SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

EMail Address

- 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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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	20/11/2019 15:25			
Date Of Accident	18/11/2019 15:10			
Exact Location Of Accident	OCEAN DRIVE ROUNDABOUT (SENTOSA)			
Country/State of Loss	SINGAPORE			
DETAILS OF OWN VEHICLE				
Vehicle Registration Number	GY5948T			
Insured/Policyholder				
Name Of Registered Owner	CIVILLAND CONSTRUCTION & ENGRG PTE LTD			
Co Reg No	1999000253C			
Email Address	CIVILLAND@MSN.COM			
Mobile Phone No	(LOCAL) +65-90270437			
Alternative Phone No	OFFICE-90270437			
Vehicle Particulars				
Manufacturer	ISUZU			
Model	NHR69E-3.1 D (M)			
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.			
Type Of Coverage	THIRD PARTY			
Fleet Policy	NO			
Policy Number				
Cover Note Number	8VCT1838230			
Driver				
Name of Driver	KANDASAMY KARTHEEBAN			
Passport No/FIN	G7285408Q			
Date Of Birth	01/06/1970			
Occupation	OUTDOOR			
Date Of Driving Pass	04/10/2013			
Driving Experience	6 YEARS AND 1 MONTH			
Gender	MALE			
Mobile Number	(LOCAL) +65-90270437			
Fax Number				
Contact Number	OTHERS-90270437			

CIVILLAND@MSN.COM

Address

Postcode

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 SIDE SWIPE
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 2

Number of Passengers (Including Driver)

Passenger 1

NAME: : HOSSAIN SHAIKH JAKIR

GENDER: : MALE

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name BUKIT MERAH WEST NPC

Police Station Address ROAD: 500 BUKIT MERAH VIEW #01-01, POSTCODE: 159682,

COUNTRY: SINGAPORE

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH AND ATTACHMENT

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 SHA6527H
Vehicle Make/Model/Colour HYUNDAI I40

Details Of Properties

Vehicle Category TAXI

Name of Driver ABDUL GAFFOOR MALICK BATCHA

NRIC/Passport Number S7073804Z
Contact Number 92382680

Address

Postcode
Insurance Company Name
Nature Of Damage
No. Of Possconger (Including Driver)

No. Of Passenger (Including Driver)

1

Sketch Plan

SKETCH PLAN

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- 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:
 - 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:
 - 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

NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN	Sharrosa Co	Sharrosa (ochow brive)			
DESCRIBE CIRCUMSTAN	CES OF THE ACCIDENT	B (S)	B) GY 5948T B) SH 465271		
		12 mFd			
	M	setti			
	A XIII				
DECLARATION /We declare the foregoing pa	orticulars are true in every respect.	19 W	20/4/2019		
olicyholder's Signäture aate & Time:	Driver's Signature (If driver is not the policyholder) Date & Time:	Reporting Centre Name NRIC/FIN No.:	Personnel's Signature ABB		

Sketch Plan #3

Place: Sentosa Cove

Date & Time: 18/11/19 15:12

I parked my vehicle (lorry, V65948T) at the road side of Sentosa North Cove roundabout near the guard house for unloading of cables and materials. When my lorry was parked at the road side, the hazard signal light was turned-on before I stop and alight from the lorry.

After unloading the materials, before moving off, I turned-off the hazard signal light and signaled left before moving off. When I was moving off, the taxi (SHA6527H) accelerated and overtook my lorry hence the taxi crashed into the front right of my lorry and I came to an immediate halt. As the result of the crash, front right door, front right headlight and front right bumper was damaged.

The taxi did not come to an immediate halt but continues to move forward before stopping in front of my lorry, thus the damage is on the whole left body and left side mirror of the taxi. The security of Sentosa Cove came right after the crash and requested both vehicles to move off.

Neither myself nor the taxi diver were injured in the accident. We have exchanged personal particulars and moved off. Later, I went to police station to file an accident report on 18/11/19, 1910 hrs at Bukit Merah West NPC.

Malulary Costors

Annex D

NOTICE OF REPORTING

This is to confirm thatKandasamy Kartheeban NRIC/FIN
G7285408Q , has reported to the Police a non-injury traffic accident which
occurred at Sentosa Cove
on 18/11/2019 at 1512hrs involving the following vehicles:
YG5948T SHA6527H
2 If this accident was reported to the Police within 24 hours of its occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.
Rank/Name of Issuing Officer: SGT(3) Razeenah
Date:18/11/2019
S/D Ref:34
Police Post/Unit : BUKIT MERAH WEST NPC
Original - to be issued to informant Ouplicate - to be submitted to Traffic Police











































