

## 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	10/07/2019 14:50
Date Of Accident	10/07/2019 09:40
Exact Location Of Accident	JALAN AHMAD IBRAHIM BEFORE EXIT TO AYE CITY
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	YN1116Z
<b>Insured/Policyholder</b>	
Name Of Registered Owner	YONG LEI LOGISTICS PTE LTD
Co Reg No	200615235C
Email Address	ENQUIRY@YLLOGISTICS.COM.SG
Mobile Phone No	(LOCAL) +65-98571967
Alternative Phone No	OFFICE-85356344

### Vehicle Particulars

Manufacturer	MITSUBISHI
Model	FE84BE6SRDEA
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
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	DMCVSN1557421903
Cover Note Number	

### Driver

Name of Driver	SEBASTIAN BACKIANATHAN
NRIC No	G2322251K
Date Of Birth	12/06/1987
Occupation	OUTDOOR
Date Of Driving Pass	30/01/2015
Driving Experience	4 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98571967
Fax Number	
Contact Number	OTHERS-85356344
E-Mail Address	ENQUIRY@YLLOGISTICS.COM.SG

Address	3023 BUKIT BATOK STREET 23 #01-100
Postcode	659528
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)	2
Passenger 1	NAME: : AH KOON 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 SKETCH PLAN

### Attachment(s)

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

### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBB2086E
Vehicle Make/Model/Colour	NISSAN CABSTAR
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	CHAN PIN TEIN
NRIC/Passport Number	S0513096D
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

# Accident 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.



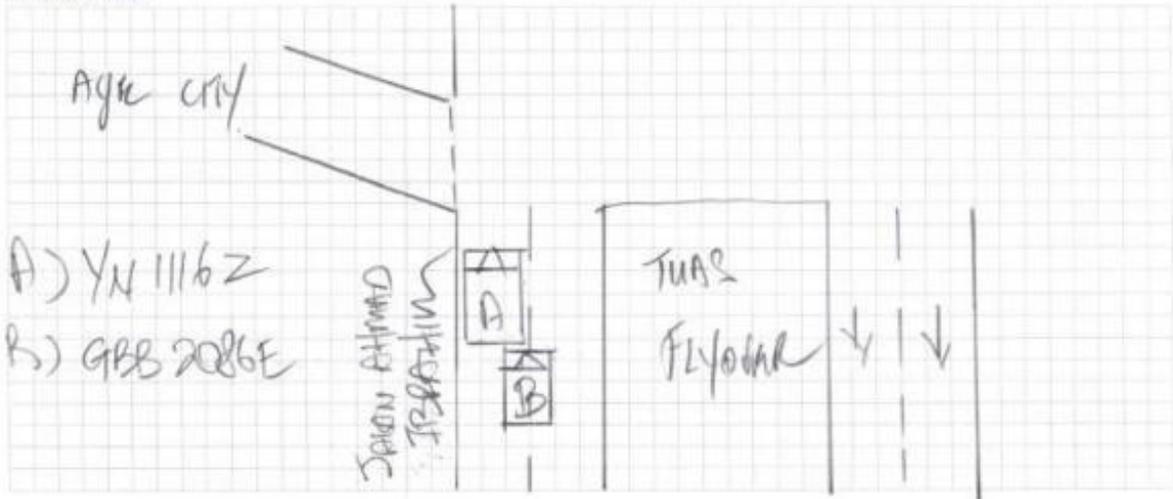
Policyholder's Signature  
Date & Time:

*A. Brown* 10/07/2019  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

*[Signature]* 10/07/2019  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.: *[Signature]*

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 10/07/2019 AT ABOUT 09:40HRS I WAS AT JALAN AHMAD IBRAHIM & WANTED TO EXIT TO AYE CITY TRAVELLING AT 20KM/H SUDDENLY A TRUCK BONK THE REAR. I STOP MY LORRY & CAME DOWN & SAW A LORRY GBB2086E BONK INTO THE FRONT OF MY LORRY YN1116Z THAT ALL.

DECLARATION

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



Policyholder's Signature  
Date & Time:

A. BANSI 10/07/2019  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

10/07/2019  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

LETTER



# YONG LEI LOGISTICS PTE LTD

2023 Bukit Batok Street 23 #01-100, Singapore 659528

Tel: 65696240 | Fax: 66651967 | Email: enquiry@yllogistics.com.sg

(Business UEN: 200615235C)

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**Dated: 10 Jul 2019**

Attn: Officer-in-Charge and whom it may concerns;

Dear Sir/Mdm,

## Letter of Authorization

This letter certified that the following personnel are appointed as our sub-contractor and are authorized to drive the following vehicle **YN1116Z**.

Appointed Sub-contractor: Lei Engineering Pte. Ltd.

Name of authorized personnel/driver: SEBASTIAN BACKIANATHAN

(Fin No: G2322251K)

Thank you

Yours Sincerely,

Henry Tan

YONG LEI LOGISTICS PTE LTD

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



**Accident Photo**



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Driving License



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Identification Card

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

Employer  
**LEI ENGINEERING PTE. LTD.**

**For LKK/NAC Use Only**

Name  
**SEBASTIAN BACHANATHAN**

Work Permit No.  
**02803788**

Category  
**CONSTRUCTION**

**40280888**



**REPUBLIC OF SINGAPORE** **DRIVING LICENCE**

License No. **G2322251K**

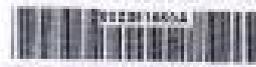
**For LKK/NAC Use Only**

Name  
**SEBASTIAN BACHANATHAN**

Issued On  
**12 Jun 2017**

Valid Until  
**30 Jan 2018**

Valid Till  
**25 Jan 2020**



**VISIT PASS**  
Immigration Regulations

Name  
**SEBASTIAN BACHANATHAN**

**For LKK/NAC Use Only**

Pass No.  
**02803788**

Date of Issue  
**12-06-2017**

Category  
**WORK**

**MULTIPLE JOURNEY VISA ISSUED**

**FOR USE TO ENTER THE COUNTRY IT IS CANCELLED ON THIS ENTRY. ON WHEN A NEW CARD IS ISSUED TO YOU.**



**YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:**

**EFFECTIVE DATE:**

Class 2B	Motorcycles < 200 cc.	30 Jan 2018
Class 2	Motor Cars < 3500kg with <=7 passengers, exclusive of the driver's and other motor vehicles <= 2000kg.	30 Jan 2018

**For LKK/NAC Use Only**

License No. **G2322251K**

