MCA118134959 / City Auto Pte Ltd - HQ
ENTRY DATE & TIME: 17/10/2018 15:48
SUBMITTED BY: Jason Quak Leng Hui

Your NCD will be affected due to late reporting
Actual e-Filling Submission Date & Time: 17/10/2018 16:15

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 witholding of material facts may allow insurance companies to repudiate policy liability.
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	17/10/2018 15:48
Date Of Accident	12/10/2018 19:15
Exact Location Of Accident	ALONG AYE TOWARDS TUAS
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBC189A
Insured/Policyholder	
Name Of Registered Owner	CRIPTON ENVIRONMENTAL ENGINEERING (S) PTE. LTD.
Co Reg No	200719883Z
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-91059433
Vehicle Particulars	
Manufacturer	TOYOTA
Model	DYNA 150-3.0 D (M)
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5101216232
Cover Note Number	
Driver	
Name of Driver	JAVVALI RAVEENDHAR
NRIC No	G6662889U
Date Of Birth	01/04/1984
Occupation	OUTDOOR
Date Of Driving Pass	04/09/2014
Driving Experience	4 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-81221389
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	970 TOA PAYOH NORTH#02-01
Postcode	318992
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	JSB9149 (MOTORCYCLE)
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
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.	YES
Number of Passengers (Including Driver)	9
Passenger 1	NAME: : NA GENDER: : MALE
Passenger 2	NAME: : NA GENDER: : MALE
Passenger 3	NAME: : NA GENDER: : MALE
Passenger 4	NAME: : NA GENDER: : MALE
Passenger 5	NAME: : NA GENDER: : MALE
Passenger 6	NAME: : NA GENDER: : MALE
Passenger 7	NAME: : NA GENDER: : MALE
Passenger 8	NAME: : NA GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes,Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ

Police Station Address	**ROAD**: 10 UBI AVENUE 3 , **POSTCODE:** 408865 , **COUNTRY**: SINGAPORE
Police Station Contact	**TEL NO**: 65470000 - **FAX NO**:
Was notice of intended Prosecution given?	NO
If Yes,against whom?	

Circumstances of Accident

AS SKETCH PLAN AND POLICE REPORT NO. T/20181017/2068

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	SGE3248Z
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 OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SH9757Z
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 OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	JSB9149
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

SKETCH PLAN

IMPORTANT NOTICE

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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.

Cripton Env Eng (S) Pte Ltd

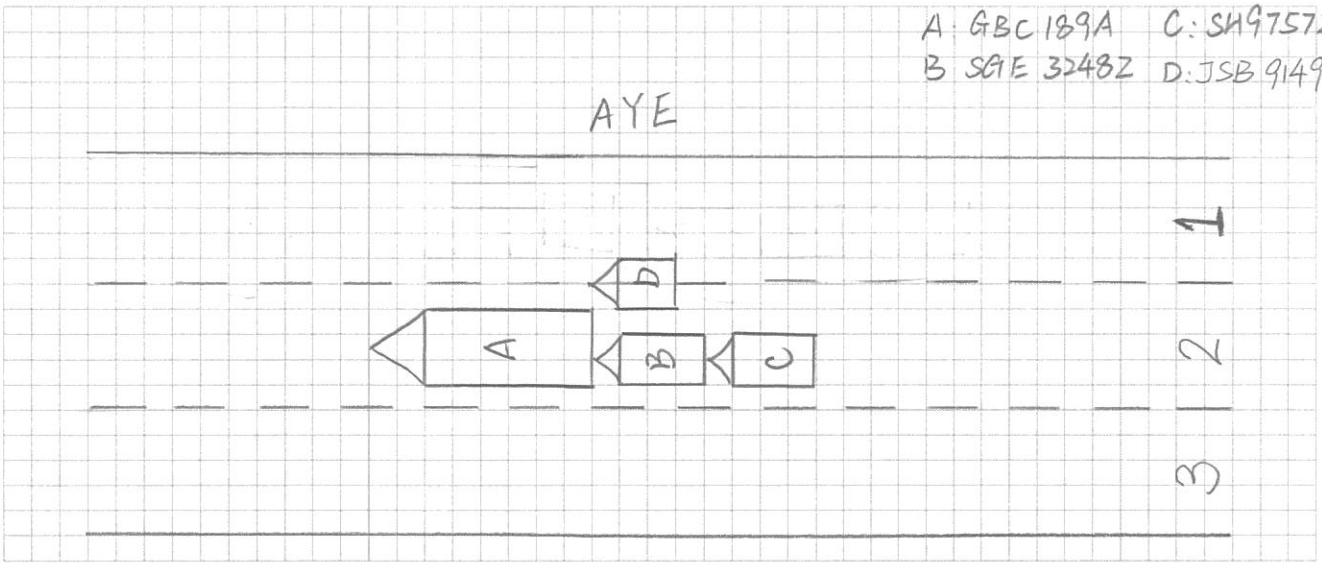
Policyholder's Signature
Date & Time: 17/10/2018 14:37

