SA1D211E0001 / Autolution Industrial Pte Ltd[408623] ENTRY DATE & TIME: 14/01/2021 16:28 (SGT) SUBMITTED BY: Elmer M Alfonso VERSION: 1 (14/01/2021 16:28 (SGT))

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.

- 4. The issue and acceptance of this is form by instrained 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 14/01/2021 16:28 (SGT) Date of Accident 26/12/2020 23:15 (SGT) Exact Location of Accident Near 5 Saraca Terrace, Singapore 805471 Additional Location Information **CENTRAL EXPRESSWAY** Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Nissan

Vehicle Registration Number GBD2219D

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner KWONG WAH SENG TIMBER TRADING CO P L Company Reg No 199707848W **Email Address** KWSTTCPL@HOTMAIL.COM Mobile Phone No (Phone) +65-63655912 Alternative Phone No (Office) +65-63655912

VEHICLE PARTICULARS

Manufacturer

Model Cabstar Variant Exact purpose for which vehicle was being used at time of **Employment** accident 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 AIG Type of Coverage Comprehensive Fleet Policy Policy Number 2100381081-06 Cover Note Number

DRIVER

Name of Driver ARUNAGIRI KANNADHASAN Passport No/FIN G5179413W Date Of Birth 06/07/1990 Occupation Outdoor

Date Of Driving Pass 28/01/2019 Driving experience 1 YEAR AND 11 MONTHS Gender Mobile Number (Phone) +65-96823265 Alt. Phone Number Email Address KWSTTCPL@HOTMAIL.COM Address 71 NEMESU AVENUE Address complement SEMBAWANG HILLS STATE Postcode 576303 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? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Yes PASSENGER 1 Name YOGESH Gender Male **DETAILS OF POLICE ACTION** Was the accident reported to the police? Police Station Name Sembawang Neighbourhood Police Centre Police Station Phone No (Phone) +65-18005549999 Police Station Address 4 Sembawang Crescent Singapore 757633 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT SEE ATTACHED SKETCH PLAN, PHOTO AND POLICE REPORT ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Nο Was there any audio recorded? No **DETAILS OF OTHER VEHICLE PROPERTY 1**

SKS6999Z

Mercedes

Accident report SA1D211E0001

Vehicle Model

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Variant
Vehicle Colour

Vehicle Category	Private car
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)	-
No. Of Passenger (including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number Vehicle Manufacturer Vehicle Model	SLR5466U Toyota Prius
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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

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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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. 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.
- 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,
- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, acknow ledge, 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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

 ALITOLITION INDUSTRIAL PTE LTD

Policymolder's Signature / Date & Driver's Signature (If driver is not the policyholder) / Date Witnessed by Reporting Centre Personnel Turver Attack

B - S L R 5 466 M CENTRAL EXPRESS WAY

B - S V S 69 99 7

C - GBD2219D

IEDIBDIAD

Describe	Cit	cumsta	ances	of	the	Acciden	t
							_

On 26/12/2000 at about 2315 hrs, our distract Armagini Kangadhasan, Fin Ao:- GF179413W, was disting the
long GBD DD along the CTE touride SLE. Then suddenly before the YTO Chu Keng ext, while heading drawn a slope he
haved a collection sound of the vehicle infront of him, a Marciales valuely with livence plate SKS 69997, colliding into mother
vehicle inform of him, a Tapta vehicle with home plate SLR5466 U. As soon as he heart the count he immediately !
broked but our vehicle still had a soft brough with the vehicle informs of me, which was the Merceles vehicle with the PAL
Ficence plate SKS 69997 as the road was wet and sliggery ofter the heavy hain. There was no time for him to do any
further overtion at the lone are packed with other voltides.
Subsequently, all 3 ar armers alighted and took photos of the 3 volution. As they were obstructing the traffic, they
moved further upfort to the Go Chi King exit and exchange antial numbers. He gave has driving trained decays to the
other 2 vehicle owners that they distrik provide from their driving thence detrils. While he was spedding to the other Zdrivers
he smell alcohol but he was not cure from which of the 2 drivers. Subsequently the 2 other vehicles houtily drove off upon
Kediting the circuit.
The traffic pates and the ambulance arrived of the scence and they quartioned him why he was stopping over these.
As he was the only one left at the scenic he experiment down the accident. They took photos of the company's lowy and my
driver posticulars and autocompanily artists my driver to proceed on.
/

Declaration

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

Policyholder's Signature / Date &

Driver's Signature (if driver is not the policyholder) / Date & Time 4/01/2021 /6:13

Witnessed by Reporting Centre Personnel EVILLE AV

AUTOLUTION INDUSTRIAL PTE LTD 19 UBI ROAD 4 SINGAPORE 40862B TEL 6490 9660 FAK: 68467483

Accident report SA1D211E0001





























Date of Expiry:

