

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	03/10/2018 11:31
Date Of Accident	02/10/2018 11:30
Exact Location Of Accident	MADRAS STREET INFRONT HE XING AUTO SUPPLY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YP3340T
Insured/Policyholder	
Name Of Registered Owner	KISHAL FREIGHT FORWARDERS
Co Reg No	46698100K
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96374069
Alternative Phone No	OFFICE-96962964

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	FUSO FM65FM2RDEB
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5081773789-02
Cover Note Number	-

Driver

Name of Driver	DAEVNRD RAI
NRIC No	S1842159C
Date Of Birth	23/06/1964
Occupation	OUTDOOR
Date Of Driving Pass	03/10/1984
Driving Experience	33 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96374069
Fax Number	
Contact Number	OTHERS-96962964
EMail Address	NOEMAIL

Address	BLK 350C CENBERRA RD #10-229
Postcode	753350
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
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)	2
Passenger 1	
	NAME: : CHUA ENG SENG
	GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

AFTER I DELIVERY AT THE SHOP HOUSE ALONG MADRAS STREET, I WAS ABOUT TO MOVE OFF, WHEN I RELEASE MY HAND BRAKE, MY DOC DROP AND I TRY TO PICKING UP. WHEN I NOTICED MY LORRY ROLLED FORWARD TO THE HE XING AUTO SUPPLY, I STEP MY BRAKE AND REVERSING BACK. I WENT DOWN TO CHECK THE VEH PARKED INFRONT THE HE XING AUTO SUPPLY. I SAW THERE WAS SCRATCHED ON THE VEH B (BEARING NO SKX25Y) LICENSE PLATE NUMBER, I NOT SURE THE DAMAGE IS DONE BY MY LORRY OR EARLY BEFORE, BECAUSE I NEVER FELT ANY IMPACT OR HEARD ANY SOUND WHILE MY LORRY ROLLED FORWARD.

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	SKX25Y
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)

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.

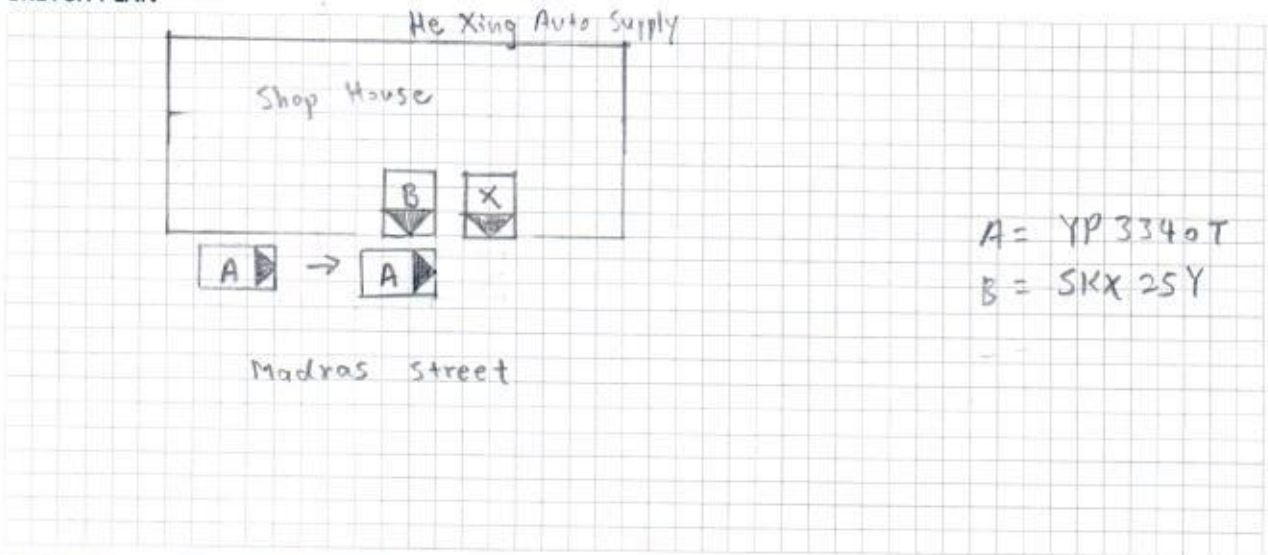


Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to statement

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:

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

REPUBLIC OF SINGAPORE DRIVING LICENCE



License No: S1842159C

Name: DAEVNRD RAI

Birth Date: 23 Jun 1964

Issue Date: 21 Aug 2003

000763058A

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S1842159C



Name: DAEVNRD RAI

Race: INDIAN

Date of Birth: 23-06-1964

Sex: M

Country of Birth: SINGAPORE

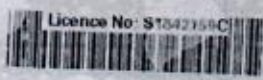



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:

Class	Description	Pass Date
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	03 Oct 1984
Class 4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	23 Dec 1965
Class 5	Motor Vehicles which are not constructed themselves to carry any load and the weight of which unladen exceeds 7250 kilograms	10 Jun 1994

NP 423A

License No: S1842159C



2144696

S1842159C

03-09-1994

APT BLK 350C CANBERRA ROAD #10-229

SINGAPORE 753350

S1842159C

03-07-2000

No. 5621171




Hello, NAC_PAYA_UBI_800601

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Policy Query

Policy No.

