

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	01/07/2019 15:56
Date Of Accident	28/06/2019 15:40
Exact Location Of Accident	ALONG MOUNTBATTEN ROAD TOWARDS ECP
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	WC6519T
Insured/Policyholder	
Name Of Registered Owner	DYNAMIC CONST & ENGINEERING PTE LTD
Co Reg No	201327062D
Email Address	ANDY.LEE@PAS.SG
Mobile Phone No	
Alternative Phone No	OFFICE-91342250

Vehicle Particulars

Manufacturer	ISUZU
Model	CYH 52S
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN1904641900
Cover Note Number	

Driver

Name of Driver	GUNASEKARAN ARUN
Passport No/FIN	G7510943T
Date Of Birth	16/06/1979
Occupation	OUTDOOR
Date Of Driving Pass	01/07/2008
Driving Experience	10 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98615991
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	1 BUKIT BATOK ST 22 #08-05
Postcode	659592
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?	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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

I WAS TRAVELLING ALONG MOUNTBATTEN ROAD TOWARDS ECP. THIRD PARTY SH6650S IS TRAVELLING IN FRONT OF MY VEHICLE. AT THE JUNCTION OF MOUNTBATTEN ROAD & OLD AIRPORT ROAD, THIRD PARTY SH6650S SUDDENLY STOP HIS VEHICLE DUE TO RED LIGHT. I ALSO APPLIED MY BRAKE BUT MY VEHICLE ROLLED FORWARD & HIT ONTO THIRD PARTY VEHICLE REAR. AFTER THE ACCIDENT, WE EXCHANGED OUR PARTICULARS. NO INJURIES IN THIS ACCIDENT & THIS IS FOR REPORTING PURPOSES.

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	SH6650S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ONG HOE SENG
NRIC/Passport Number	S6840536Z
Contact Number	86197281
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

SKETCH PLAN

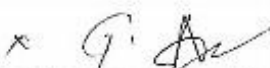
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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

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.

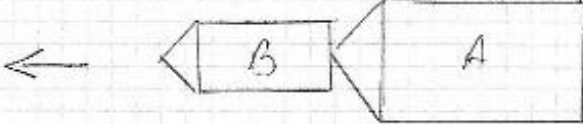

Policyholder's Signature
Date & Time:


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

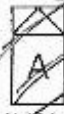

Reporting Centre Personnel's Signature
Name:
NRIC/HN No.:

Sketch Plan #2


SKETCH PLAN

 <p style="text-align: center; margin-top: 10px;">Mountbatten Road</p>	<p>Vehicle No</p> <p>A - WC 65197</p> <p>B - SH 66505</p>
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Legend



Vehicle



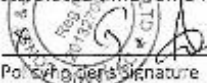
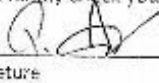

Bike

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS TRAVELLING ALONG MOUNTBATTEN ROAD TOWARDS ECP. 3RD PARTY SH 66505 IS TRAVELLING IN FRONT OF MY VEHICLE.
AT THE JUNCTION OF MOUNTBATTEN ROAD & OLD AIRPORT ROAD, 3RD PARTY SH 66505 SUDDENLY STOP HIS VEHICLE DUE TO RED LIGHT.
I ALSO APPLIED MY BRAKE BUT MY VEHICLE ROLLED FORWARD & HIT ONTO 3RD PARTY VEHICLE REAR.
AFTER THE ACCIDENT WE EXCHANGED OUR PARTICULARS. NO INJURIES IN THIS ACCIDENT & THIS IS FOR REPORTING PURPOSES.
3RD PARTY DRIVER NAME: ONG HOE SENG
IC NO : 568405362
HP NO : 86197281

DECLARATION

I/We declare the foregoing particulars are true in every respect.
 Please be advised that your insurer may have a 14 day clause whereby the claim against own policy must be made within the stipulated time frame from the date of occurrence. Kindly check your policy for more details.

 Policyholder's Signature Date & Time:	x  Driver's Signature (If driver is not the policyholder) Date & Time:	 Reporting Centre Personnel's Signature Name: NRIC/FIN No.:
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IC & DRIVING LICENSE

REPUBLIC OF SINGAPORE DRIVING LICENCE

License Number: **G7510943T**

Name: **GUNASEKARAN ARUN**

Birth Date: **16 Jun 1979**

Issue Date: **02 Apr 2019**

Valid Till: **30/06/2023**

002918748J






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

Employer: **DYNAMIC CONST & ENGINEERING PTE. LTD.**

Name: **GUNASEKARAN ARUN**

Work Permit No: **0 32825931** Sector: **CONSTRUCTION**

K1226988

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

		EFFECTIVE DATE
Class 3	Motor cars with unladen weight ≤ 3000kg with ≤ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight ≤ 2500kg	01 Jul 2008
Class 4	Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg Motor vehicles which are not constructed to carry load or passengers and the unladen weight ≤ 7250kg	13 May 2013

NP 428A



VISIT PASS Immigration Regulations

08-03-2019

Name: **GUNASEKARAN ARUN**

FIN: **G7510943T**

Date of Birth: **16-06-1979**

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



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	INCVN190441930	Engine No J4WQ1419779	Chassis No J2ACCTH22D700349
1 Index Mark and Registration Number of Vehicle	WCE519T		
2 Name of Policy Holder	M/S DYNAMIC CONST & ENGINEERING PTE. LTD.		
3 Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	29 JANUARY 2019	EXCESS SECT 1	RM1,500.00
		EX ON WINDSCREEN	RM100.00
4 Date of Expiry of Insurance	28 JANUARY 2020		
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 REGARD 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, JACK-HAMING, RELIABILITY TRIAL OR SPEED TESTING. (2) USE WHILE DRAWING A TRAILER EXCEPT THE TOWING OF ANY ONE DISABLED MECHANICALLY PROPELLED VEHICLE.		
WIRE PURCHASE CO. & KWEE SENG CREDIT PTE LTD 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.

Countersigned By

Authorised Officer

Authorised Signatory

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



CHASSIS NO : JALCYH52SD7000349

U/W : 13520 KG

M/L/W : 34000KG

PASS CAP : 02

TYRE SIZE : F 295-80R22-5(S)x2

: R 295-80R22-5(D)x2