

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	17/04/2019 10:13
Date Of Accident	18/02/2019 07:35
Exact Location Of Accident	PIE BEFORE BALESTIER EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBB8663A
Insured/Policyholder	
Name Of Registered Owner	NTH CONSTRUCTION PTE LTD
Co Reg No	198403324N
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62916826

Vehicle Particulars

Manufacturer	NISSAN
Model	CABSTAR-3.0 D F24 (M)
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	DMCVSN3033071803
Cover Note Number	01/10/2018 - 30/09/2019

Driver

Name of Driver	RAVICHANDRAN JAYA MURUGAN
Passport No/FIN	G2943832W
Date Of Birth	30/01/1995
Occupation	OUTDOOR
Date Of Driving Pass	02/07/2018
Driving Experience	0 YEAR AND 7 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-81234665
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	C/O 13 KAKI BUKIT ROAD 4 #03-13 BARTLEY BIZ CENTRE
Postcode	417807
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	COLLISION - HEAD TO REAR
Weather Conditions	RAINING
Road Surface	WET

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?	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)	3
Passenger 1	NAME: : SIDDIQUE GENDER: : MALE
Passenger 2	NAME: : ABUL KALAM GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	SERANGOON GARDENS NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: 51 SERANGOON GARDEN WAY , POSTCODE: 555947 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2879999 - FAX NO: 62815969
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO STATEMENT

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	SLM6103L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE HIRE
Name of Driver	

NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver) 1

Sketch Plan

SKETCH PLAN

VEHICLE NO.: 5BB 8663A
INSURER: Ching
DATE & TIME: 17/02/19 @ 0735

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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:

R. J. S. S. S.
Driver's Signature
(If driver is not the policyholder)
Date & Time: 17/04/19



Reporting Centre Personnel's Signature
Name: Sonyu (AMK)
NRIC/FIN No.: 17/04/19

Sketch Plan #2

SKETCH PLAN

Sketch Plan showing vehicle positions and directions on a grid. The grid is labeled 'Pit before Balestian exit' on the left. Arrows indicate the direction of travel. Vehicle A is labeled 'A: 9BB 8663A (w/ 2 passengers)' and Vehicle B is labeled 'B: SLM 6103L (alone)'. The vehicles are positioned on the grid, with A and B marked by boxes and arrows indicating their movement.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Vehicle No: 9BB 8663A (China)
 Date & Time: 18/02/19 @ 0735 (raining/wet)

Motor car SLM6103L Steered into my lane and e-brake instant. At such i quickly follow to brake too but couldn't in time due to wet road surface as well. My lorry front portion had collided onto the rear of SLM6103L. No one was injured.

Note : Please note that your insurer may have 14days Time Frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check with your policy for more information.

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.:

GIARMC SketchPlanForm_V3 () Claim Own Policy () Claim Third Party ☒ Reporting Only
 () Claim OD/TP at other workshop ()

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Annex E

NOTICE OF COMPLIANCE

This is to confirm that Ravichandran Jaya Murugan,
NRIC/FIN G2943832W, has reported to the Police a non-injury traffic accident
which occurred at Along PIE before Balestier Exit
on 18/02/2019 at 0735HRS involving the following vehicles:

GBB8663A
SLM6103L

- 2 If this accident was reported to the Police within 24 hours of its occurrence,
Then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: SGT T150028 Loghanathan

Date: 16/02/2019 Time: 1245 hrs

S/D Ref: 09

Police Post/Unit: Serangoon Garden NPP

Original – to be issued to informant
Duplicate – to be submitted to Traffic Police

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Version as of 15 Jan 2002


SERANGOON GARDEN NPP
No. 31 Serangoon Way
Singapore 555947
Tel No: 1800 287 0909
Fax: 6281 5060

WORK PERMIT
Employment of Foreign Manpower Act (Chapter 81A)
Regulation 11 (Single entry)

Company
VIM CONSTRUCTION PTE LTD

Photo

Name
RAYCHANDRAN JAYA MURUGAN

Pass Permit No
G 2943632W

Trade
CONSTRUCTION

Barcode

40128824

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number
G 2943632W

Name
RAYCHANDRAN JAYA MURUGAN

Date of Birth
30 Jan 1995

Valid Till
30 Jul 2014

Valid Till
30 Jul 2014

Barcode

VISIT PASS
Immigration Regulations

Name
RAYCHANDRAN JAYA MURUGAN

Photo

DOB
30-01-1995

Date of Birth
30-01-1995

Sex
M

Pass No
G 2943632W

MA TYLE ACURNEY HOLD CO LTD

Barcode

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

EXPIRY DATE
30 Jul 2014

Class 3
Motor cars with a laden weight not exceeding 2000kg with up to 7 passengers, excluding a motor and cycle trike
Vehicle with a laden weight not exceeding 2000kg

Barcode

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



SCENE PHOTO

