Your NCD will be affected due to late reporting
Actual e-Filling Submission Date & Time: 27/12/2018 19:23

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	14/12/2018 10:26
Date Of Accident	30/11/2018 17:00
Exact Location Of Accident	ALONG TEBAN FLYOVER TOWARDS AYE
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLJ9220C
Insured/Policyholder	
Name Of Registered Owner	GOLDBELL CAR RENTAL PTE LTD
Co Reg No	200710651D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91188359
Alternative Phone No	OFFICE-91188359
Vehicle Particulars	
Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	DRIVING BACK HOME FROM JOB
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SD18V00034/VPZ/R03
Cover Note Number	
Driver	
Name of Driver	PANTELIC PREDRAG
Passport No/FIN	G3453367P
Date Of Birth	06/07/1960
Occupation	INDOOR
Date Of Driving Pass	15/09/2017
Driving Experience	1 YEAR AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91188359
Fax Number	
Contact Number	OTHERS-91188359
EMail Address	NOEMAIL

Address	32 KEPPEL BAY DRIVE #07-60 CARIBBEAN AT KEPPEL BAY
Postcode	098651
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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?	YES
Foreign Vehicle Registration Number	JSB2630 (PRIVATE CAR)
Number of vehicles (including own vehicle) involved in the accident	2
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.	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	TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY
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

PLEASE REFER TO SKETCH PLAN AND POLICE REPORT T/20181211/2106

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	JSB2630
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAKAMARO SASAKI
NRIC/Passport Number	TK9581240JPN
Contact Number	+601121710279
Address	
Postcode	

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

IMPORTANT PLAN

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 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 Traffice Police Department for investigation.**
6. This report will be forwarded by the insurers to the GIA Records Management Centre established by the General Insurance Association Of Singapore (GIA) for archiving and the copies of this report will be a fee be made available upon available upon application by interested parties.
7. By the lodgement of this report to the insurers, hereby consent to the archiving of this report at the centre and the copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

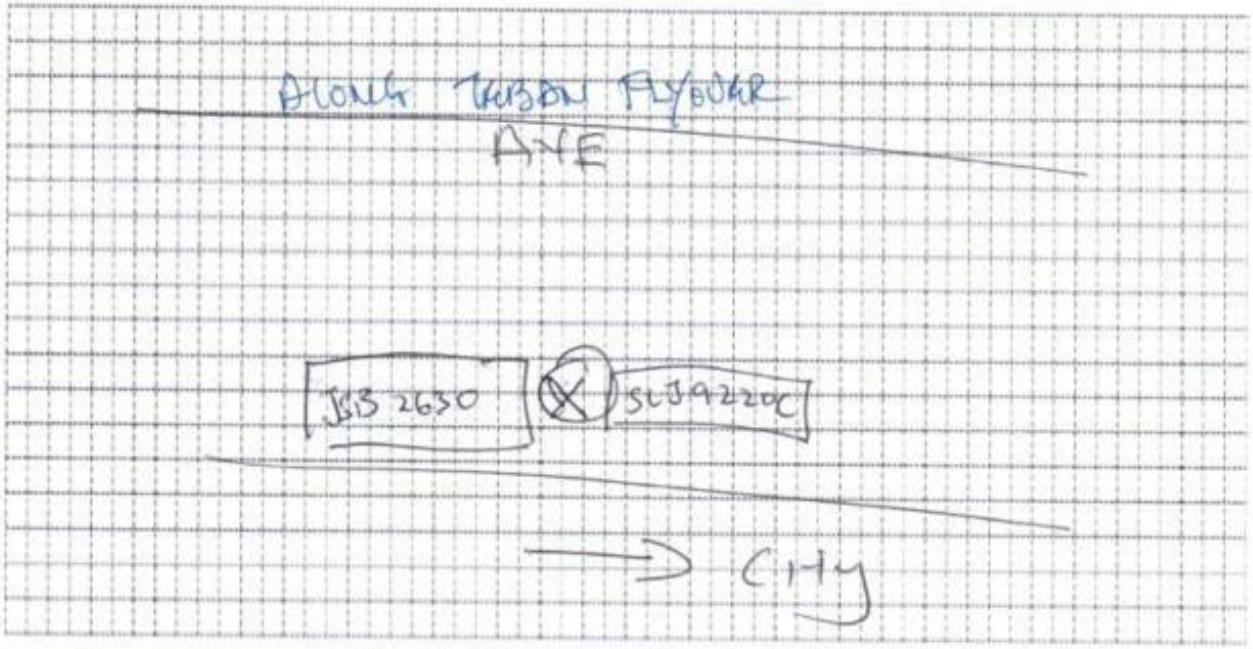
I understand , acknowledge, agree and consent that :
(a) My insurer, workshop and General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process by insurer (collectively the **"Personal Information"**) and any other personal information provided by me or who have insured vehicle(s) involved in the accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively reffered to as the **"Insurers"**), the insurer lawyers/ law firms, the Monetary Authority of Singapore and any relevent 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 or 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 Insurer's lawyer/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.