Date of Accident

02/10/2018 11:21

Vehicle No.(For Motor)

YP3340T

Certificate Number

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5081773789-02		KISHAL FREIGHT FORWARDERS	46698100K	GCV	Preferred Workshop Plan	YP3340T	YP3340T	12/07/2018	11/07/2019

Claim Handling

Accident MT/1014252

Policy No.	5081773789-02	Vehicle No.	YP3340T	GST Registration No.	
Certificate No.					
Policyholder Name	KISHAL FREIGHT FORWARDERS			Policyholder NRIC	46698
Product Code	COMMERCIAL VEHICLE INSURANCE	Cover Type	Preferred Workshop Plan	Loading	0
Contact No.(Mobile)	96374069	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	<input type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	15	Private Hire	No
Accident Details					
Report Date	04/10/2018 09:16	Accident Report Within 24 hrs	Yes	Accident Type	Side Sw
Date of Accident	02/10/2018	Time of Accident hh:mm	11:30	Country of Accident	Singap
Reporting Centre		Orange Force		ICM No.	
Accident Location	MADRAS STREET INFRONT HE KING AUTO SUPPLY				
Excess					
Own damage Excess	600.00	Additional Excess		Windscreen Excess	100.00
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	0.00	Outside Singapore TP Excess			
Benefits					
GST Registered Information					
GST Registered	No	GST Registration Date			
GST Registration No.		GST Status Verified	No		
Modification History					
Policyholder Mailing Address					
Address 1	BLK 807 #10-213	Address 2	WOODLANDS STREET 81	Address 3	SINGA
Address 4		Address Type	Singapore address	Post Code	73080
Unit No.		Related Policy Number	5081773789-02		
OI Driver Info					
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	DAEVNRD RAI	Driver NRIC	S1842159C	Driver DOB	23/06/
Register Date of Driver License	03/10/1984	Driver Age	54	Driving Experience	33
Contact No.(Mobile)	96374069	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 350C #10-229	Address 2	CANBERRA ROAD	Address 3	SINGA
Address 4		Address Type	Singapore address	Post Code	75335
Unit No.	10-229				
Does he own a Singapore Registered car?	<input checked="" type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	
Declaration					
Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No		

Modification History

Claim 001 **New**

Claim Type *	OD-MX	Insured Name	KISHAL FREIGHT FORWARDERS
Contact No.(Mobile)	96374069	Contact No. (Home)	
Email Address		Vehicle Number	YP3340T
Claim Description	YP3340T / SKX25Y ON 2 Oct 2018		
Preferred Workshop	0	Insured Liability	Partially at Fault
Report No.	Yes	Preferred Repair Option	Preferred Workshop, Name unknown
Date Registered		GIA report	Received
Report Taken By		Claim Close Date	04/10/2018 09:22
			LIEW SHAN HUI
<input checked="" type="checkbox"/> Print AK letter			
Save Submit			

Attachment

Accident No.	MT/1014252	Claim No.	001
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Last Doc. Received

☒ Yes
 ☐ No

Upload Date

04/10/2018 09:23

Path *

Choose File No file chosen

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Message Read

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Category *

Confidential

Urgency *

Please Select

NO

Normal

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NO

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NO

Normal

Please Select

NO

Normal

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NO

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Normal

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 04 Oct 2018 09:25	NRIC/ Driving License	Normal	NRIC/ Driving License 2018-10-4
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 04 Oct 2018 09:25	SAS	Normal	SAS 2018-10-4
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 04 Oct 2018 09:23	Photos	Normal	Photos 2018-10-4
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 04 Oct 2018 09:23	Photos	Normal	Photos 2018-10-4
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 04 Oct 2018 09:23	Photos	Normal	Photos 2018-10-4
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 04 Oct 2018 09:23	Photos	Normal	Photos 2018-10-4
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 04 Oct 2018 09:23	Photos	Normal	Photos 2018-10-4
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 04 Oct 2018 09:23	Photos	Normal	Photos 2018-10-4
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 04 Oct 2018 09:22	Photos	Normal	Photos 2018-10-4
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 04 Oct 2018 09:22	Photos	Normal	Photos 2018-10-4
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 04 Oct 2018 09:22	Photos	Normal	Photos 2018-10-4
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 04 Oct 2018 09:22	Photos	Normal	Photos 2018-10-4
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 04 Oct 2018 09:22	Photos	Normal	Photos 2018-10-4
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 04 Oct 2018 09:22	Photos	Normal	Photos 2018-10-4
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 04 Oct 2018 09:22	Photos	Normal	Photos 2018-10-4
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 04 Oct 2018 09:22	Photos	Normal	Photos 2018-10-4

Video List

Uploaded By/Date	Folder Date	File Name	Source
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