

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	17/11/2020 14:38
Date Of Accident	17/11/2020 07:30
Exact Location Of Accident	TPE TOWARDS KPE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YP780B
Insured/Policyholder	
Name Of Registered Owner	PIKASA BUILDERS PTE LTD
Co Reg No	201113963N
Email Address	LEECHIN@PIKASABUILDERS.COM
Mobile Phone No	
Alternative Phone No	OFFICE-67479865

Vehicle Particulars

Manufacturer	HINO
Model	HINO XZU710R-HKFMS3
Exact Purpose for which vehicle was being used at time of accident	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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSNW00017542004
Cover Note Number	

Driver

Name of Driver	SUBRAMANIAN MARIMUTHU
Passport No/FIN	G7600438U
Date Of Birth	02/01/1984
Occupation	OUTDOOR
Date Of Driving Pass	12/02/2018
Driving Experience	2 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86969415
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 80 KAKI BUKIT INDUSTRIAL TERRACE #01-01
Postcode	416160
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - SUB-CONTRACTOR EMPLOYEE
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?	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)	13
Passenger 1	NAME: : WORKER GENDER: : MALE
Passenger 2	NAME: : WORKER GENDER: : MALE
Passenger 3	NAME: : WORKER GENDER: : MALE
Passenger 4	NAME: : WORKER GENDER: : MALE
Passenger 5	NAME: : WORKER GENDER: : MALE
Passenger 6	NAME: : WORKER GENDER: : MALE
Passenger 7	NAME: : WORKER GENDER: : MALE
Passenger 8	NAME: : WORKER GENDER: : MALE
Passenger 9	NAME: : WORKER GENDER: : MALE
Passenger 10	NAME: : WORKER GENDER: : MALE

Passenger 11

NAME: : WORKER

GENDER: : MALE

Passenger 12

NAME: : WORKER

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

ON THE MENTIONED DATE & TIME, I WAS TRAVELLING ALONG THE EXTREME LEFT LANE OF TPE TOWARDS KPE, THE FRONT VEHICLE B SUDDENLY BRAKED, HOWEVER I COULDN'T BRAKE IN TIME AND COLLIDED ONTO ITS REAR PORTION. NO ONE WAS INJURED. UPON CHECKING, VEHICLE C (XE3294M) WAS ALSO INVOLVED IN THIS ACCIDENT. THAT'S ALL.

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 SLW3085Y

Vehicle Make/Model/Colour HONDA

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver KOH LEONG POR

NRIC/Passport Number S1779088I

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number XE3294M

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE

Name of Driver KUMARADHAS SAHAYANELIN

NRIC/Passport Number G7572589U

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

SKETCH PLAN

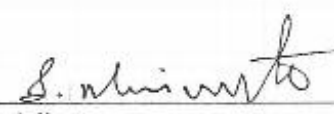
IMPORTANT NOTICE

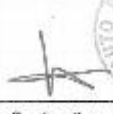
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8. **Consent under the Personal Data Protection Act (PDPA)**

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.


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.:

Sketch Plan #2

SKETCH PLAN

Sketch Plan diagram showing a road layout with a vertical line labeled 'KPE' at the top and 'TPE' at the bottom. Four arrows point upwards from the bottom line towards the top line. On the left side of the vertical line, four boxes are stacked vertically, labeled from top to bottom: C, B, A, and A. To the right of the diagram, the following information is written:

DoA: 17/11/2020
 Time: 07:30am
 A: YP780B
 B: SLW3085Y
 C: XE3294M

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

S. Shrinanth

On the mentioned date & time, I was travelling along the extreme left lane of TPE towards KPE, the front vehicle B suddenly braked, however I couldn't brake in time and collided onto its rear portion. No one was injured. Upon checking, vehicle C (XE3294M) was also involved in this accident. That's all. *S. Shrinanth*

DECLARATION

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

[Signature]
 Policyholder's Signature

Date & Time:

[Signature]
 Driver's Signature

(If driver is not the policyholder)

Date & Time:

[Signature]
 Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

GRATC Form 10/2018 (Rev. 03)

AUTHORIZATION LETTER



PIKASA BUILDERS PTE LTD

80 Kaki Bukit Industrial Terrace Singapore 416160
T: 67479865 Fax: 67478655
Email: contracts@pikasabuilders.com

17th November 2020.

To Whom It May Concern,

Dear Sir/Madam,

Authorization Letter

We hereby confirm that **Mr. SUBRAMANIAN MARIMUTHU (Nric/Fin No : G7600438U)** is authorized to use and drive our company vehicle number YP780B.

Thank you.

