

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	27/02/2019 13:42
Date Of Accident	26/02/2019 20:30
Exact Location Of Accident	MANDAI ROAD LAMP POST269
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YP1895Y
Insured/Policyholder	
Name Of Registered Owner	WYN CONSTRUCTION SERVICES PTE LTD
Co Reg No	201434621C
Email Address	ARANGARAJAN@TEAMBUILD.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65867077

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	FUSO
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	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	ERGO INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	DMFP18S013443
Cover Note Number	

Driver

Name of Driver	RASU SANTHOSKUMAR
Passport No/FIN	G6976468T
Date Of Birth	20/07/1991
Occupation	OUTDOOR
Date Of Driving Pass	19/09/2013
Driving Experience	5 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84115713
Fax Number	
Contact Number	OFFICE-65867077
E-Mail Address	NOEMAIL

Address	32 SUNGEI KADUT WAY #02-01
Postcode	728787
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	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	JPW5390 (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	CHOA CHU KANG NPC
Police Station Address	ROAD: 20 CHOA CHU KANG ST 52 #01-02 , POSTCODE: 689286 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO SKETCH PLAN

Attachment(s)

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

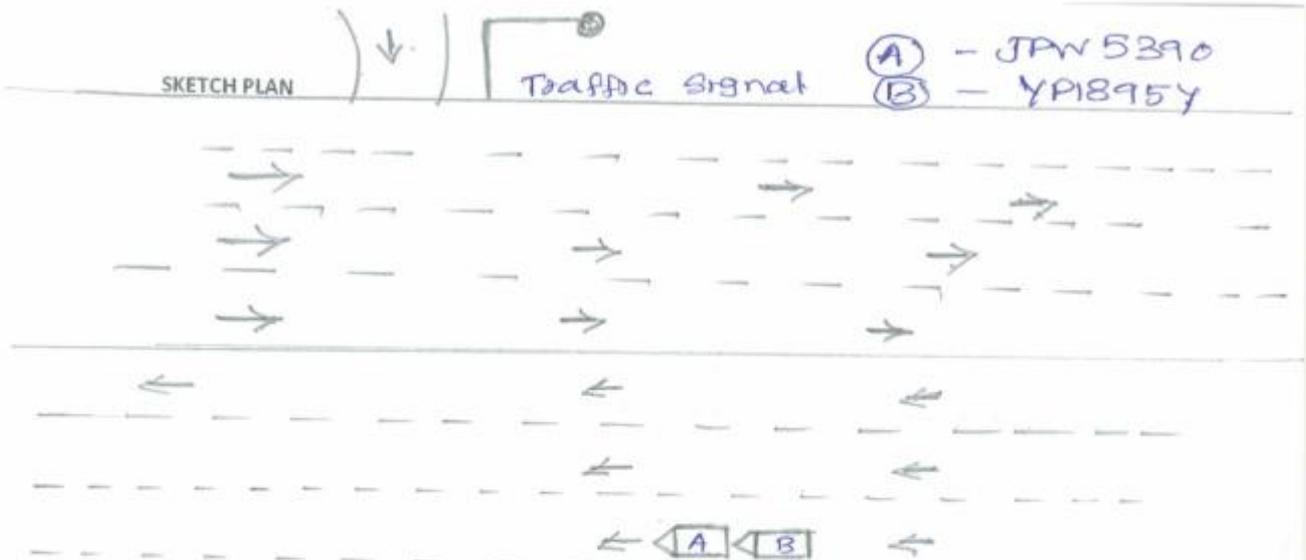
DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	JPW5390
Vehicle Make/Model/Colour	HONDA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LEE ENG JIE
NRIC/Passport Number	A51421682
Contact Number	+60127287117
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on 26.02.2019 at about 2030 hours
 I was driving my company's lorry bearing
 YP1895Y along mandai Road. While I was
 driving near Lamp Post 269, a Malaysian car
 bearing JPW 5390 was ahead of me in the
 same Lane, while driving the Malaysian car
 suddenly jammed the brake for no proper reason.
 I was not able to brake on time thus I hit the
 Malaysian car's rear side, that time
 traffic light green. No one was injured in
 the accident. The Accident was captured in
 my company lorry's in build camera (CCTV).
 The SD card containing the footage of the
 Accident was handed over to Traffic Police
 Department.

DECLARATION

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



Policyholder's Signature

P. Suresh Kumar
 Driver's Signature

Reporting Centre Personnel's Signature

SKETCH PLAN

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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.



Policyholder's Signature

Date & Time: 11.38am

27.02.2019

R. Suresh Kumar

Driver's Signature

(If driver is not the policyholder)

Date & Time: 11.38am

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

DRIVING LICENSES & WORK PERMIT

WORK PERMIT
Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore

Employer
WYN CONSTRUCTION SERVICES PTE. LTD.

