

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	14/08/2019 14:33
Date Of Accident	11/08/2019 03:20
Exact Location Of Accident	JLN BESAR TWDS OPHIR RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GZ6637D
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Insured/Policyholder

Name Of Registered Owner	HUP HOCK SENG CONSTRUCTION PTE. LTD.
Co Reg No	198205135N
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-67432301

Vehicle Particulars

Manufacturer	NISSAN
Model	CABSTAR
Exact Purpose for which vehicle was being used at time of accident	AFTER WORK
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5101733381-01
Cover Note Number	-

Driver

Name of Driver	KASI SELVAM
NRIC No	F7871301K
Date Of Birth	12/06/1975
Occupation	OUTDOOR
Date Of Driving Pass	31/05/2011
Driving Experience	8 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94552471
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	90 TUAS SOUTH AVE 9 #04-204
Postcode	637397
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	CHAIN COLLISION
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	3
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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	ROCHOR NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 11 KAMPONG KAPOR ROAD , POSTCODE: 208678 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2949999 - FAX NO: 63918583
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190811/2006

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	SLV3374T
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 OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SKD6686E
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)	

Accident Sketch Plan

SKETCH PLAN

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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:

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

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

Accident Sketch Plan

SKETCH PLAN

Ophir Rd

A = G2 6637D
B = SLV 3374T
C = SKD 6686E

Jln Besar

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer Police Report T120190811/2006

DECLARATION

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

Policyholder's Signature
Date & Time:

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


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

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190811/2006

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

1 of 3

Report No. T/20190811/2006

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/08/2019 05:11	Vide Report No.: A/20190811/0023	Station Diary No.: 26
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Informant's Particulars

Name of Informant: KASI SELVAM			Address: 90 TUAS SOUTH AVENUE 9 #04-204 TUAS LODGE 1 SINGAPORE 637397	
ID Type / ID No.: FIN NO / F7871301K			Contact No.: Home/Office: Mobile: 94552471	
Nationality: INDIAN			Email:	
Sex: Male	Age: 44	Date of Birth: 12/06/1975	Type of Informant: Driver	
Race: Indian			Language: English	Institution / School Name:
Occupation: CONSTRUCTION WORKER			Driving Licence Information: Class: 3 Date of Expiry: 30/05/2021	

General Information of the Accident

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 11/08/2019 03:20	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 JALAN BESAR OPHIR ROAD Accident happened along Jalan Besar towards Ophir Road. Lamp Post Number: 44F				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision:				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GZ6637D	Lorry				Slightly Damaged	0
SKD6686E	Car				Slightly Damaged	1
SLV3374T	Car				Slightly Damaged	0

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190811/2006

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Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

Report No. T/20190811/2006

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	KASI SELVAM	ID No.	F7871301K
Related Vehicle	GZ6637D (Lorry)	Contact No.	94552471
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: 30/05/2021
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 11/08/19 at around 0320hrs, I was driving my lorry, Nissan Cabstar bearing registration plate number GZ6637D along Jalan Besar.

I stopped my lorry at the traffic light junction of Jalan Besar, waiting for the traffic light to turn green. I was intending to make a left turn into Ophir Road.

Suddenly, I felt an strong impact from the back of my lorry, I applied my handbrake, exited from my lorry to take a look at what happened.

The driver behind me also exited from his vehicle, a grey coloured Kia Carens bearing registration number SLV3374T. The driver was holding on to his neck and he told me that he was knocked on the rear of his car by another vehicle, a Toyota Wish bearing registration number SKD6686E. Due to the strong impact from SKD6686E, he then inched forward and hit the rear of my lorry. The driver of SLV3374T then called for police assistance and subsequently got conveyed to hospital by ambulance. He was conscious at that point of time.

Subsequently, the driver of SKD6686E came down of his vehicle and asked me to pass him my phone number, and he will settle the matter tomorrow with me. I turned down the offer and waited for police assistance.

While awaiting police to arrive, the driver of SKD6686E hopped onto his vehicle and drove away.

I wish to state that I was not injured, and I also did not exchange particulars with the other involved parties.

I was advised to lodge a police report by the responding Traffic Police officer for investigation purposes.

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20190811/2006

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

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Report No. T/20190811/2006

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:

A /
Sgt 2 LEE JUN JIE, SEAN

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:

TP / GIT /
Sr Staff Sgt SHAHRUL NIZAM BIN SAMARRI
Contact No.: 65476904

Signature Of Informant:

Date/Time:
11/08/2019 05:11

Classification Of Case:

Authorised Officer
NP 100 SINGAPORE
POLICE FORCE



SIGNATURE

Other

When involved in a motor accident, you can choose to enter into a private settlement with the owner of the other car if there are no personal injuries and damages are minor. Under this private settlement, both parties agree to settle the matter amicably without going to court. It is a legally binding agreement.

1. Details of the accident:

Date:	10/10/2017	Time:	08:20 AM
Place:	Jalan Permatang - Near the "Jaya Raya" School		

2. Details of Vehicles:

	Vehicle A	Vehicle B
Registration Number	WV 33741	Q2 6637D
Name of Driver	Subedar Singh 3/4 Guljan Singh	
Phone Number	972 339243	
Name of Owner		Hop Hock Geng Construction Pte Ltd
PRIC Number		1382 0513511

3. There are no personal injuries to the undersigned parties.


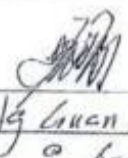
4. The parties hereby agree to settle the matter amicably as follows:

IMPORTANT: * circle a) or b) as applicable

a. Neither party shall be liable to compensate the other party for any loss or damages (direct or indirect) incurred or to be incurred as a result of the accident.

b. Without any admission of liability, Vehicle A (party paying compensation) has paid a sum of \$_____ which Vehicle B (owner receiving compensation) hereby acknowledges receipt thereof in full and final settlement of all damages and costs incurred and/or to be incurred as a result of the accident.

5. Both parties are free to make an accident report to comply with the accident reporting requirements.

	Vehicle A	Vehicle B
Signature		
Name		Ng Guan Hock
Home Tel:		0 6-7432301
Hand Phone		9-7265306

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

