

## 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	08/06/2019 09:59
Date Of Accident	07/06/2019 04:30
Exact Location Of Accident	RAFFLS QUAY & FINLAYSON GREEN
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBC2046R
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ACHIEVA VENDING PTE LTD
Co Reg No	200803799K
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97902626
Alternative Phone No	OFFICE-84079488

### Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE
Exact Purpose for which vehicle was being used at time of accident	WORK
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
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### Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN3038871804
Cover Note Number	

### Driver

Name of Driver	MUNICHAMY MANIKANDAN
Passport No/FIN	G8371381Q
Date Of Birth	10/05/1984
Occupation	OUTDOOR
Date Of Driving Pass	13/02/2013
Driving Experience	6 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84079488
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 619 BEDOK RESERVOIR ROAD #04-1386 LOYANG INDUSTRIAL ESTATE
Postcode	470619
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 - CROSS JUNCTION
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?	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	PAYA LEBAR NPP
Police Station Address	<b>ROAD:</b> 114 HOUGANG AVE 1 #01-1270 , <b>POSTCODE:</b> 530114 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

On 07/06/2019 at about 0430hrs, I was driving my van, vehicle number GBC2046R along Raffles Quay. I then approached an T junction between Finlayson Green and Raffle Quay and saw that the traffic light was yellow in my favour, as such I proceeded on. I was still travelling straight when this taxi, vehicle number SHD272R came from my right and collided into the right side of my van . Upon the collision, I was still conscious. I came out of my van to take a look what has happened. The taxi driver was also conscious, he then called for ambulance services. We then took photo of each respective vehicle. I was not injured in anyway. Subsequently, the ambulance arrived at scene and made a check on the taxi driver. Traffic Police arrived subsequently and spoke to both of us. The traffic police then took my van's in car CCTV for investigation purposes, the taxi driver was then conveyed by ambulance. The traffic police then gave me a case card and told me to lodge a traffic accident report. I, then drove off from scene.

#### 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	SHD272R
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	

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

DETAILS OF INJURED PERSON 1

Name  
Approximate Age  
Injuries Sustain  
Injured person in which vehicle? SHD272R  
Were seat belts worn?  
Was this injured conveyed to hospital by ambulance? YES  
Address  
Postcode

## Sketch Plan

### SKETCH PLAN

#### 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. The 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 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: 7/6/19 1750 hr

Driver's Signature

(If driver is not the policyholder)

Date & Time: 7/6/19 1750 hr

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

# Sketch Plan #2

## SKETCH PLAN

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to the attached Police Report: T/20190607/2143.

## DECLARATION

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

Policyholder's Signature

Date & Time: 7/6/19 17:00 hr

Driver's Signature

(If driver is not the policyholder)

Date & Time: 7/6/19 17:50 hr

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

## POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20190607/2145

1 of 3

Report No. T/20190607/2145

Police Station Of Origin:  
Paya Lebar NPP  
114 Hougang Avenue 1 #01-1270  
SINGAPORE 530114  
Tel No: 1800-2899999

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 07/06/2019 17:26		Vide Report No.: A/20190607/0037		Station Diary No.: 34	
<b>Informant's Particulars</b>					
Name of Informant: MUNICHAMY MANIKANDAN			Address: APT BLK 619 BEDOK RESERVOIR ROAD #04-1386 LOYANG INDUSTRIAL ESTATE SINGAPORE 470619		
ID Type / ID No.: FIN NO / G8371381Q			Contact No.: Home/Office: Mobile: 84079488		
Nationality: INDIAN			Email:		
Sex: Male	Age: 35	Date of Birth: 10/05/1984	Type of Informant: Driver		
Race: Indian			Language:		Institution / School Name:
Occupation: DRIVER			Driving Licence Information: Class: 2B,3		Date of Expiry: 12/02/2023

## General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 07/06/2019 04:30	Type of Location: T-Junction
Location: Junction of Road 1 and Road 2 FINLAYSON GREEN RAFFLES QUAY				
Weather: Raining		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

## Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBC2046R	Van					0
SHD272R	Car					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/20190607/2145

Police Station Of Origin:  
Paya Lebar NPP  
114 Hougang Avenue 1 #01-1270  
SINGAPORE 530114  
Tel No: 1800-2899999

2 of 3

Report No. T/20190607/2145

## CONTINUATION OF REPORT

Driver			
Name	MUNICHAMY MANIKANDAN	ID No.	G8371381Q
Related Vehicle	GBC2046R (Van)	Contact No.	84079488
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: 12/02/2023
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

### Brief Details.

On 07/06/2019 at about 0430hrs, I was driving my van, vehicle number GBC2046R along Raffles Quay.

