

## 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 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	16/02/2019 17:47
Date Of Accident	26/01/2019 14:30
Exact Location Of Accident	ANG MO KIO STREET 11 AND ANG MO KIO AVE 4
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBA1760D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	KYM LEASING LLP
Co Reg No	T14LL1614L
Email Address	KARTIGESAN@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91718898
Alternative Phone No	OFFICE-91718898

### Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE MANUAL
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL USE
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	EQ INSURANCE COMPANY LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	DMCFHQ18-000044
Cover Note Number	N.A.

### Driver

Name of Driver	KARTIGESAN S/O SARAVANAN
NRIC No	S9333291A
Date Of Birth	08/09/1993
Occupation	OUTDOOR
Date Of Driving Pass	31/12/2018
Driving Experience	0 YEAR AND 0 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-91718898
Fax Number	
Contact Number	
EEmail Address	KARTIGESAN@GMAIL.COM

Address	NIL
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	SIDE SWIPE
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	2
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
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 [OTHER]	ANG MO KIO SOUTH N.P.C
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT REF:T/20190126/2174 Lodged at Ang Mo Kio South NPC. On 26/01/2019 at about 1430 hrs, I was travelling along Ang Mo Kio St 11. After passing the junction of St 11 and Avenue 4 near Blk 256, I was on the verge of completing my lane switching to the 1st lane. I then signal my intention to U turn, however while I was going to turn, a motorcycle pop out from no where on my right. There was a chevron on my right. Upon the impact, I then immediately stopped my vehicle. I alighted and make a check on the rider. I then carried up the bike and passerby came to help to move the bike to the side and called for the ambulance. I then assisted to help the rider up and bring him to sit on my van to rest. CPU officers were there at the scene almost immediately after the accident. After 10 minutes ambulance came to attend to the rider in my van. I then persuaded the rider to go to the hospital to make a check even though he did not to go. Traffic police then arrive shortly and took the statement of the rider. After that, they then took my statement. They then told me to make a police report.

#### Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBC288Y
Vehicle Make/Model/Colour	HONDA CBF150 / RED
Details Of Properties	NIL
Vehicle Category	MOTORCYCLE
Name of Driver	GU JIANSHE
NRIC/Passport Number	G2875587U
Contact Number	UNKNOWN
Address	

Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

1

DETAILS OF INJURED PERSON 1

Name  
Approximate Age  
Injuries Sustain  
Injured person in which vehicle?  
Were seat belts worn?  
Was this injured conveyed to hospital by ambulance?  
Address  
Postcode

GU JIANSHE  
  
  
FBC288Y  
  
YES

## Sketch Plan

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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.
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.

