

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 17/03/2021 16:32 (SGT)
Date of Accident 08/03/2021 06:50 (SGT)
Exact Location of Accident 960 Woodlands Rd, Singapore 738702
Additional Location Information ALONG KJE NEAR LAMP POST NO:361
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number YM9932L

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner AUSTIN ENERGY (ASIA) PTE LTD
Company Reg No 1XXXXX257H
Email Address THAHIRUL_HASSAN@NORDICGROUPLIMITED.COM
Mobile Phone No (Phone) +65-81007128
Alternative Phone No (Office) +65-68803001

VEHICLE PARTICULARS

Manufacturer Nissan
Model Mkb37
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? Yes
Vehicle Category Commercial vehicle

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DMCVSNA00095672000
Cover Note Number -

DRIVER

Name of Driver NOOR AZMAN BIN MOHAMED
NRIC No SXXXX497G
Date Of Birth 28/09/1968
Occupation Outdoor

Date Of Driving Pass	19/01/2009
Driving experience	12 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-83074393
Alt. Phone Number	-
Email Address	ZARINAOMAR70@GMAIL.COM
Address	BLK 540 BUKIT BATOK STREET 52
Address complement	#04-509
Postcode	650540
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	Collision - Head to Rear
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?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	14
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	VINOD KUMAR
Gender	Male

PASSENGER 2

Name	RAMESH SATHEESH
Gender	Male

PASSENGER 3

Name	ALI MOHAMMAD HASMOT
Gender	Male

PASSENGER 4

Name	SEKH AMIR HOSEN
Gender	Male

PASSENGER 5

Name	RAHMAN SHAFIKUR
Gender	Male

PASSENGER 6

Name	SURESH KUMAR NISAD
Gender	Male

PASSENGER 7

Name	MUKHTAR
Gender	Male

PASSENGER 8

Name	ARUMUGAM ANBAZHAHAN
Gender	Male

PASSENGER 9

Name YADAV SHYAM DEV
 Gender Male

PASSENGER 10

Name KAILASH KUMAR
 Gender Male

PASSENGER 11

Name RAJU AJIN
 Gender Male

PASSENGER 12

Name JAYARAMAN RAJAGURU
 Gender Male

PASSENGER 13

Name SYED ABDUL KADAR MOHAMED YASHAR ARAFATH
 Gender Male

DETAILS OF POLICE ACTION

Was the accident reported to the police? Yes
 Police Station Name Hong Kah North Neighbourhood Police Post
 Police Station Phone No (Phone) +65-18005679999
 Alt. Police Station Phone No (Fax) +65-65652508
 Police Station Address Blk 370 Bukit Batok Street 31 #01-201 Singapore 650370
 Was notice of intended Prosecution given? No
 If yes, against whom? -

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT NO: T/20210308/2146.

ON THE STATED DATE & TIME, I WAS TRAVELLING STRAIGHT ALONG KJE NEAR LAMP POST NO:361 IN THE EXTREME LEFT LANE. SUDDENLY LORRY TRUCK B JAMMED BRAKE. I MANAGED TO SLOW DOWN AND BRAKE BUT STILL SKIDDED AND HIT ONTO THE RIGHT REAR PORTION OF THE LORRY TRUCK B. I CANNOT EMERGENCY BRAKE BECAUSE TOO MANY PASSENGERS IN MY LORRY.

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 XD6852M
 Vehicle Manufacturer -
 Vehicle Model -
 Vehicle Variant -
 Vehicle Colour -
 Vehicle Category Commercial vehicle
 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) -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	RAJU AJIN
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURIES
Injured person in which vehicle?	YM9932L
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	Yes

INJURED 2

Name of injured person	NOOR AZMAN BIN MOHAMED
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURIES
Injured person in which vehicle?	YM9932L
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	Yes

INJURED 3

Name of injured person	JAYARAMAN RAJAGURU
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURIES
Injured person in which vehicle?	YM9932L
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	Yes

SKETCH PLAN**IMPORTANT NOTICE**

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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:

