

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	29/06/2019 15:01
Date Of Accident	29/06/2019 11:30
Exact Location Of Accident	ALONG BARTLEY VIADUCT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBJ2562E
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Insured/Policyholder

Name Of Registered Owner	WEI LONG ENGINEERING & CONSTRUCTION PTE. LTD.
Co Reg No	200819620E
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-82858776

Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL

Are you claiming under your own insurance policy for repair to your vehicle?	NO
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If No, Please state action to be taken	THIRD PARTY
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Vehicle Category	COMMERCIAL VEHICLE
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Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5107700233
Cover Note Number	-

Driver

Name of Driver	NATARAJAN VENKATESAN
NRIC No	G8445119W
Date Of Birth	05/07/1983
Occupation	OUTDOOR
Date Of Driving Pass	05/09/2017
Driving Experience	1 YEAR AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82858776
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	13 BARTLEY BIZ CENTRE KAKI BUKIT RD 4 #03-14
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	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?	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)	2
Passenger 1	NAME: : JIBON GHOSH
	GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO ATTACHED 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	SLX1364A
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
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	NATARAJAN VENKATESAN
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	GBJ2562E
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

DETAILS OF INJURED PERSON 2

Name	JIBON GHOSH
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	GBJ2562E
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

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.

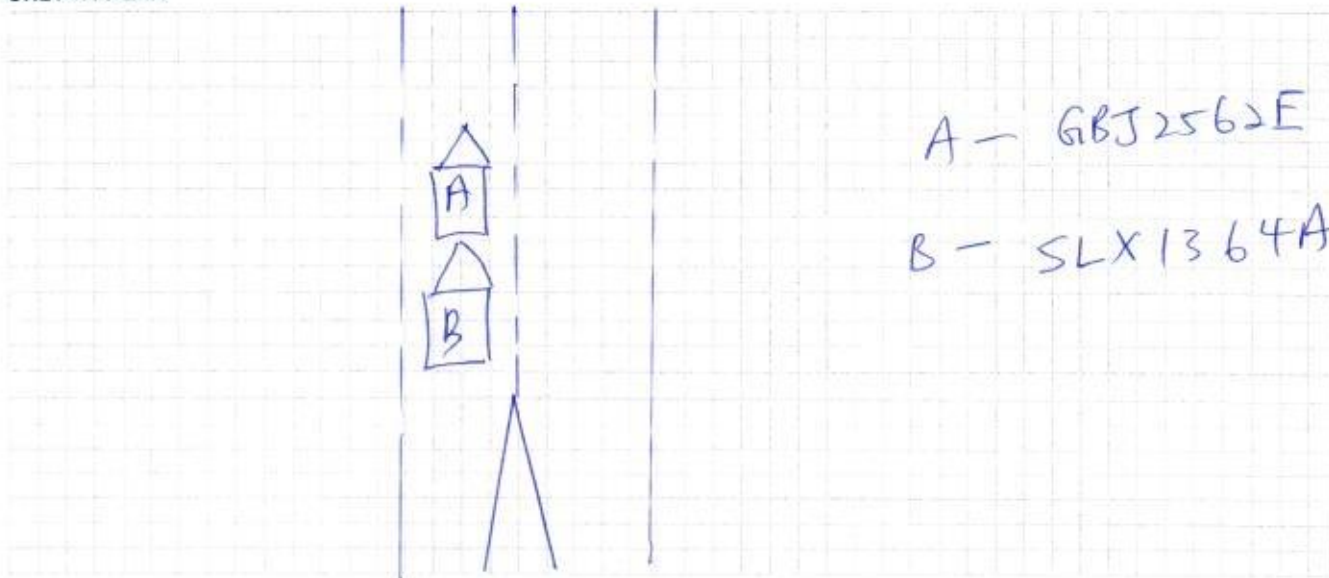


Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on the stated date and time, I was driving my vehicle along Bartley viaduct. Suddenly vehicle B hit on my rear portion.

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.:

Date of Accident

: 29/6/19 Accident Time: 11.30am (24-HR-Format)

Accident Place

: Along Bartley viaduct

Vehicle. No. (Car Plate No.)

: GBJ2562E Make/Model:

Insurance Company

: NTUC Policy No:

Owner or Company Name /IC No.

: Wei Long Engineering & Construction P/L

Owner or Company Contact No.

: Owner's Hp Company Tel

DRIVER'S Name / IC No.

: Natarajan Venikatesan

DRIVER'S Date Of Birth

: 6/7/1983 DRIVER'S License Pass Date 5/9/2017

Relationship of Owner & Driver

: Spouse \ Parents \ Children \ Sibling \ Employee \ Others:

DRIVER'S Address

: 13 Bartley Biz Centre #03-14 Kak: Bukit

DRIVER'S Contact No. / Alt No.

: 1) 82858776 2) Road 4 S 417807

DRIVER'S Occupation

: INDOOR \ OUTDOOR (e.g. working inside or outside office)

Email Address

:

Weather & Road Surface

: CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET

Reporting Type

: Reporting Only \ Claim Other Party \ Claim Own Insurance

Number of Passengers (Including Driver):

: 2 person

Was there any video Captured by car camera: YES \ NO

Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose

Any Injury (If YES, Pls state):

: yes

Other Party Driver's Particular (if any)

Vehicle. No:

: SLX 1364A (AIG)

Vehicle. No:

Vehicle Make/Model:

Vehicle Make/Model:

Name Driver:

Name Driver:

IC No. Driver/Contact:

IC No. Driver/Contact:

* NEW - Passenger's name & gender:

: JIBON Ghosh (M)

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

Employer
WEI LONG ENGINEERING & CONSTRUCTION PTE. LTD.

