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 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

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		ACCIDENT STATEMENT
	Date Of Report	27/12/2018 09:21
	Date Of Accident	24/12/2018 14:30
	Exact Location Of Accident	CTE TWDS AYE B4 PIE(CHANGI EXIT)
	Country/State of Loss	SINGAPORE
	D	ETAILS OF OWN VEHICLE
	Vehicle Registration Number	GBD1051B
	Insured/Policyholder	
	Name Of Registered Owner	JAE PLASTIC PTE LTD
	Co Reg No	201313350H
	Email Address	NOEMAIL
	Mobile Phone No	
	Alternative Phone No	OFFICE-87556360
	Vehicle Particulars	
	Manufacturer	NISSAN
	Model	CABSTAR
	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	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	DMCPHQ18-003237
	Cover Note Number	
	Driver	
	Name of Driver	PREM KUMAR S/O SARKUNA RAJAH

NRIC No S7326744G

Date Of Birth 27/06/1973

Occupation OUTDOOR

Date Of Driving Pass 13/08/2004

Driving Experience 14 YEARS AND 4 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-87556360

Fax Number

Contact Number

EMail Address NOEMAIL

BLK 223 ANG MO KIO AVE 1 Address

#02-505

Postcode 560223

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

2

NO

NO

1

NO

General Information of the Accident

COLLISION - HEAD TO REAR Type Of Accident

Weather Conditions **CLEAR** Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

YES Was any other material or property damaged?

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?

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

PLS REFER TO THE ATTACHED STATEMENT.

Attachment(s)

YES Are accident photos available for attachment? Was there any video captured by Car Camera? NO NO

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

YN4076K

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties

COMMERCIAL VEHICLE Vehicle Category

Name of Driver TAY SOON HUAT

S1147722D NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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Accident Sketch Plan

SKETCH PLAN

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 the report being made available aforesaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

l 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 Fersonal 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 purposets)
 - 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.

TE PLASTICE AND THE PLA

Policyholder's Signature

Date 8 Time:

Driver's Signature

(if strive: it not the policyholder).

ste & Tyrne

Reporting Centre Personnel's Signature

Name

NRIE/FIN NO

Individual Statement

SKETCH PLAN	LIE towards A'E	
		T L A
	N & N &	
	Nolla	
VEN A: GBD 10513 -		
Veh3: YNHOACK		19
DESCRIBE CIRCUMSTANCES OF	THE ACCIDENT	
() 211/2/20 -0	1 11201 . 1 + 11	1 - MEtando AVE
J. 1 1 2 2018 (N OF	d 1430hrs, I was travelling	I slowed down my larry
JUST DELOIL FIELCHAM	gi exit) due to heavy traffic.	I STOWER ROOM IN TOTAL
amand eventually as	me to a stop Suddenly 1 (I Hat a strong impact from
The lear of My VC	ricle got out and realise	O THAT OUR B (TNAOTER)
Mad collisied with h	my vehicle rear portion.	
	<u> </u>	
DECLARATION .		
DECLARATION I/We declare to begoing particular	ars are true in ever <u>y resp</u> ect.	
**************************************	122	1
(0) (0)	7	Tym 37/12/18
Policyholder Supardre Date & Time:	Driver's Signature (If driver is not the policyholder)	Report Centre Personnel's Signature Name:
SERVED CONTR	Date & Time:	NRIC/FIN No.:











Identification Card







Private & Confidential

PREM KUMAR SIO SARKUNA RAJAH

APT BLK 223 ANG MO KIO AVENUE 1 902-505 SINGAPORE 560223

26/12/2018

% 阳旗

TRAFFIC POLICE SINGAPORE POLICE FORCE 10, UBI AVENUE 3 SINGAPORE 408865 Tel: 65470000

www.police.gov.sg

Class 4 -25/oct/2013.

You will receive your photocere driving licence by registered post within 10 to 14 working days from the date of application unless you made a special request to collect at Traffic Police at the time of application

You can drive while awaiting the delivery of your photocard driving licence

Please turn overleaf for important notes.

873267440 (3/4)

C001450051

\$25/-

(Please de not detach)

YOU CAN DRIVE WHILE AWAITING THE DELIVERY OF YOUR PHOTOCARD _ DRIMING LICENCE