

## 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	21/08/2020 12:18
Date Of Accident	20/08/2020 13:40
Exact Location Of Accident	JUNCTION OF HENDERSON ROAD/TIONG BAHRU ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBG3751K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	388 PTE LTD
Co Reg No	2XXXXX419K
Email Address	INFO@388PL.COM.SG
Mobile Phone No	(LOCAL) +65-94556741
Alternative Phone No	OFFICE-94556741

### Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA 150 5MT
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?	YES
If No, Please state action to be taken	
Vehicle Category	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2070102981
Cover Note Number	

### Driver

Name of Driver	TAMILPANDI SIVA SUBASH
Passport No/FIN	GXXXX912K
Date Of Birth	10/06/1989
Occupation	OUTDOOR
Date Of Driving Pass	24/07/2014
Driving Experience	6 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94556741
Fax Number	
Contact Number	OTHERS-94556741
Email Address	INFO@388PL.COM.SG

Address	48 TOH GUAN ROAD EAST #02-123 ENTERPRISE HUB
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	COLLISION - HEAD ON 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	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)	3
Passenger 1	NAME: : SATISH GENDER: : MALE
Passenger 2	NAME: : NAVEEN GENDER: : MALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	THOMSON NPP 25 SIN MING ROAD
Police Station Address	ROAD: 25 SIN MING ROAD #01-180 , POSTCODE: 570025 , 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 POLICE REPORT T/20200820/2087

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH THE POLICE OFFICER
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMR2882J
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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#### 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.

**388**  
pte ltd

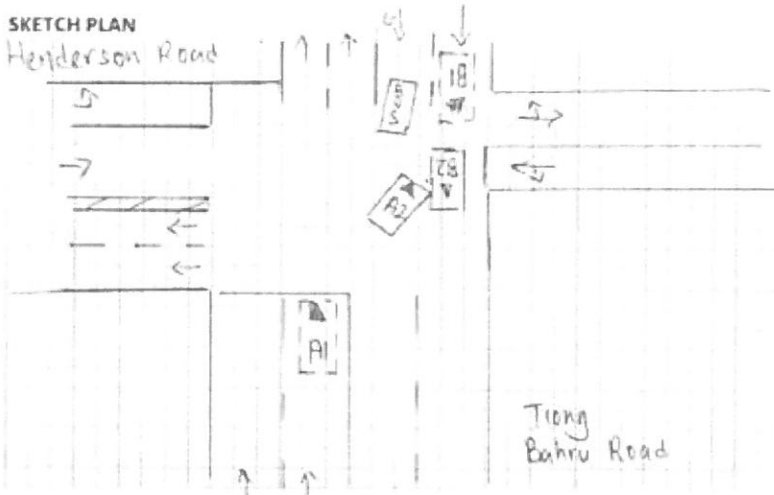
Policyholder's Signature  
Date & Time:

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



VA) GBA37512  
VJ) SMR2882J

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date and time, I was traveling along the Junction of Tiong Bahru Road & Henderson Road. Traffic was green in my favour hence I proceed straight ahead. As I approach the Junction, I noticed there was a bus coming close to my vehicle, upon seeing, I panic and swerve my vehicle towards the right. Unfortunately, there was a vehicle coming straight towards my direction, as such my vehicle collided against that said vehicle shortly I got out of my vehicle and check if the driver had any injuries. The ambulance and traffic police then came to the scene and the driver of SMR28823 and 2 of his passenger was conveyed. The traffic police officer took my in-car camera SD card and gave me a slip then advise me to file a police report. I called my tow truck and my vehicle was towed away.

Police Report

## DECLARATION

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

**388**  
pte ltd

Policyholder's Signature  
Date & Time:

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

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

# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20200820/2087

Police Station Of Origin:  
Thomson NPP  
25 Sin Ming Road #01-180 SINGAPORE  
570025  
Tel No: 1800-4529999

1 of 3

Report No: T/20200820/2087

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 20/08/2020 17:31	Vide Report No.: D/20200820/0062	Station Diary No: 64
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### Informant's Particulars

Name of Informant: TAMILPANDI SIVA SUBASH			Address:	
ID Type / ID No.: FIN NO / G8327912K			Contact No.:	
			Home/Office:	Mobile: 94556741
Nationality: INDIAN			Email:	
Sex: Male	Age: 31	Date of Birth: 10/06/1989	Type of Informant: Driver	
Race: Indian			Language:	Institution / School Name:
Occupation: PLUMBER SUPERVISOR			Driving Licence Information: Class: 3	Date of Expiry:

### General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 20/08/2020 13:40	Type of Location: X-Junction
Location:  HENDERSON ROAD				
Weather: Clear	Road Surface: Dry	Road Speed Limit:		
Traffic Flow: Two Way	Traffic Control: Traffic Light - Working	Traffic Volume: Moderate		
Type of Collision: Between Moving Vehicles - Head To Side	Anyone conveyed by ambulance: Yes			

### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBG3751K	Van				Slightly Damaged	2
SMR2882J	Car				Slightly Damaged	2