Policyholder's Signature / Date & Stamp

Driver's Signature (if driver is not the Policyholder) Date & Time

14/12/2015
Witnessed by Reporting Centre Personnel

Sketch Plan



Accident Sketch Plan

Describe Circumstance of the Accident

DURING DRIVING IN LANE 1, FRONT CARS STARTED BREAKING, I ENGAGED BRAKES OF MY CAR AND BEEN HIT FROM BEHIND.
SINCE KEPT DISTANCE FROM FRONT CAR NO FRONT CONTACT / DAMAGE OCCURD.

NO PERSONS INJURED, CHECK PASSANGER OF OTHER CAR, (DRIVER BAG WAS OPEN), AND CONTINUE TO DRIVE TO SAFE LOCATION / OFFICE WITHOUT PROBLEM.
CONTACTED COMPANY RENTAL + DMVOL.

POLICE REPORT T/2018/11/2166

Declaration

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

Policyholder's Signature / Date & Stamp

Driver's Signature (if driver is not the Policyholder) Date & Time
2018-11-30

Witnessed by Reporting Centre Personnel
14/12/18

POLICE REPORT

SINGAPORE POLICE FORCE

T/20181211/2106

Report No. T/20181211/2106

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:	Vide Report No.:	Station Diary No.:
11/12/2018 17:22		

Informant's Particulars

Name of Informant:			Address:
Pantelic Predrag			32 KEPPEL BAY DRIVE #07-60 CARIBBEAN AT KEPPEL BAY SINGAPORE 098651
ID Type / ID No.:			Contact No.:
FIN NO / G3453367P			Home/Office: Mobile: 91188359
Nationality:			Email:
SERBIAN			
Sex:	Age:	Date of Birth:	Type of Informant:
Male	58	06/07/1960	Driver
Race:			Language: / Institution / School Name:
Occupation:			Driving Licence Information:
Building and construction project manager			Class: Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 30/11/2018 17:00	Type of Location: Flyover
Location: Along Road 1 AYER RAJAH EXPRESSWAY Along Teban Flyover towards AYE				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 90 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color.	Condition	No of Passenger
JSB2630	Car				Seriously Damaged	3
SLJ9220C	Car				Seriously Damaged	0

Details of Person Involved

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

SINGAPORE
POLICE FORCE

T/20181211/2106

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

CONTINUATION OF REPORT

Driver 1			
Name	Takamaro Sasaki	ID No.	TK9581240JPN
Related Vehicle	JSB2630 (Car)	Contact No.	+601121710279
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

Driver 2			
Name	Pantelic Predrag	ID No.	G3453367P
Related Vehicle	SLJ9220C (Car)	Contact No.	91188359
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 Details.

On 30/11/2018 at about 1700hrs I was travelling on the most right lane of Teban Flyover along AYE in a rented car SLJ9220C from Goldbell Car Rental located at 10 Raeburn Park #02-01 S (088702). I noticed that the traffic was abruptly slowing in front of me.