Police Station Of Origin: Sembawang N.P.C 4 Sembawang Crescent SINGAPORE 757633

Report No. T/20210113/2154

1 of 4

Tel No: 1800-5549999

Occupation:

DRIVER

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/01/2021 16:44			Vide Report No.:	Station Diary No.: 78		
Informa	nt's Partic	ulars		A REAL PROPERTY OF THE PROPERT		
Name of Informant: ARUNAGIRI KANNADHASAN			Address: 71 NEMESU AVENUE #01-58 SEMBAWANG HILLS ESTATE SINGAPORE 576303			
ID Type / ID No.: FIN NO / G5179413W			Contact No.: Home/Office:	ontact No.:		
Nationality: INDIAN			Email:			
Sex: Age: Date of Birth: Male 30 06/07/1990			Type of Informant: Driver			
Race: Indian			Language:	Institution / School Name:		

Driving Licence Information:

Class: 2B,3

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 26/12/2020 23:15	Type of Location: Bend	
Location: CENTRAL EX	(PRESSWAY	,			
Weather: Heavy rain		Road Surface: Wet		Road Speed Limit:	
Traffic Flow: One Way	4	Traffic Control: Not Controlled		Traffic Volume: Heavy	
Type of Collis Between Mov					

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
GBD2219D	Lorry	NISSAN	CABSTAR 3.0 5M/T ABS 2DR 2WD EURO 5	Gold	Slightly Damaged	1
SKS6999Z	Car	MERCEDES BENZ	CLA180 (R18 BI)	Grey	Slightly Damaged	0



T20210113/2154

Police Station Of Origin: Sembawang N.P.C 4 Sembawang Crescent SINGAPORE 757633 Tel No: 1800-5549999 2 of 4 Report No. T/20210113/2154

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SLR5466U	Car	ТОУОТА	PRIUS HYBRID 1.8E AT ABS D/AIRBAG 2WD		Slightly Damaged	0

Details of Perso	n Involved					
Any Pedestrian I	nvolved: No					
No. of Pedestrian	Use of Pe	Use of Pedestrian Crossing: NA				
Driver					TO STATE	
Name	ARUNAGIRI KANN	ARUNAGIRI KANNADHASAN				G5179413W
Related Vehicle	GBD2219D (Lorry)			Conta	ct No.	96828265
Hospital/Clinic	NIL		Class Drivin Licend Expiry	g	Class: 2B,3 Date of Expiry: NIL	
Date Treatment	NIL	Date Dis	ischarge NIL			
No. of Days granted Medical Leave NIL			Degree o	f Injury	NIL	

Brief Details.

82093803.

On 26/12/2020 at about 2315hr, I was driving my company lorry GBD2219D along CTE heading towards SLE. Before my vehicle arrived at the Yio Chu Kang exit, while heading down a slope I heard a collision sound of the vehicle infront of me, a Mercedes vehicle with license plate SKS6999Z. I noticed that he had collided into another vehicle infront of him, a Toyota vehicle with license plate SLR5466U. As soon as I had heard the sound of the collision, I immediately braked however as it was raining and the road was slippery and wet, I did not manage to stop on time and did not manage to stop on time and had soft brush with the vehicle infront of me, which was the Mercedes vehicle with license plate SKS6999Z. Subsequently we all alighted our vehicles and took pictures. As 3 vehicles were at the slope and obstructing the traffic, we moved further upfront to the Yio Chu Kang exit and exchanged particulars. I provided my driving license details to the other 2 vehicle owners however I do not have their details. The contact number of the Mercedes driver is 98005050 and the contact number of the Toyota driver is

While we were speaking to each other, I smelled alcohol however unsure from which driver. Subsequently the 2 other vehicles hastily drove off upon hearing the sirens.

Traffic Police and ambulance was at scene. They took pictures of my lorry and I provided my particulars to them and subsequently left the scene.

On 05/01/2021, my company namely Kwong Wah Seng Timber Trading CO Pte Ltd received a letter from Traffic police ref TP/IP/00373/2021 and was advised to lodge a police report. I wish to state that I have an incar camera however upon checking, the date for the footage is from 2017 only and no one was injured.



Police Station Of Origin: Sembawang N.P.C 4 Sembawang Crescent SINGAPORE 757633

Tel·No: 1800-5549999



3 of 4 Report No. T/20210113/2154

CONTINUATION OF REPORT





Police Station Of Origin: Sembawang N.P.C 4 Sembawang Crescent SINGAPORE 757633 Tel No: 1800-5549999 4 of 4 Report No. T/20210113/2154

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: L / Sgt 1 LIM JING KAI, DARYL JEROME	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Fime: 13/01/2021 16:44
Officer In Charge Of Case: TP / GIT / Sgt 3 MUHAMMAD AFIQ BIN RAHMAT Contact No.: 65476171	Classification Of Case:
Authentication Stamp NP168 NP168 NP168	ice Force