### Details of Person Involved

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

# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20200820/2087

Police Station Of Origin:  
Thomson NPP  
25 Sin Ming Road #01-180 SINGAPORE  
570025  
Tel No: 1800-4529999

2 of 3

Report No T/20200820/2087

## CONTINUATION OF REPORT

<b>Driver</b>			
Name	TAMILPANDI SIVA SUBASH		ID No. G8327912K
Related Vehicle	GBG3751K (Van)		Contact No. 94556741
Hospital/Clinic	NIL		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
<b>Driver</b>			
Name	Unknown		ID No. NIL
Related Vehicle	SMR2882J (Car)		Contact No. NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

### Brief Details.

On 20/08/20 at about 1435hrs, I was driving my vehicle (GBG3751K) along the Junction of Tiong Bahru Road & Henderson Road. Traffic was green in my favour hence I proceeded straight ahead. As I approached the junction, I noticed that there was a bus that was about to turn right at the opposite direction. Upon seeing, I panic and swerved my vehicle towards the right. There was also another vehicle (SMR2882J) coming straight into my direction. As such, my vehicle collided against the said vehicle.

Upon collision, I came out of my vehicle to check if the driver had any injuries. Ambulance and police came shortly and both the passenger of SMR2882J were being conveyed. Traffic Police also took down my vehicle SD Card. I then called my tow truck and waited for my vehicle to be towed away.

I am lodging this report for police investigation purposes.

POLICE REPORT



SINGAPORE  
POLICE FORCE



T/20200820/2087

Police Station Of Origin:  
Thomson NPP  
25 Sin Ming Road #01-180 SINGAPORE  
570025  
Tel No: 1800-4529999

3 of 3

Report No T/20200820/2087

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:

E /  
Sgt 2 HO BOON KIAT, DARON

Signature Of Informant:

Signature Of Interpreter:  
Not applicable

Date/Time:  
20/08/2020 17:31

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

Classification Of Case:

Authentication Stamp  
NP168

SN 070

SIGNATURE





# CERTIFICATE OF INSURANCE

## COMMERCIAL AUTOPLAN COMMERCIAL VEHICLE

Name of Policyholder : 385 PTE LTD  
Period of Insurance : 28 Jul 2020 To 27 Jul 2021  
Engine No. : 1KD2732673  
Chassis No. : JTFAT35Y80K208537

2070  
\$1386-13

Vehicle No. : GBG3751K  
Policy No. : 2070102981  
Endorsement No. : 2070102981Z  
Issued Date : 07 Jul 2020

### ABOUT THE COVER

Make/Model : TOYOTA DYNA 150 1.7 ton [Lorry]  
Engine Capacity/Tonnage : 1.7 Tonnage  
Driver Restriction : NA  
Sum Insured :  
Market Value :  
First Year of Registration : 2017  
Insuring with COE/PARF : Yes

#### Person or Classes of Persons Entitled to Drive\*

a) Any person who is driving on the Policyholder's order or with their permission.  
b) This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

Age Condition : All Age Condition

#### Limitation as to use\*

- \*1 Use in connection with the Policyholder's business.
- \*2 Use for the carriage of passenger (other than for hire or reward) in connection with the Policyholder's business.
- \*3 Use for social, domestic or pleasure purposes. This Policy does not cover a) use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing; and b) use whilst drawing a trailer except the towing of anyone disabled using a mechanically propelled vehicle, c) use for any purpose in connection with Motor Trade.

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 159), Section 95 of the Road Transport Act, 1997 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

### EXCESS

#### Section 1

Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$0

#### Section 2

Property Damage - \$0

Windscreen : \$100

Named Driver and Excess (where applicable)

### APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

Any accident repairs to the Vehicle can be carried out at the repairer of Your choice (unless specifically excluded by Us).

For Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website [www.aig.sg](http://www.aig.sg) or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: UOB LIMITED

We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 159), Road Transport Act, 1997 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

00540021

LINK INSURANCE AGY-TOYOTA CV

153 BUKIT BATOK ST 11 #02-290

SINGAPORE 650153

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

AIG Asia Pacific Insurance Pte. Ltd.

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See reverse



**REPUBLIC OF SINGAPORE DRIVING LICENCE**

Licence Number: **G8327912K**  
Name: **TAMILPANDI SIVA SUBASH**

Birth Date: **10 Jun 1989**  
Issue Date: **17 Jul 2019**  
Valid Till **23/07/2024**

002956540J



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


Employer  
**388 PTE. LTD.**

Name  
**TAMILPANDI SIVA SUBASH**

Work Permit No.  
**0 34422516**

Sector:  
**CONSTRUCTION**

K1193893



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

	EFFECTIVE DATE
Class 3 Motor cars with unladen weight $\leq$ 3000kg with $\leq$ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq$ 2500kg	24 Jul 2014

NP 428A

Licence No:G8327912K

**VISIT PASS**  
Immigration Regulations

22-02-2019

Name  
**TAMILPANDI SIVA SUBASH**

FIN  
**G8327912K**

Date of Birth  
**10-06-1989**

Sex  
**M**

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

