

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 Submission	08/12/2020 10:19 (SGT)
Date of Accident	28/11/2020 06:00 (SGT)
Exact Location of Accident	154 West Coast Rd, Singapore 127371
Additional Location Information	WEST COAST ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBD730G
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	SVM AGENCY PTE LTD
Company Reg No	2XXXXX551C
Email Address	araju22000@gmail.com
Mobile Phone No	(Phone) +65-93804058
Alternative Phone No	+65-93804058

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Nv350
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Reporting only
Vehicle Category	Commercial vehicle

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMCVSNW00028632001
Cover Note Number	-

DRIVER

Name of Driver	YEDDULA NAGABHUSHIGARI DEVAVRATHA REDDY
Passport No/FIN	GXXXX096U
Date Of Birth	16/12/1986
Occupation	Outdoor

Date Of Driving Pass	24/04/2010
Driving experience	10 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98690994
Alt. Phone Number	-
Email Address	devavratha.rreddy@gmail.com
Address	BLK 506 WEST COAST RD
Address complement	#06-227 WEST COAST VISTA
Postcode	120506
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Relative
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Side Swipe
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Clementi Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18008729999
Alt. Police Station Phone No	(Fax) +65-68728039
Police Station Address	No. Singapore 129858
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE POLICE REPORT:T/20201128/2062

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	FBF5169J
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Motorcycle
Name of Driver	-
Contact Number	-

Address
Address complement
Postcode
Insurance Company Name
Nature Of Damage
Details of property damaged in accident
No. Of Passenger (Including Driver)

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.

SVM AGENCY PTE LTD

Reg. No: 201435551C

COMMUNICATION ADDRESS

BLK 45, #03-281, TANGLIN HALT ROAD

SINGAPORE 141045

TEL / FAX : 31613430 HP: 93804058

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

AS PER ATTACHED

P/s refer to the police report: T/20201128/2062

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

NRIC/FIN No.:

Google Maps Clementi Ave 2





SINGAPORE POLICE FORCE



T/20201128/2062

1 of 3

Police Station Of Origin:
Clementi N.P.C
20 Clementi Avenue 5 SINGAPORE 129858
Tel No: 1800-8729999

Report No. T/20201128/2062

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/11/2020 15:26		Vide Report No.: D/20201128/0046		Station Diary No.: 69	
Informant's Particulars					
Name of Informant: YEDDULA NAGABHUSHIGARI DEVAVRATHA REDDY			Address: APT BLK 506 WEST COAST DRIVE #06-227 WEST COAST VISTA SINGAPORE 120506		
ID Type / ID No.: FIN NO / G7857096U			Contact No.: Home/Office: Mobile: 98690994		
Nationality: INDIAN			Email:		
Sex: Male	Age: 33	Date of Birth: 16/12/1986	Type of Informant: Driver		
Race: Indian			Language:		Institution / School Name:
Occupation: COMPRESSOR SERVICE TECHNICIAN			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 28/11/2020 06:00	Type of Location: X-Junction
Location: WEST COAST 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 On				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBF5169J	Motorcycle				Slightly Damaged	0
GBD730G	Van				Slightly Damaged	0

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20201128/2062

2 of 3

Police Station Of Origin:
Clementi N.P.C
20 Clementi Avenue 5 SINGAPORE 129858
Tel No: 1800-8729999

Report No. T/20201128/2062

CONTINUATION OF REPORT

Driver			
Name	YEDDULA NAGABHUSHIGARI DEVAVRATHA REDDY	ID No.	G7857096U
Related Vehicle	GBD730G (Van)	Contact No.	98690994
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

Brief Details.

I am the above mentioned person and affirmed it to be correct and true I am working as a Compressor Service Technician in Boge Kompressoren Asia Pacific Pte Ltd for more than 3 years.

On 28/11/2020 at 0600hrs, I was driving my van (GBD730G) along West Coast Road turning towards Clementi Ave 2 at the X-junction. As I noticed the traffic light, turning arrow had turned 'Green', I decided to make a right turn towards Clementi Ave 2 direction after looking on oncoming vehicle from the opposite direction.

After which, I heard a impact on the left rear side of my van. I stopped my vehicle and noticed a motorcycle (FBF5169J) had collided into the rear side of my vehicle. The motorcyclist was lying onto the ground and was conscious.

Shortly after, TP and ambulance arrived at scene. The motorcyclist was conveyed to National University Hospital.

There is no in-vehicle camera installed in my vehicle. There are dent and scratch marks at the rear left side of vehicle.