Name
NATARAJAN VENKATESAN

Work Permit No.
0 34633053

Sector
CONSTRUCTION

For LKK/NAC Use Only

K1270309

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number
G8445119W

Name
NATARAJAN VENKATESAN

Birth Date
05 Jul 1983

Issue Date
14 Mar 2016

Valid Till
20/03/2021

002546902G

VISIT PASS
Immigration Regulations

Name
NATARAJAN VENKATESAN

FIN
G8445119W

Date of Birth
05-07-1983

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

21-03-2019

For LKK/NAC Use Only

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

	EFFECTIVE DATE
Class 2B Class 3 Motorcycles <= 200 CC Motor cars <= 3500 kg with <= 7 passengers, exclusive of the driver, and motor tractors/vehicles <= 2500 kg	11 Mar 2011 05 Sep 2017

S / No. 9000273243

G8445119W

NP 428A

Licence No: G8445119W

Hello, NAC_PAYA_UBI_800601

Change Language Change Password Log Out

My Desktop
Notice of Loss

Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="29/06/2019 14:59"/>
Vehicle No.(For Motor)	<input type="text" value="GBJ2562E"/>	Certificate Number	<input type="text"/>

Search

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5107700233		WEI LONG ENGINEERING & CONSTRUCTION PTE. LTD.	200819620E	GCV	Preferred Workshop Plan	GBJ2562E	GBJ2562E	01/03/2019	29/02/2020

Continue

Claim Handling

Accident MT/1051195

Policy No.	5107700233	Vehicle No.	GBJ2562E	GST Registration No.	
Certificate No.					
Policyholder Name	WEI LONG ENGINEERING & CONSTRUCTION PTE. LTD.			Policyholder NRIC	200819
Product Code	COMMERCIAL VEHICLE INSURAN	Cover Type	Preferred Workshop Plan	Loading	0
Contact No.(Mobile)	82858776	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KPK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	10	Private Hire	No

▼ Accident Details

Report Date	29/06/2019 16:19	Accident Report Within 24 hrs	Yes	Accident Type	Collision
Date of Accident	29/06/2019	Time of Accident hh:mm	11:30	Country of Accident	Singap
Reporting Centre		Orange Force		ICM No.	
Accident Location	ALONG BARTLEY VIADUCT				

▼ Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	100.00		
OD Standard Excess	600.00	TP Standard Excess	0.00		
YIED OD Excess	1000.00	YIED TP Excess	0.00	Driver is Covered?	Covered
Additional Excess					
Total OD Excess Applicable	1600.00	Total TP Excess Applicable	0.00		

▼ Benefits

▼ GST Registered Information

GST Registered	Yes	GST Registration Date	01/11/2014
GST Registration No.	200819620E	GST Status Verified	Yes
Modification History	29/06/2019 16:22:46 System changed GST Registered from No to Yes 29/06/2019 16:22:46 System changed GST Registration No. from null to 200819620E 29/06/2019 16:22:46 System changed GST Registration Date from null to 01/11/2014		

▼ Policyholder Mailing Address

Address 1	13 KAKI BUKIT ROAD 4	Address 2	#03-14 BARTLEY BIZ CENTRE	Address 3	SINGA
Address 4		Address Type	Singapore address	Post Code	41780
Unit No.		Related Policy Number	5107700233		

▼ O1 Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver		
Unnamed driver Name	NATARAJAN VENKATESAN	Driver NRIC	G8445119W	Driver DOB	05/07/
Register Date of Driver License	05/09/2017	Driver Age	35	Driving Experience	1
Contact No.(Mobile)	82858776	Contact No.(Office)		Contact No.(Home)	
Address 1	13 KAKI BUKIT ROAD 4	Address 2	# BARTLEY BIZ CENTRE	Address 3	SINGA
Address 4		Address Type	Singapore address	Post Code	41780
Unit No.					
Does he own a Singapore Registered car?	<input checked="" type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	

Declaration

Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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Modification History

Claim 001 New

Claim Type *	OD-MX	Insured Name	WEI LONG ENGINEERING & CO
Contact No.(Mobile)		Contact No. (Home)	
Email Address	sales@weilong.sg	Vehicle Number	GBJ2562E
Claim Description	GBJ2562E / SLX1364A ON 29 Jun 2019		
Preferred Workshop	<input type="radio"/> Insured Liability	Not at Fault	
Contract No. Finalisation	Yes	Preferred Workshop, Name unknown	GIA report
Date Registered	29/06/2019 16:24	Claim Close Date	
Report Taken By	LIEW SHAN HUI		

☒ Print AK letter

Save Submit

Attachment

Accident No.	MT/1051195	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	29/06/2019 16:25
Path *		Category *	Confidential
Choose File	No file chosen	Clear	Please Select
Choose File	No file chosen	Clear	Please Select
Choose File	No file chosen	Clear	Please Select
Choose File	No file chosen	Clear	Please Select
Choose File	No file chosen	Clear	Please Select
Choose File	No file chosen	Clear	Please Select
Choose File	No file chosen	Clear	Please Select
Message Read		Clear	Please Select

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Jun 2019 16:25	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-6-29
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Jun 2019 16:25	SAS	Normal	SAS 2019-6-29
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Jun 2019 16:24	Photos	Normal	Photos 2019-6-29
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Jun 2019 16:24	Photos	Normal	Photos 2019-6-29
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Jun 2019 16:24	Photos	Normal	Photos 2019-6-29
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Jun 2019 16:24	Photos	Normal	Photos 2019-6-29
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 29 Jun 2019 16:24	Photos	Normal	Photos 2019-6-29

Video List

Uploaded By/Date	Folder Date	File Name	Source
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Display in New Window

Scan and uploading