Subsequently I heard a loud bang and noticed that my rear side of the vehicle was hit by a vehicle JSB2630. My rear bumper was badly damaged, whilst the other vehicle had its front bumper damaged and both airbags deployed. Both of my vehicle and the other driver managed to exchange particulars.

There were a total of 3 passengers in the foreign vehicle. The said driver informed that his wife was injured. No ambulance nor police attended to us. No government property damaged. I wish to state I am currently holding a international driving license from Serbia which expires 15/09/2020.

I am lodging this report as I was instructed to do so by the rental company.

Particulars as follows for the driver.
Name: Takamaro Sasaki
Malaysian ID Number: TK9581240JPN
Contact Number: +601121710279
Address: No 21-06 Block B Pangsapuri Jentayu Jln Jentayu 81200 Johor Bahru Johor
Company: Hirose Financial My Limited

POLICE FORCE

T/20181211/2106

Report No. T/20181211/2106

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

CONTINUATION OF REPORT

SINGAPORE POLICE FORCE

T/20181211/2106

Report No: T/20181211/2106

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

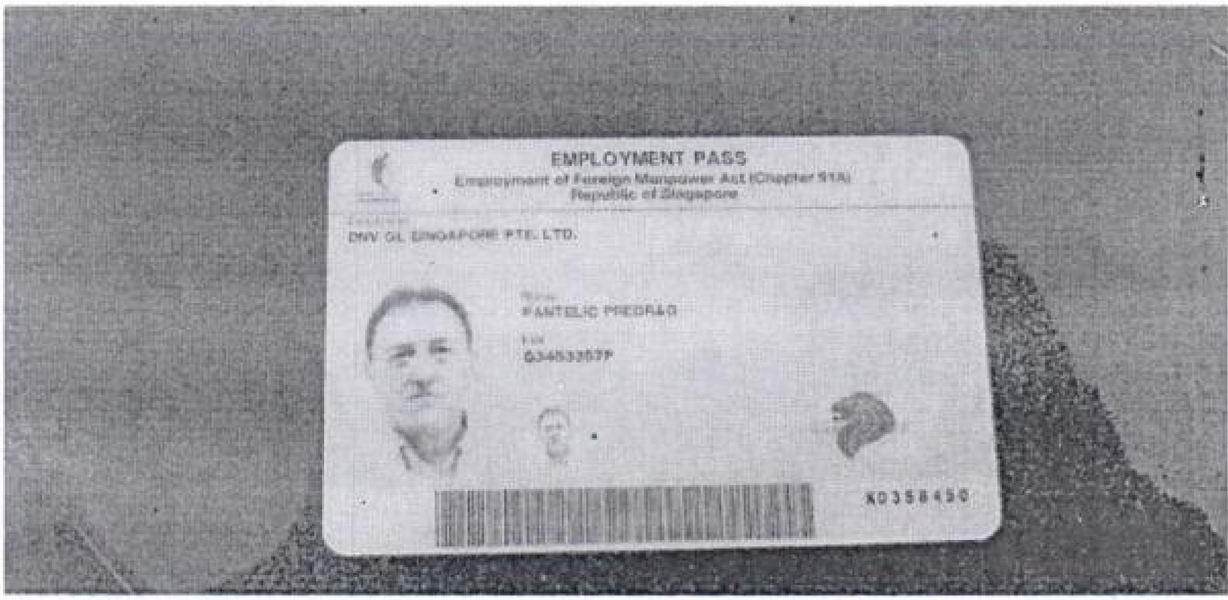
IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report: E / Sgt 2 MUHAMMAD KHAIRUDIN BIN KASSIM	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 11/12/2018 17:22
Officer In Charge Of Case: TP / AEIT / Sgt 2 SHARIFAH NOR FARIZAN BINTE SYED MOHD SAID Contact No.: 65476172	Classification Of Case:

Authentication Stamp

NP168

ID


EMPLOYMENT PASS
Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore
DNV GL SINGAPORE PTE. LTD.
PANTELIC PREDRAG
G3453367P


VISIT PASS
Immigration Regulations
PANTELIC PREDRAG
Download SGWorkPass App to check status
G3453367P
06-07-1980
M
SERBIAN
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.