I then approached an T junction between Finlaysson Green and Raffle Quay and saw that the traffic light was yellow in my favour, as such I proceeded on.

I was still travelling straight when this taxi, vehicle number SHD272R came from my right and collided into the right side of my van.

Upon the collision, I was still conscious. I came out of my van to take a look what has happened. The taxi driver was also conscious, he then called for ambulance services. We then took photo of each respective vehicle. I was not injured in anyway.

Subsequently, the ambulance arrived at scene and made a check on the taxi driver. Traffic Police arrived subsequently and spoke to both of us. The traffic police then took my van's in car CCTV for investigation purposes, the taxi driver was then conveyed by ambulance. The traffic police then gave me a case card and told me to lodge a traffic accident report. I then drove off from scene.

POLICE REPORT



SINGAPORE  
POLICE FORCE



T/20190607/2145

3 of 3

Report No. T/20190607/2145

Police Station Of Origin:  
Paya Lebar NPP  
114 Hougang Avenue 1 #01-1270  
SINGAPORE 530114  
Tel No: 1800-2899999

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 KOH PEI QI

Signature Of Informant:

M. H. i

Signature Of Interpreter:

Not applicable

Date/Time:

07/06/2019 17:26

Officer in Charge Of Case:

TP / GIT /

Sr Staff Sgt SHAHRUL NIZAM BIN SAMARRI

Contact No.: 65476904

Classification Of Case:

Authentication Stamp

NP168

Singapore Police Force



IC & DRIVING LICENSE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **G8371381Q**  
Name: **MUNICHAMY MANIKANDAN**

Birth Date: **10 May 1984**  
Issue Date: **01 Feb 2018**  
Valid Till **12/02/2023**

002769467E




**S PASS**  
Employment of Foreign Manpower Act (Chapter 91A)  
Republic of Singapore

Employer  
**ACHIEVA VENDING PTE. LTD.**

Name  
**MUNICHAMY MANIKANDAN**

S Pass No. **0 34518106** Sector: **SERVICE**



0 34518106

N° 11479



TRAFFIC INVESTIGATION BRANCH  
TRAFFIC POLICE  
10 UBI AVENUE 3  
SINGAPORE 408865  
Fax: 65474749

CASE CARD

REPORT NO.: A/20190607/0037  
Traffic Accident along Finlayson Green x Raffles Quay  
involving vehicles: 4RP GB C2046R / SHD272B  
on 07/06/2019 at about 0457 (am/pm).

With reference to the above, you are advised to lodge an accident report online via the SPF Electronic Police Centre website (<http://www.police.gov.sg/epc>) within 24 hours.

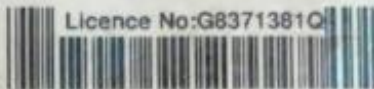


# IC & DRIVING LICENSE

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

		EFFECTIVE DATE
Class 2B	Motorcycles =< 200 cc	13 Feb 2013
Class 3	Motor cars with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg	13 Feb 2013

NP 428A



Licence No:G8371381Q

## VISIT PASS Immigration Regulations

10-05-2018

Name  
MUNICHAMY MANIKANDAN

FIN  
G8371381Q

Date of Birth  
10-05-1984

Sex  
M

Nationality  
INDIAN

Download SGWorkPass  
App to check status



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.



You are required to be present at Traffic Police on \_\_\_\_\_  
at about \_\_\_\_\_ am/pm to see the Investigation Officer to assist in the  
investigation to the traffic accident.

2. Please bring along your :-
  - a) Identity card/Passport/Work Permit
  - b) Driving Licence/Vocational Licence
  - c) Vehicle Insurance/Medical Certificate
  - d) Any video footage
  - e) Any other relevant documents/Witnesses (if any)

*Lodge 4P168-  
Traffic Accident  
Report.*

3. If you are unable to keep to the appointment, kindly contact the Investigation Officer:

Name: IO Syed.

Contact: 65476090



**中国太平保险(新加坡)有限公司**  
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.  
Co. Reg. No. 200206384E

MZ300/C  
R SN  
AN0421A  
Cov.Type: C

MOTOR COMMERCIAL VEHICLE

**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)

ORIGINAL

CERTIFICATE No.	DMCVSN3038871804	Engine No :1KD2107888
		ChaN0:JTFHT02P700076911
1. Index Mark and Registration Number of Vehicle	GBC2046R	AUTOSAFE =====
2. Name of Policy Holder	M/S ACHIEVA VENDING PTE LTD	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	24 August 2018	Excess Sect I ..... S\$500.00 EX ON WINDSCREEN ..... S\$100.00
4. Date of Expiry of Insurance	23 August 2019	
5. Persons or Classes of Persons entitled to drive*	Any person who is driving on the Policyholder's order or with their permission.  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.	
6. Limitations as to use:	(1) Use in connection with the Policyholder's business. (2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business. (3) Use for social, domestic or pleasure purposes. The Policy does not cover. (1) Use for hire or reward or racing, pace-making, reliability trial or speed testing. (2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.	
HIRE PURCHASE CO. : UNITED OVERSEAS BANK LIMITED AS HP OWNER * 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.		