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

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

SKETCH PLAN

A: GBC 189A C: SH97572
B SGE 3248Z D: JSB 9149



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As attached Police Report N. T/20181017/2068

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature
Date & Time: 17/10/2018 14:37

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

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

Case Summary Form (CSF For NP168)

Manual NP168 Form Serial No	T/20181012/2065
Report Number	T/20181017/2068
Vide Report Number	D/20181012/0101
Date/Time of Report Made	17/10/2018 12:59
Place Report Lodged	Traffic Police Division HQ
Type of Informant	Driver
Name of Informant	JAVVALI RAVEENDHAR
ID Type / ID No.	FIN NO / G6662889U
Home/Office	
Mobile	81221389
Email	
Type of Accident	Non-Injury / Attended by Police
Drink Drive	No
Anyone conveyed by ambulance	No
Date/Time of Accident	12/10/2018 19:15

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBC189A	Lorry	TOYOTA	DYNA 150 MANUAL 3SEATER			9
JSB9149	Motorcycle					0
SGE3248Z	Car	SUZUKI	APV 1.6 AT			1

Continuation of CSF For NP168

Details of Person Involved					
Any Pedestrian Involved: No					
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA		
Driver					
Name	JAVVALI RAVEENDHAR			ID No.	G6662889U
Related Vehicle	NIL			Contact No.	81221389
Hospital/Clinic	NIL			Class of Driving Licence & 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 Facts.

ON THE 12/10/2018 AT ABOUT 1915 HRS. I WAS DRIVING MY LORRY ON THE SECOND LANE ALONG THE AYE TOWARDS TUAS. AS I WAS DRIVING, A BLACK CAR SUDDENLY CAME INTO MY LANE FROM THE THIRD LANE. I THEN APPLIED MY BRAKE AND SWERVED TO THE RIGHT TO AVOID COLLISON. SUDDENLY I FELT AN IMPACT ON THE REAR OF MY VEHICLE AND SAW THAT A MOTOCYCLE BEARING THE PLATE NUMBER JSB9149 HAD COLLIDED INTO ME AND HAD FALLEN TO THE MOST RIGHT SIDE NEAR TO THE ROAD DIVIDER. I STOPPED MY VEHICLE AND WHEN I WAS ABOUT TO GET OUT FROM MY VEHICLE, ANOTHER CAR BEARING THE PLATE NUMER SGE3248Z COLLIDED ONTO THE REAR OF MY CAR. THIS RESULTED IN A CHAIN COLLISON WHEREBY A TAXI BEARING THE PLATE NUMBER SH9757Z COLLIDED ONTO THE REAR OF THE RED CAR.

I THEN MAKE A CHECK ON MY PASSENGER AND THEY INFORMED ME THAT THEY ARE NOT INJURED. I THEN CHECKED THE LORRY AND DISCOVERED THAT THE REAR PART OF MY LORRY WAS DENTED IN, THE LICENSE PLATE WAS BENT AND THE SPARE TYRE DROPPED FROM THEIR PLACE. I THEN CHECKED ON THE OTHER DRIVERS AND THEIR PASSENGER AND THEY INFORMED THAT THEY ARE NOT INJURED.

I MADE A CHECK ON THE RED CAR AND DISCOVERED THAT THE FRONT PORTION OF THE CAR WAS TOTALLY DAMAGED. I MADE A CHECK ON THE TAXI AND DISCOVERED THAT THE FRONT BUMPER OF THE TAXI WAS SCRATCHED. I DID NOT CHECK ON THE MOTOCYCLE THUS I DID NOT KNOW THE DAMAGES DONE.

THE AMBULANCE ARRIVED AND I WAS INFORMED THAT THE RIDER OF THE MOTORCYCLE SUSTAINED A SMALL CUT ON THE KNEE. THE TRAFFICMPOLICE ALSO ARRIVED AT SCENE. NO ONE WAS CONVEYED BY THE AMBULANCE I WAS GIVEN A POLICE NOTE WITH THE INCIDENT NUMBER: D/20181012/0101 WITH THE IO NAME: ADRIAN, 65476350.

Continuation of CSF For NP168

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 65474885 stating the **report number** as reference.

Case Sensitivity	No
Officer-In-Charge of Case	TP / GIT / LIM HONG LEE
Classification of Case	1) NON-INJURY / ATTENDED BY POLICE