12/14/2018

ID

REPUBLIKA SRBIJA
LA REPUBLIQUE DE SERBIE

SRB

MEĐUNARODNI AUTOMOBILSKI SAOBRAĆAJ
CIRCULATION AUTOMOBILE INTERNATIONALE

MEĐUNARODNA VOZAČKA DOZVOLA

PERMIS INTERNATIONAL DE CONDUIRE

E N° 098851

KONVENCIJA O SAOBRAĆAJU NA PUTEVIMA OD 8. NOVEMBRA 1968. GODINE
CONVENTION SUR LA CIRCULATION ROUTIERE DU HUIT NOVEMBRE 1968

Važi do 15.09.2020.
Valable jusqu'au

Izdata od AMK VRAČAR / 0942
Délivré par

U BEOGRAD
A

Na dan 15.09.2017.
Le

Broj nacionalne vozačke dozvole 000015331
Numéro du permis de conduire national

Pečat
Cachet

Président de l' AMSS

SRB

РЕПУБЛИКА СРБИЈА
REPUBLIC OF SERBIA
ВОЗАЧКА ДОЗВОЛА
DRIVING LICENCE

1. PANTELIĆ
2. PREDRAG
3. 06.07.1960. BEOGRAD
4a. 31.01.2014. 4b. 31.01.2024.
4c. PS VRAČAR
5. 000015331

10 BEOGRAD

9. AM B B1 E F M


PARTICULARS CONCERNING THE DRIVER
Surname 1
Other names* 2
Place of birth* 3
Date of birth* 4
Home address 5
CATEGORIES OF VEHICLES FOR WHICH THE PERMIT IS VALID
CATEGORIES AND SUBCATEGORIES OF VEHICLES, WITH THE CORRESPONDING CODES, FOR WHICH THE PERMIT IS VALID
Code of category - pictogram
Code of subcategory - pictogram
A
A1
B
A2
BE
B1
C
C1
CE
C1E
D
D1
DE
D1E
RESTRICTIVE CONDITIONS OF USE*
* Father's or husband's name may be inserted here.
* If the place of birth is unknown, leave blank.
* If date of birth is unknown, state approximate age on date of issue of permit.
* For example, "Must wear corrective lenses", "Valid only for driving vehicle No ....."
* Vehicle must be equipped in the manner by a one-legged person.


1 PANTIĆ
2 DRAGOJAO
3 BEOGRAD
4 05.07.1960.
5 BEOGRAD
CACHET
CACHET
A
A1
B
A2
BE
B1
C
C1
CE
C1E
D
D1
DE
D1E
Signature du titulaire
EXCLUSIONS
Le titulaire est déchu du droit de conduire sur le territoire
du
jusqu'au
à
le
EXCLUSIONS
Le titulaire est déchu du droit de conduire sur le territoire
du
jusqu'au
à
le

PHOTO

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Accident Photo

Addendum Sheet

GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: S66550020G / GST Reg. No.: M400017731

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MNA18161128 Vehicle Registration No: SLJ9720C

Name(as shown in NRIC) : PANTELIC PREDRAG NRIC/FIN/Passport No : G3453367P

(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate

Address : Singapore( )

Contact (Tel) : Mobile No. : 91188359

Email Address :

Date of Accident : 30/11/2018 Time of Accident : 17:00

Place of Accident : BOUNA TAKSIN FLYOVER TOWARDS BKK

Insurance Company : LIBERTY

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

DRIVER NAME : PANTELIC PREDRAG

Policyholder / Driver's Signature
Date:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:
Date: 27/12/2018