Name
RASU SANTHOSHKUMAR

Work Permit No. **035468765** Sector: **CONSTRUCTION**

I230016C
20-12-2019

X1069922



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **G 6976468 T**

Name:
RASU SANTHOSHKUMAR

Birth Date: **20 Jul 1991**

Issue Date: **02 Aug 2018**

Valid Till: **18/09/2023**

002830483E



VISIT PASS
Immigration Regulations

Name
RASU SANTHOSHKUMAR

FIN
G6976468T

Date of Birth: **20-07-1991** Sex: **M**

Nationality
INDIAN

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.

Download SGWorkPass App to check status





YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:

CLASS	VEHICLE CLASSIFICATION	EFFECTIVE DATE
Class 2D	Motorcycles >= 200 cc	18 Sep 2013
Class 3	Motor cars with unladen weight <= 3000kg with <= 7 passengers, exclusive of driver, and other motor vehicles with unladen weight <= 2500kg	18 Sep 2013

Licence No: **G6976468T**

IP: 478A

CERTIFICATE OF INSURANCE

ERGO

FLEET COMMERCIAL VEHICLE

CP1
N SB
A000016
Cov.Type: C

CERTIFICATE OF INSURANCE
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

CERTIFICATE NO.

DMFP18S013443

1) Index Mark and Registration
No. of Vehicle:

YP1895Y

2) Name of Policyholder:

WYN CONSTRUCTION SERVICES PTE. LTD.

3) Commencement Date of Insurance:

26 December 2018

EXCESS: (SECTION I) . SGD500.00

YNG&INEXP DRV (SEC I) SGD2,500.00

EXCESS: WINDSCREEN SGD100.00

4) Expiry Date of Insurance:

25 December 2019

5) Persons or Classes of Persons entitled to drive

1) Any person who is driving on the Policyholder's order or permission

6) Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

7) Limitations as to Use

1) Use in connection with the Policyholder's business.

2) Use for carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.

3) Use for social domestic and pleasure purposes.

This policy does not cover

1) Use for hire or reward racing pace-making reliability trial or speed-testing.

2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia) are not to be included under these headings (for Items 6 & 7)

WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Legend

Cov Type:

C - Comprehensive

F - Third Party, Fire & Theft

T - Third Party

For and on behalf of ERGO Insurance Pte. Ltd.
Approved Insurer



POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190227/2036

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999

1 of 3

Report No. T/20190227/2036

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 27/02/2019 10:52		Vide Report No.:		Station Diary No.: 25	
Informant's Particulars					
Name of Informant: RASU SANTHOSHKUMAR			Address: 32 Sungei Kadut Way SINGAPORE 728787		
ID Type / ID No.: FIN NO / G6976468T			Contact No.: Home/Office: Mobile: 84115713		
Nationality: INDIAN			Email:		
Sex: Male	Age: 27	Date of Birth: 20/07/1991	Type of Informant: Driver		
Race: Indian			Language:	Institution / School Name:	
Occupation: CONSTRUCTION WORKER CUM DRIVER			Driving Licence Information: Class: 2B,3		Date of Expiry:

General Information of the Accident				
Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 26/02/2019 20:30	Type of Location:
Location: Along Road 1 MANDAI ROAD Along Mandai Road (Lamppost 269)				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume: Moderate
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
JPW5390	Car					0
YP1895Y	Lorry					0

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190227/2036

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999

2 of 3

Report No. T/20190227/2036

CONTINUATION OF REPORT

Brief Details.

On 26/02/2019 at about 2030hrs, I was driving my company's lorry bearing YP 1895Y along Mandai Road. While I was driving near lamp post 269, a Malaysian car bearing JPW 5390 was ahead of me in the same lane. While driving, the Malaysian car suddenly jammed the brake for no proper reason. I was not able to brake on time, thus I hit the Malaysian car's rear side. No one was injured in the accident. The accident was captured in my company lorry's in build CCTV camera. The SD card containing the footage of the accident was handed over to Traffic Police Department.

The particulars of the Malaysian car (JPW 5390) as follows:

Name: Lee Eng Jie
Malaysian IC No: 870807015537

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190227/2036

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999

3 of 3

Report No. T/20190227/2036

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: J / <i>[Signature]</i> Staff Sgt IBRAHIM SHA S/O M ABDUL RAHIM
Signature Of Interpreter: Not applicable
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151

Signature Of Informant: <i>[Signature]</i>
Date/Time: 27/02/2019 10:52
Classification Of Case:

Authentication Stamp

Accident Photo



Accident Photo



THIRD PARTY DETAILS