**I/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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: VITESSE SOLUTIONS  
Authorised Officer

Authorised Signatory



Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo





Accident Photo

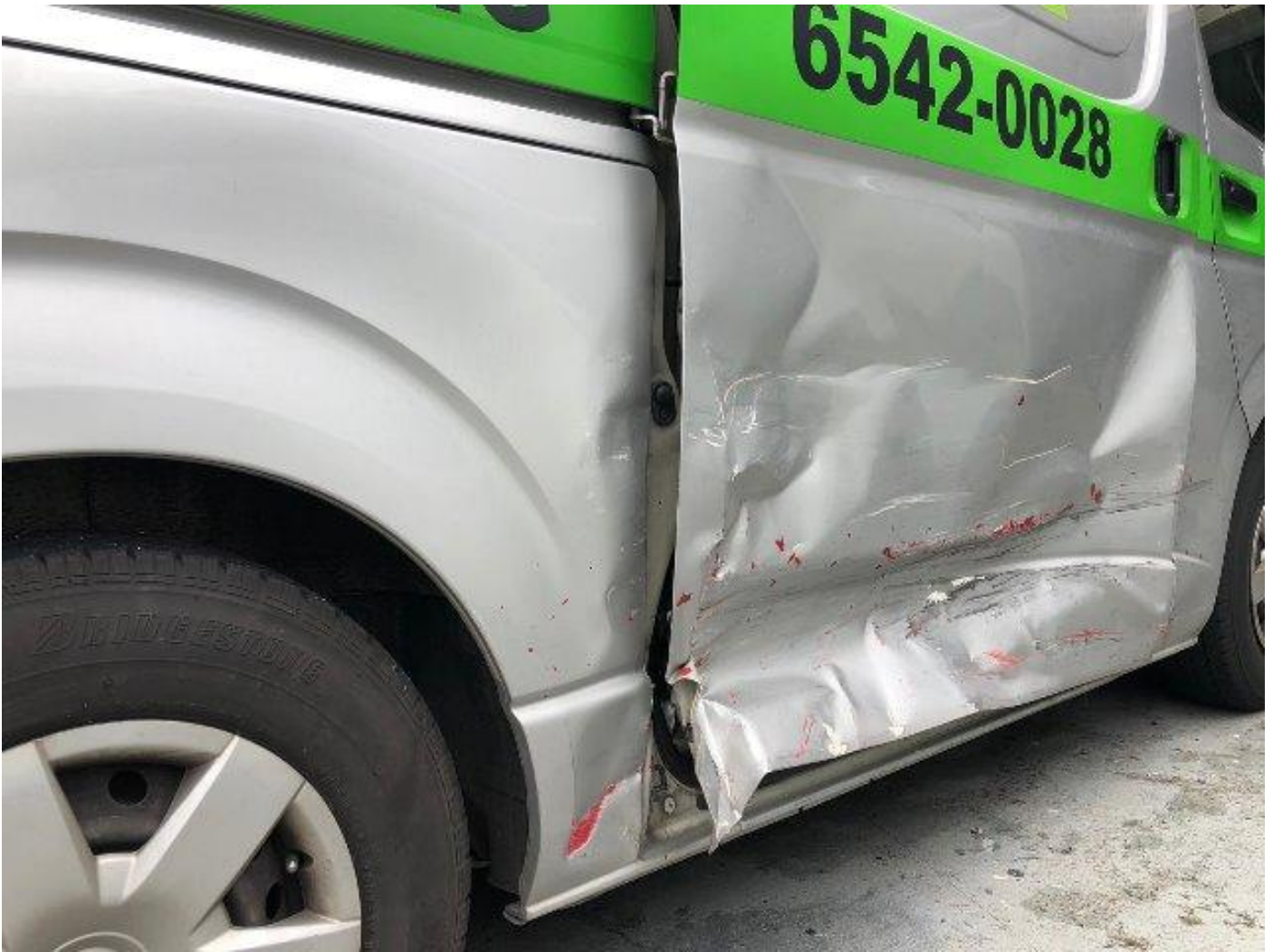


Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo

