

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	25/07/2020 14:21
Date Of Accident	24/07/2020 16:30
Exact Location Of Accident	JUNCTION OF JALAN EUNOS AND EUNOS CRESCENT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBH9211H
Insured/Policyholder	
Name Of Registered Owner	JUMBO GROUP OF RESTAURANTS PTE LTD
Co Reg No	199403639K
Email Address	HR_JUMBO@JUMBOGROUP.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-62658626

Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA 150-3.0 D 5MT (M)
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL USE
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	QBE INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	8-V0019951-MVA-R001
Cover Note Number	26/10/2019 TO 25/10/2020

Driver

Name of Driver	BALAKRISHNAN LOGANATHAN
NRIC No	G2867598X
Date Of Birth	20/05/1995
Occupation	OUTDOOR
Date Of Driving Pass	22/09/2017
Driving Experience	2 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93790412
Fax Number	
Contact Number	
Email Address	HR_JUMBO@JUMBOGROUP.COM.SG

Address	BLOCK 7 KAKI BUKIT ROAD 1 #05-01/02 EUNOS TECHNOLINK
Postcode	415937
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	DRIZZLING
Road Surface	WET

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?	
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	MACPHERSON NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 54 PIPIT ROAD #01-82/84 , POSTCODE: 370054 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7449999 - FAX NO: 65476366
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

Refer to Police Report T/20200724/2091

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	SMN7614E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE HIRE
Name of Driver	ERIC NG HOONG BOON
NRIC/Passport Number	
Contact Number	96328842
Address	
Postcode	
Insurance Company Name	

Nature Of Damage
No. Of Passenger (Including Driver)

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.



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

SKETCH PLAN

Eunos Crescent.

B= SMN-761UE

Jalan Eunos

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report T/00000724/2021.

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.: *9111*

NRIC/FIN No.:

Police Report Pg. 1



SINGAPORE
POLICE FORCE



T/20200724/2091

Police Station Of Origin:
MacPherson NPP
54 Pipit Road #01-82/84 SINGAPORE
370054
Tel No: 1800-7449999

1 of 3

Report No. T/20200724/2091

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/07/2020 18:27	Vide Report No.:	Station Diary No.: 27
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Informant's Particulars

Name of Informant: BALAKPISHNA LOGANATHAN	Address: APT BLK Blk 855 Street 83 #09-54 SINGAPORE 730855		
ID Type: FIN NO / G28670	Contact No.: Home/Office: Mobile: 93790412		
Nationality: INDIAN	Email:		
Sex: Male	Age: 25	Date of Birth: 20/05/1995	Type of Informant: Driver
Race: Indian	Language:		Institution / School Name:
Occupation: JUMBO GROUP OF RESTAURANT	Driving Licence Information: Class: 3 Date of Exp.: 21/09/2022		

General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 24/07/2020 16:30	Type of Location: X-Junction
Location: Along Road 1 EUNOS CRESCENT JALAN EUNOS JUNCTION OF EUNOS CRESCENT AND JALAN EUNOS				
Weather: Drizzling		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBH9211H	Lorry	TOYOTA	DYNA 150 5MT	White	Slightly Damaged	0
SMN7614E	Car	KIA	KIA CERATO 1.6(A) SX	Silver	Seriously Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20200724/2091

Police Station Of Origin:
MacPherson NPP
54 Pipit Road #01-82/81 SINGAPORE
370054
Tel No: 1800-7449999

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Report No. T/20200724/2091

CONTINUATION OF REPORT

Driver			
Name	BALAKRISHNAN LOGANATHAN	ID No.	G2867598X
Related Vehicle	NIL	Contact No.	93790412
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: 21/09/2022
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	NG HONG BOON (HUANG HONGWEN)	ID No.	S7933018C
Related Vehicle	NIL	Contact No.	96328842
Hospital/Clinic		Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 24/07/2020 @ 1630hrs I was driving along Eunos Crescent when I was about to approach at the cross junction of Eunos Crescent and Jalan Eunos, another car in front of my vehicle (SMN7614E) made a sudden emergency brake after crossing the stopping line of the cross junction while reacting to the light change of the traffic light.

I was not able to stop on time as the road was also wet and the weather was drizzling. Due to that, the front of my vehicle ended up hitting the rear of the vehicle (SMN7614E).

The rear of the vehicle (SMN7614E) was damaged on the area of the boot and rear bumper where as my vehicle suffered damages on the headlight and also the front bumper. The driver of (SMN7614E) and I managed to swap particulars for further contacting and I am lodging this report for insurance purposes.



**SINGAPORE
POLICE FORCE**



T/20200724/2091

Police Station Of Origin:
MacPherson NPP
54 Pipit Road #01-82/84 SINGAPORE
370054
Tel No: 1800-7449999

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Report No. T/20200724/2091

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Corrected...

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:
G /
Sgt 2 MUHAMMAD FAEZ BIN ROSLI

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
24/07/2020 18:27

Officer In Charge Of Case:
TP / GIA /
Staff Sgt WONG SIEU LUI
Contact No.: 65476151

Classification Of Case:

Authentication Stamp:
NP168



SINGAPORE
POLICE FORCE

SIGNATURE

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Addendum Sheet Pg. 1



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: S6650020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MTLM26062700 Vehicle Registration No: GBHQ211H.
Name(as shown in NRIC) : Jumbo Group of Restaurant Pte Ltd. NRIC/FIN/Passport No : 1xxxxx639k.
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : _____ Singapore()
Contact (Tel) : _____ Mobile No. : _____
Email Address : _____
Date of Accident : 24.07.2020 Time of Accident : 1630h.
Place of Accident : Junction of Jalan Eunos & Eunos Crescent.
Insurance Company: QBE Insurance (Singapore) Pte Ltd.

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Email address, attach Police Report,

Policyholder / Driver's Signature
Date:

Reporting Centre Personnel's Signature
Name: aym
NRIC/FIN No.: 905B.
Date: