avenue 5				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Engine	Year of Registration
GBF1332E	Van	NISSAN	NV350	Silver		0
SH9333M	Car	HYUNDAI		Blue		1

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

Police Report



**SINGAPORE
POLICE FORCE**



T/20180830/2089

2 of 3

Police Station Of Origin:
Woodlands West N.P.C.
9 Marsiling Lane SINGAPORE 739146
Tel No: 1800-363 9999

Report No. T/20180830/2089

CONTINUATION OF REPORT

Name	VISVANATHAN ANESHKUMAR		ID No.	G6536271L
Related Vehicle	GBF1332E (Van)		Contact No.	83504430
Hospital/Clinic	KHOO TECK PUAT HOSPITAL		Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	30/09/2018	Date Discharge	30/09/2018	
No. of Days granted Medical Leave	03	Degree of Injury	NIL	
Name	LEE YEW NYEN		ID No.	S7303368C
Related Vehicle	SH9333M (Car)		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 2B,3,4,5 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL

Brief Details.

On 29/09/2018 at 2pm at X-Junction between Pays Lebar Road and Eunos Avenue 5, while I was driving my company van on the 3rd lane of a four lane road as I wanted to drive straight towards Guillemard Road, a blue comfortdelgro taxi which was stationary at the said junction while waiting for the right turn light to turn green, suddenly changed lane into my lane when my van was going straight. He wanted to turn right even though his lane can drive straight as he was waiting at the said junction for the right turn light to turn green. However, when my van was going straight suddenly the said taxi changed lane into my lane. The said taxi's front side hit onto my van's rear right side when doing so. Both I and the taxi driver alighted from our vehicles and exchanged particulars. No ambulance and police attended to us. The taxi driver told me that he wanted to claim insurance. My company van has no in-vehicle camera but the said taxi has it. I wish to state that after the accident, I felt chest and right shoulder pain which got worst at night hence, I went to Khoo Teck Puat Hospital on 30/09/2018 for medical check up. I received 3 days medical leave. My company van sustained a dented rear right side portion near rear right tyre.

Police Report



**SINGAPORE
POLICE FORCE**



T/20180930/2089

Police Station Of Origin:
Woodlands West N.P.C.
9 Marsiling Lane SINGAPORE 739148
Tel No. 1800-363 9999

3 of 3

Report No. T/20180930/2089

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 65474895 stating the report number as reference.

Signature Of Officer Recording The Report
J/
Sgt 2 MUMAHAMMAD SHAIFUDIN SHAH BIN
EFFENDI



Singapore Police Force

Signature Of Interpreter:
Not applicable

Signature Of Informant:

V. Anish Kumar

Date/Time:
30/09/2018 20:02

Officer In Charge Of Case:
TP / AEIT /
SSI 2 YEO GEAK ENG CECILIA
Contact No.: 65476404

Classification Of Case:

Authentication Stamp
NP158