Respectfully yours,

YAN CHEE KEONG
Contracts Manager





中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Commercial

MZ300/C

R SN

AN0334A

Cov. Type:C

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1955 (Malaysia)

CERTIFICATE No.	DMCVSNW00017542004	Engine No.: N04CJ516778	
		Chs. No.: JH1UCS3HDC009377	
1. Index Mark and Registration Number of Vehicle	YP780B	AUTOSAFE	
2. Name of Policy Holder	PIKASA BUILDERS PTE LTD (NON-DRIVER)		
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	09/04/2020	Excess Sect I.	S\$550.00
		EX ON WINDSCREEN	S\$100.00
4. Date of Expiry of Insurance	08/04/2021		
5. Persons or Classes of Persons entitled to drive*	Any person who is driving on the Policyholder's order or with their permission.		
	Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.		
6. Limitations as to use:	<p>(1) Use in connection with the Policyholder's business.</p> <p>(2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.</p> <p>(3) Use for social, domestic or pleasure purposes.</p> <p>The Policy does not cover</p> <p>(1) Use for hire or reward or racing, pace-making, reliability trial or speed testing.</p> <p>(2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.</p>		
HIRE PURCHASE CO. : MAYBANK AS HP OWNER			
* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Malaysia), are not to be included under these headings.			

I/We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: GIM'S INSURANCE AGENCY PTE LTD
Authorised Officer

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)
3 Anson Road #16-00 Springleaf Tower Singapore 079909

6389 6111

6222 1033

www.sg.cntaiping.com

SCENE PHOTO



SCENE PHOTO



SCENE PHOTO



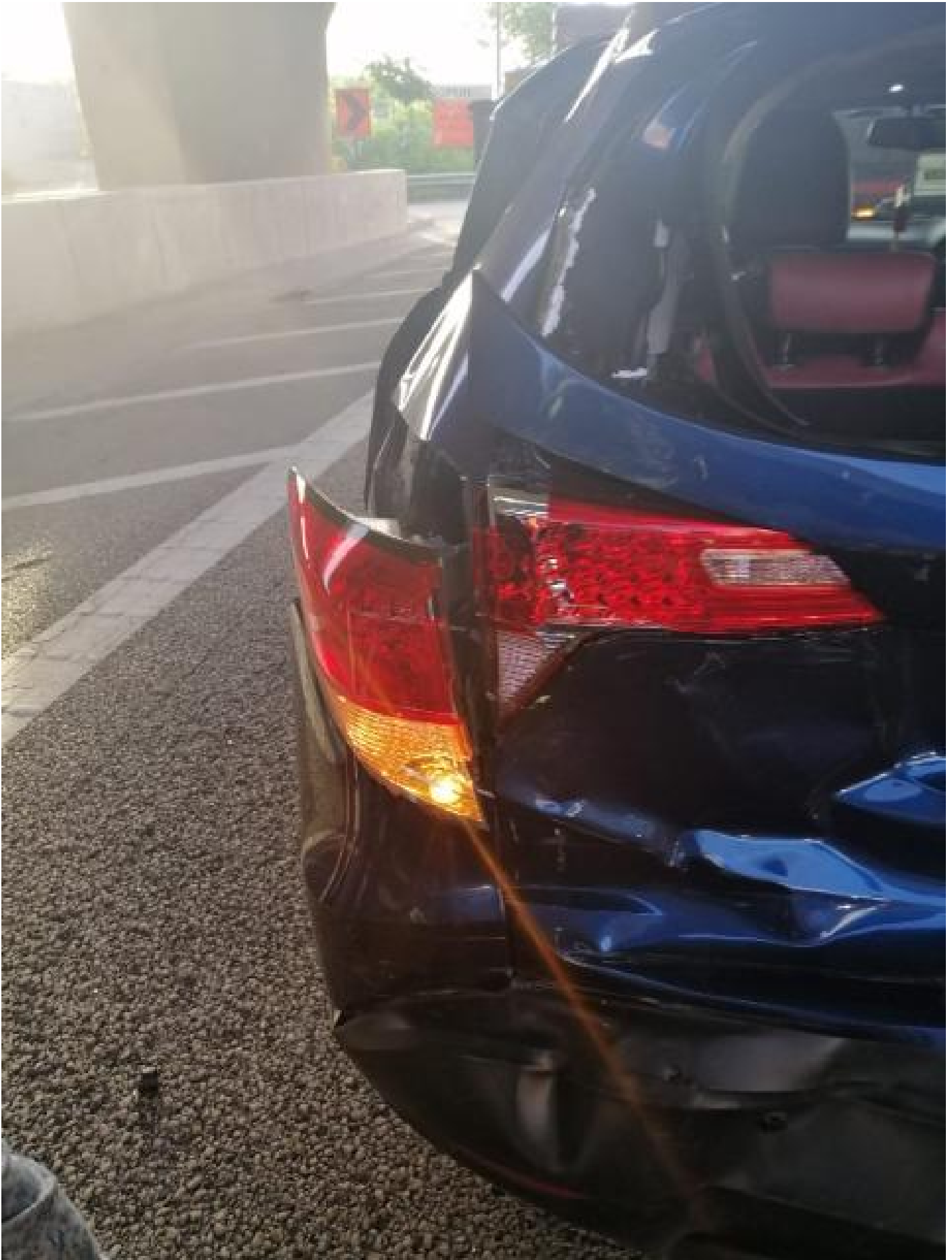
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