**SINGAPORE
POLICE FORCE**



T/20201128/2062

Police Station Of Origin:
Clementi N.P.C
20 Clementi Avenue 5 SINGAPORE 129858
Tel No: 1800-8729999

3 of 3

Report No. T/20201128/2062

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:

D /

Sgt 2 CHONG SHAO XUAN, VANESSA

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Sgt 3 INTAN WULANDARI BUDDY SANTOSO

Contact No.: 65476256

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

28/11/2020 15:26

Classification Of Case:

ACCIDENT STATEMENT

ACCIDENT DATE: (28 / 11 / 20) (DD/MM/YYYY), TIME: (06 : 00) (HH:MM)

LOCATION: WEST COAST RD

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: 9BD7304
 b) INSURANCE COMPANY: CHINA TRADING
 c) POLICY NUMBER: _____
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: NISSAN NU350
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: COMMERCIAL USE
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: SUN AGENCY PTE LTD (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: 20183557C CONTACT: 93804058
 c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: YEDDULA NAGABHUSHIGARI DEVAVATHA REDDY (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: G7857096U CONTACT: 98690994
 c) ADDRESS: _____

*d) DATE OF BIRTH: (16 / 12 / 1986) (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: 24 / 04 / 2010

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: RELATIVE

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: F8F5169J MODEL: _____
 b) DRIVER'S NAME: _____
 c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
 e) DRIVER'S NAME: _____
 f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

* No of passenger
 (including driver)
 (1)

* No of passenger
 (including driver)
 ()

* No of passenger
 (including driver)
 ()

9/19 - unsubmitted
 need to change
 interview
 name

Email = arajin22000@gmail.com
 fax = devavatha.reddy@gmail.com

VIDEO = NO

devavatha.reddy@gmail.com



中国太平
CHINA TAIPING

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

AN0597A

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, 1959 (Malaysia)

CERTIFICATE No.

DMCVSNW00028632001

Engine No.: YD25346627A

Cha. No.: JN1MC2E26Z0001933

1. Index Mark and Registration
Number of Vehicle

GBD730G

AUTOSAFE

2. Name of Policy Holder

SVM AGENCY PTE. LTD.

3. Effective date of the Commencement of
Insurance for the purposes of the Regulations,
Ordinance or Enactment

29/05/2020

Excess Sect I . S\$350.00
EX ON WINDSCREEN . S\$100.00

4. Date of Expiry of Insurance

28/05/2021

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:

- (1) Use in connection with the Policyholder's business.
- (2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
- (3) Use for social, domestic or pleasure purposes.

The Policy does not cover

- (1) Use for hire or reward or racing, pace-making, reliability trial or speed testing.
- (2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

* 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).

SG MOTOR TRADER PTE LTD

Please see reverse
172 Sin Ming Drive
Singapore 575720
Tel: 6933 0400 Fax: 6466 0678

Issued By:

SG MOTOR TRADER PTE LTD

Authorised Officer

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

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

Enquire Vehicle Transfer Fee

Vehicle Details

Vehicle No.
GBD730G

Make / Model
NISSAN / NV350 PANEL VAN 2.5 5MT 5DR EURO V

Vehicle Type :
A50 - Goods (Closed) Van/Van Panel (Delivery)

Vehicle Attachment 1 :
No Attachment

Vehicle Scheme :
Normal

Chassis No. :
JN1MC2E26Z0001933

Propellant :
Diesel

Engine No. :
YD25346627A

Motor No. :
-

Engine Capacity :
2488 cc

Power Rating :
-

Maximum Power Output :
-

Maximum Laden Weight :
3300 kg

Unladen Weight :
1800 kg

Year Of Manufacture :
2014

Original Registration Date :

29 May 2014

Lifespan Expiry Date :

28 May 2034

COE Category :

C - Goods Vehicle & Bus

Quota Premium :

\$32,890.00

COE Expiry Date :

28 May 2024

Road Tax Expiry Date :

28 May 2021

PARF Eligibility Expiry Date :

-

Inspection Due Date :

28 May 2021

Intended Transfer Date :

30 Nov 2020

CO2 Emission :

232.00 (g/km)

CEV/VES Rebate Utilised Amount :

-

CO Emission :

-

HC Emission :

-

NOx Emission :

-

PM Emission :

-

Fees To Be Paid For Transfer

Transfer Fees	\$25.00
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Message

This vehicle has a road tax Over Payment of \$174.00. This Over Payment may be used to offset Road Tax payable and Transfer Fees respectively, where applicable.

Print

OK →

Save as PDF

Copy as Text