VERIFIED BY AJAX MARS  
REPORTING OFFICER

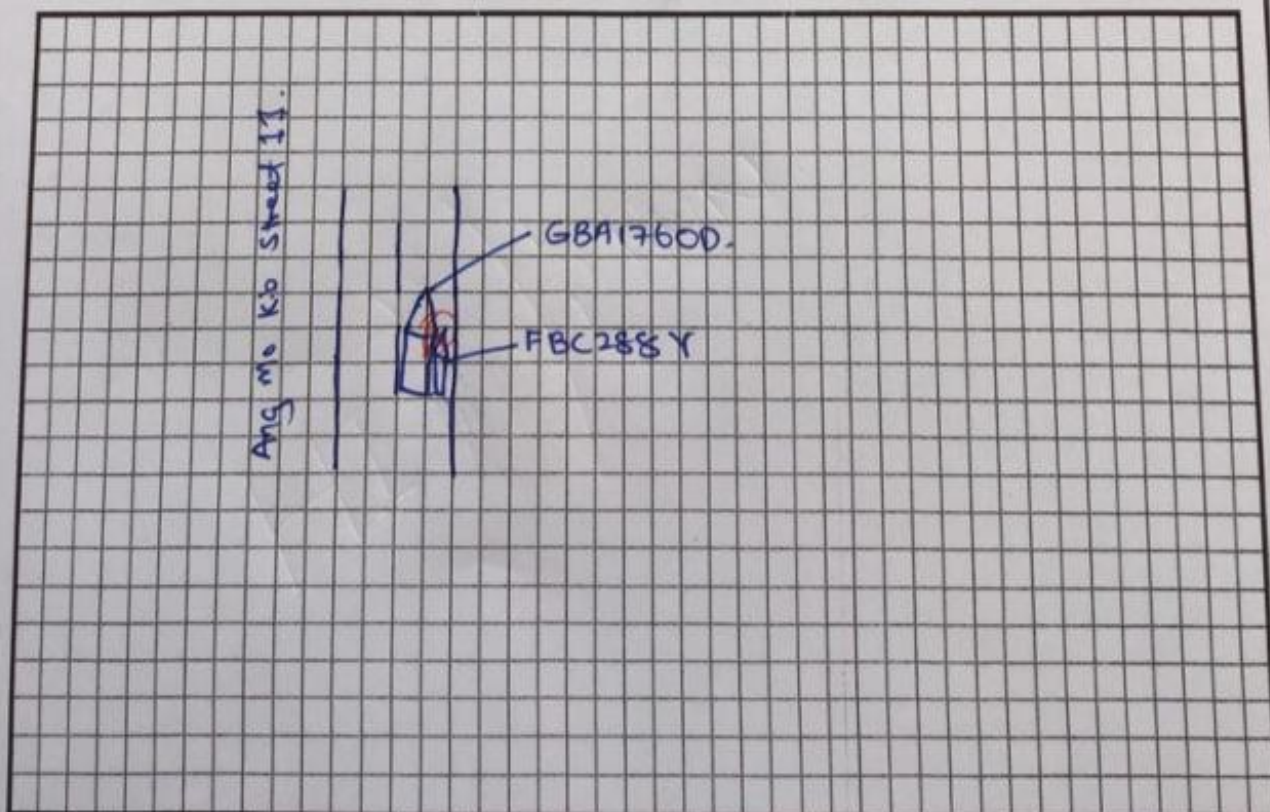
Mohamed Saifullah S/O Syed  
Masood

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre  
Personnel

### Sketch Plan



## POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20190126/2174

1 of 3

Police Station Of Origin:  
Ang Mo Kio South N.P.C  
81 Ang Mo Kio Avenue 3 SINGAPORE  
569929  
Tel No: 1800-4519999

Report No. T/20190126/2174

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 26/01/2019 22:00	Vide Report No.: F/20190126/0168	Station Diary No.: 122
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**Informant's Particulars**

Name of Informant: KARTIGESAN S/O SARAVANAN		Address: APT BLK 224C SUMANG LANE #02-95 SINGAPORE 823224	
ID Type / ID No.: NRIC NO / S9333291A		Contact No.: Home/Office: Mobile: 91718898	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 25	Date of Birth: 08/09/1993	Type of Informant: Driver
Race: Indian		Language: English	Institution / School Name:
Occupation: DELIVERYMAN		Driving Licence Information: Class: 3 Date of Expiry:	

**General Information of the Accident**

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 26/01/2019 14:30	Type of Location: X-Junction
Location: Along Road 1 Traveling Toward Road 2 ANG MO KIO STREET 11 ANG MO KIO AVENUE 4				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: No Traffic
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	Condition	No of Passenger
FBC288Y	Motorcycle				Slightly Damaged	0
GBA1760D	Van				Slightly Damaged	0

**Details of Person Involved**

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



# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20190126/2174

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Report No. T/20190126/2174

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81 Ang Mo Kio Avenue 3 SINGAPORE  
569929  
Tel No: 1800-4519999

## CONTINUATION OF REPORT

<b>Rider</b>			
Name	GU JIANSHE	ID No.	G2875587U
Related Vehicle	FBC288Y (Motorcycle)	Contact No.	NIL
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	Slight
<b>Driver</b>			
Name	KARTIGESAN S/O SARAVANAN	ID No.	S9333291A
Related Vehicle	GBA1760D (Van)	Contact No.	91718898
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

### Brief Details.

On 26/1/2019 at about 1430hrs, I was travelling along Ang Mo Kio St 11. After passing the junction of St 11 and Ave 4 near to Blk 256, I was on the verge of completing my lane switching to the 1st lane. I then signal my intention to Uturn however, while I was going to turn, a motorcycle pop out from no where on my right. There was a chevron on my right. Upon the impact, I then immediately stopped my vehicle. I alighted and make a check on the rider. I then carried up the bike and passerby came to help to move the bike to the side and also called for the ambulance. I then assisted to help the rider up and bring him to sit on my van to rest. CPU officers were there at the scene almost immediately after the accident. After 10 minutes, Ambulance came to attend to the rider in my van. I then persuaded the rider to go to the hospital to make a check even though he did not want to go. Traffic Police then arrived shortly and took the statement of the rider. After that, they then took my statement. They then told me to make a police report.

POLICE REPORT



SINGAPORE  
POLICE FORCE



T/20190126/2174

Police Station Of Origin:  
Ang Mo Kio South N.P.C  
81 Ang Mo Kio Avenue 3 SINGAPORE  
569929  
Tel No: 1800-4519999

3 of 3

Report No. T/20190126/2174

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:

F /

Sgt 2 JEREMY KHOO WEI LIANG

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

SI YEO CHUN JIAN

Contact No.: 65476213

Signature Of Informant:

*aki*

Date/Time:

26/01/2019 22:00

Classification Of Case:

Authentication Stamp  
NP168



Signature:

*[Signature]*

SN 005

Singapore Police Force

Driving License

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S9333291A



Name

KARTIGESAN S/O SARAVANAN

ச கார்த்திகேசன்

Race

INDIAN

Date of birth

08-09-1993

Sex

M

Country of birth

SINGAPORE



REPUBLIC OF SINGAPORE

DRIVING LICENCE



Licence Number

S9333291A

Name

KARTIGESAN S/O SARAVANAN

Birth Date

08 Sep 1993

Issue Date

31 Dec 2018



002886699B



Driving License

42



NRIC No: S9333291A



Date of Issue  
11-09-2008

APT BLK 224C SUMANG LANE #02-95  
SINGAPORE 823224

NRIC No: S9333291A      Date: 09/01/2018

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(S)

EFFECTIVE DATE

Class 3      Motor cars with unladen weight  $\leq$  3000kg with  $\leq$  7 passengers, exclusive of driver; and other motor vehicles with unladen weight  $\leq$  2500kg      31 Dec 2018

NP 428A

Licence No: S9333291A

