

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 20/04/2021 15:09 (SGT)
Date of Accident 16/04/2021 07:30 (SGT)
Exact Location of Accident Near Westwood Sec Sch, Singapore
Additional Location Information ALONG JALAN BAHAR INFRONT OF WESTWOOD
SECONDARY SCHOOL
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBE725S

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner PLUTO SYSTEM ENGINEERING PTE. LTD.
Company Reg No 201716303C
Email Address SAIFUL@BSMENG.COM
Mobile Phone No (Phone) +65-93590914
Alternative Phone No (Office) +65-93590914

VEHICLE PARTICULARS

Manufacturer Nissan
Model Cabstar
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
Transmission Manual
CC 2998

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DMCVSNW00124752000
Cover Note Number -

DRIVER

Name of Driver SARKER MD MAHMUDUL

Work Permit No	G8528177T
Date Of Birth	27/12/1998
Occupation	Outdoor
Date Of Driving Pass	06/11/2020
Driving experience	5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-82697282
Alt. Phone Number	-
Email Address	SARKERMAHMUDUL69@GMAIL.COM
Address	BLK 548A MACPHERSON ROAD
Address complement	-
Postcode	368227
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	3
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)	9
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	HAQUE MD RAHIMUL
Gender	Male

PASSENGER 2

Name	VAWAL AMIT
Gender	Male

PASSENGER 3

Name	NANDAN
Gender	Male

PASSENGER 4

Name	AMIT PRANTUSTA BARAI
Gender	Male

PASSENGER 5

Name	MARIMUTHU BALAMURUGAN
Gender	Male

PASSENGER 6

Name	RAHMAN SAIDUR
Gender	Male

PASSENGER 7

Name	MIA MAMUN
Gender	Male

PASSENGER 8



Name MUTHALAGU MAHARAJAN
Gender Male

DETAILS OF POLICE ACTION

Was the accident reported to the police? Yes
Police Station Name Nanyang Neighbourhood Police Centre
Police Station Phone No (Phone) +65-18007929999
Alt. Police Station Phone No (Fax) +65-67912972
Police Station Address No. 2 Jurong West Avenue 5 Singapore 649482
Was notice of intended Prosecution given? No
If yes, against whom? -

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT NO: T/20210420/2027.

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 SGL6548B
Vehicle Manufacturer Chevrolet
Vehicle Model Aveo5
Vehicle Variant -
Vehicle Colour Red
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) -

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SMQ2776M
Vehicle Manufacturer Honda
Vehicle Model Shuttle
Vehicle Variant -
Vehicle Colour Gray
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

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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 compliance with requirements under any regulations, laws or court orders.



Policyholder's Signature
Date & Time:

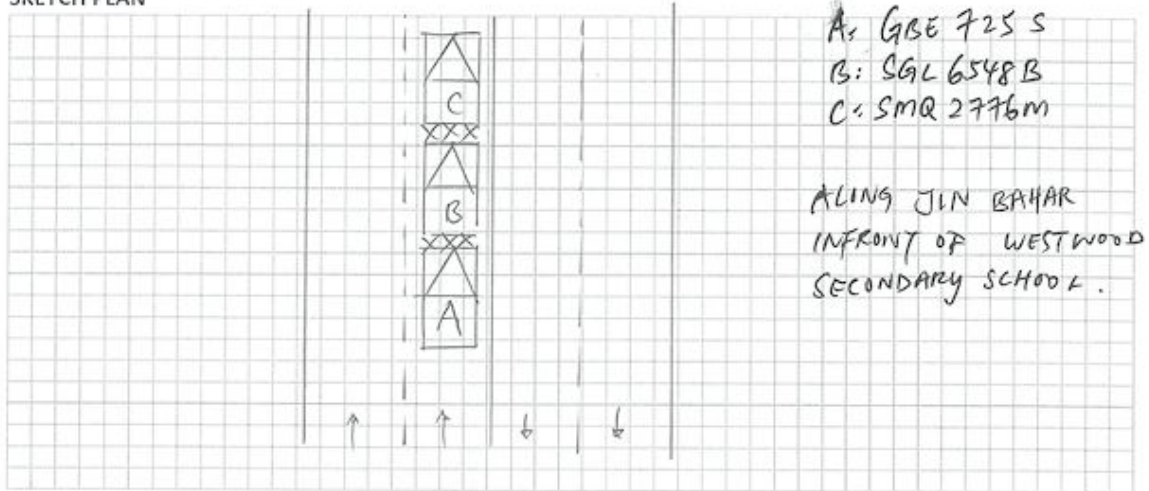


Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report no: 7/20210420/2027.

DECLARATION

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


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.:



















SINGAPORE
POLICE FORCE



T/20210420/2027

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

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Report No. T/20210420/2027

CONTINUATION OF REPORT

exchange particulars. The particulars of the driver from the red colour vehicle is as follows: Name: Thirunaugarasu S/O Tangavellu, NRIC: S7004809D, HP: 81804094. The particulars of the driver from the black colour vehicle is as follows: Name: Ho Hai Hwa, NRIC: S7821469D, HP: 91518994. All the vehicles were damages. The front of my lorry had dents, The front right headlight was broken and the front bumper was also damaged. The red colour car had damages to the back and the front. The back had dents, the front boot was broken, both the front headlights were damaged, the front bumper was also damaged and there were also multiple scratches on the front of the car. The dark blue colour car had damages to the rear of the car. There were scratches and dents.

No one was injured during the incident. Ambulance and Traffic Police were not at scene. This is second time I have been involved in an accident



**SINGAPORE
POLICE FORCE**



T/20210420/2027

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Report No. T/20210420/2027

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

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:

J /
SC2 RAHIK RAHMAN

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
20/04/2021 10:51

Officer In Charge Of Case:
TP / GIA /
Staff Sgt WONG SIEU LUI
Contact No.: 65476229

Classification Of Case:

Authentication Stamp
NP168

<p>SINGAPORE POLICE FORCE SAFEGUARDING EVERY DAY</p>	
SIGNATURE	



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

Motor Commercial

MZ300/C

N SN

AN0628A

Cov. Type:C

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1969
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE No.

DMCVSNW00124752000

Engine No.: ZD30347019K

Cha. No.: JN1SC2F24Z0857223

1. Index Mark and Registration
Number of Vehicle

GBE725S

AUTOSAFE

2. Name of Policy Holder

PLUTO SYSTEM ENGINEERING PTE LTD

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

17/12/2020
(00:00:00)

Excess Sect I . S\$500.00
EX ON WINDSCREEN . S\$100.00

4. Date of Expiry of Insurance

16/12/2021

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.

HIRE PURCHASE CO.: PIONEER AUTO

* 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:
NSK INSURANCE AGENCY
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