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 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.

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 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 13:28 (SGT) Date of Accident 03/12/2020 16:20 (SGT) Exact Location of Accident AYE, Singapore Additional Location Information TOWARDS CHANGI AIRPORT NEAR ALEXANDRA EXIT Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number **GBC2208R**

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner KENYON PTE LTD Company Reg No 1XXXXX457K **Email Address** lyelc@kenyon.com.sq Mobile Phone No (Phone) +65-97151685 Alternative Phone No (Office) +65-65428888

VEHICLE PARTICULARS

Manufacturer Nissan Model Cabstar Variant Exact purpose for which vehicle was being used at time of

accident Are you claiming under your own insurance policy for repair to

your vehicle?

Vehicle Category

Employment

No - Claiming third party Commercial vehicle

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance Type of Coverage Comprehensive Fleet Policy Policy Number DMCVSNW00062422000 Cover Note Number

DRIVER

Name of Driver **HOSSAIN LOKMAN** Passport No/FIN GXXXX888L Date Of Birth 07/05/1987 Occupation Outdoor

Date Of Driving Pass 28/07/2015 Driving experience 5 YEARS AND 5 MONTHS Gender Mobile Number (Phone) +65-97151685 Alt. Phone Number Email Address hassainlokman777@gmail.com Address **8 LOYANG CRESCENT** Address complement Postcode 509016 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured **Employee** 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 Chain Collision Weather Conditions Raining Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? Was any other material or property damaged? No Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Nο **DETAILS OF POLICE ACTION** Was the accident reported to the police? Yes Police Station Name Pasir Ris Neighbourhood Police Centre Police Station Phone No (Phone) +65-18005852999 Alt. Police Station Phone No (Fax) +65-65855261 Police Station Address 1 Pasir Ris Drive 4 #01-01 Singapore 519457 Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO POLICE REPORT ATTACHMENT(S)

Yes

No

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

SKETCH PLAN



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- ... 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 altoresaid.

- the report being made available altorisatid.

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

 Lunderstand, aktnowledge, agree and consent that:

 (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, my consense my personal distally-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 transfers with Personal Information to all insurerity who have insured vehicle(s) involved in this accident (all insurerity) who have insured vehicle(s) involved in this accident (all insurerity) who have insured vehicles) involved in this accident (all insurerity) when the sure of the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :
 - 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;
 - (w) daministering but who deeming which is 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 envelopershing lackages; 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
 - to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
 my Personal Information may/can be disclosed by my of the Insurers and/or flat to their third party service providers or
 agents/including their lawyers/law firms), which may be steed 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 further claims.

 (e) the information so collected under (d) above may be shared / disclosed:

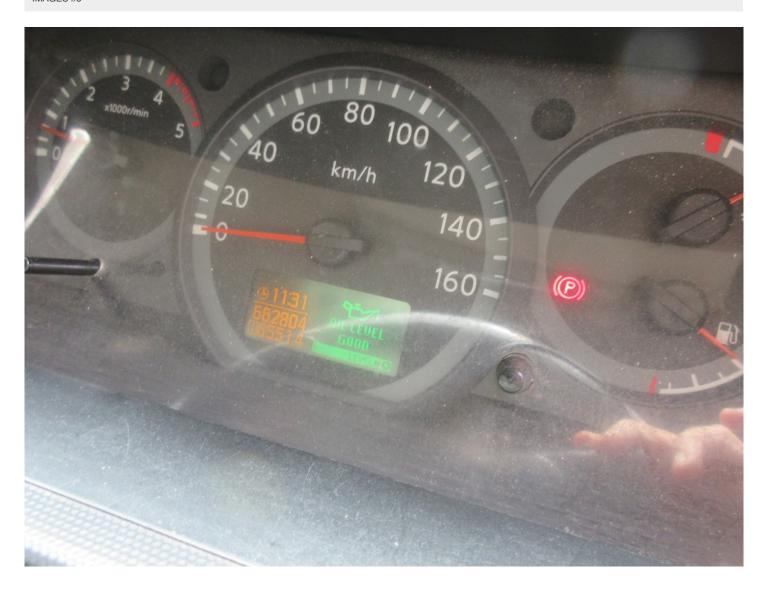
 - - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or (ii) for complying with requirements under any regulations, laws or court orders.

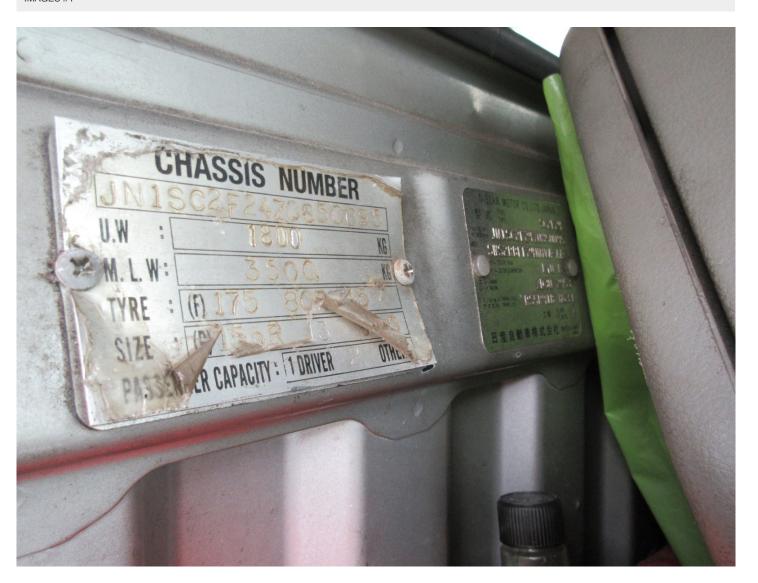
Driver's Signature
(If driver is not the policyholder)
Date & Time:
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CONFIDENTIAL NOTICE OF COMPLIANCE

This is to confirm that Hossain Lokman, HF: 97151885 NRIC/FIN G69098881, has reported to the Police a non-injury traffic accident which occurred at AYE (towards Changi Airport) near Alexandra exit on 03/12/20020 at 4:20 pm involving the following vehicles:

GBC2208R - Complainant's vehicle (silver Nissan Cabstar lorry) GBH1356B (silver Toyota Hiace van) GBJ1111E (white Toyota Hiace van)

On 03/12/2020 at about 4.20pm, I was driving my company's lorry, a silver Nissan Cabstar bearing the registration plate number GBC2208R, along AYE towards Changi Airport. I was travelling on the second lane of the 4-lane road. While I was driving, there was a car in front of my lorry. Suddenly, the car made an abrupt lane change from the second lane to the third lane. I pressed my brake to avoid hitting the car. A few seconds later, I felt an impact coming from the rear of my lorry. A silver Toyota Hiace van bearing the registration plate number GBH1366 had collided into the rear part of my lorry, after a white Toyota Hiace van bearing the registration plate number GBH1311E had collided into it. The accident happened near Alexandra exit.

Due to the accident, the metal piece which is fixed below the rear registration plate of my lorry is damaged.

I do not have the particulars of the other drivers as it was raining at that time. We only took photos of the vehicles involved in the accident.

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) Sharifah Amira

Date: 04/12/2020 Time: 1015hrs S/D Ref: 8

Police Post/Unit: Pasir Ris NPC

Original – to be issued to informant
Duplicate – to be submitted to Traffic Police
CONFIDENTIAL