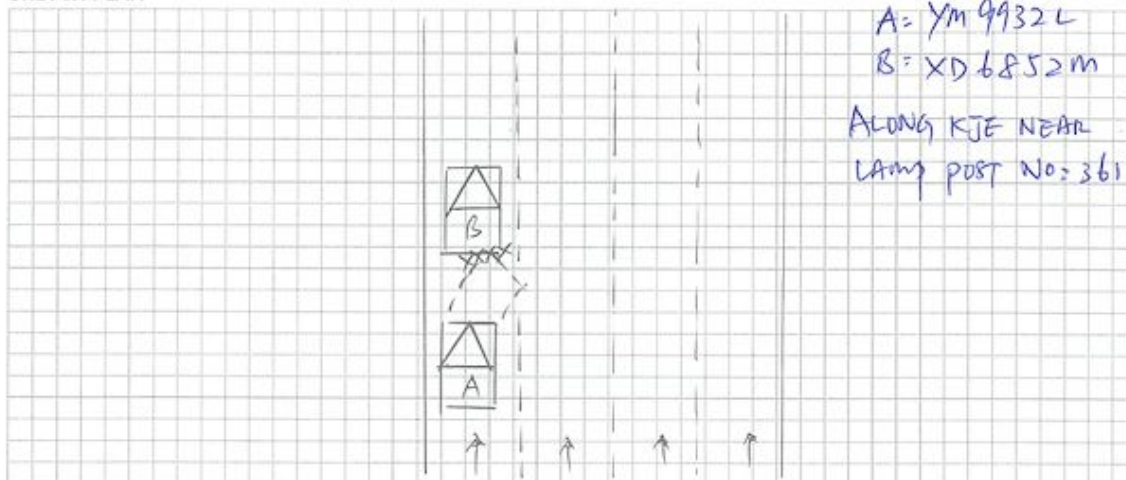
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.


 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: 20210308/2146.

ON THE STATED DATE & TIME, I WAS TRAVELLING STRAIGHT ALONG KJE NEAR LAMP POST NO: 361 IN THE EXTREME LEFT LANE. SUDDENLY LORRY TRUCK B JAMMED BRAKE. I MANAGED TO SLOW DOWN AND BRAKE BUT STILL SKIDDED AND HIT ONTO THE RIGHT REAR PORTION OF THE LORRY TRUCK B. I CANNOT EMERGENCY BRAKE BECAUSE TOO MANY PASSENGERS IN MY LORRY.

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/20210308/2146

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Report No. T/20210308/2146

Police Station Of Origin:
Hong Kah North NPP
370 Bukit Batok Street 31 #01-201
SINGAPORE 650370
Tel No: 1800-5679999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/03/2021 21:00	Vide Report No.: E/20210308/0029	Station Diary No.: 45
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Informant's Particulars

Name of Informant: NOOR AZMAN BIN MOHAMED			Address: APT BLK 540 BUKIT BATOK STREET 52 #04-509 SINGAPORE 650540	
ID Type / ID No.: NRIC NO / S6833497G			Contact No.: Home/Office: Mobile: 83074393	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 52	Date of Birth: 28/09/1968	Type of Informant: Driver	
Race: Boyanese			Language:	Institution / School Name:
Occupation: Lorry driver			Driving Licence Information: Class: 3,4 Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 08/03/2021 06:50	Type of Location: Straight Road
Location: KRANJI EXPRESSWAY				
Lamp Post Number: 361				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head On				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKW4483L	Car	HYUNDAI	ACCENT	Blue	Slightly Damaged	0
XD6852M	Lorry	ISUZU		Green	Slightly Damaged	0
XE1303J	Lorry					0
YM9932L	Lorry	NISSAN		White	Seriously Damaged	13



**SINGAPORE
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Report No. T/20210308/2146

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Passenger			
Name	RAJU AJIN	ID No.	G8514494X
Related Vehicle	YM9932L (Lorry)	Contact No.	84323106
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	08/03/2021	Date Discharge	08/03/2021
No. of Days granted Medical Leave	05	Degree of Injury	Slight
Driver			
Name	NOOR AZMAN BIN MOHAMED	ID No.	S6833497G
Related Vehicle	YM9932L (Lorry)	Contact No.	83074393
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Passenger			
Name	JAYARAMAN RAJAGURU	ID No.	G8908919R
Related Vehicle	YM9932L (Lorry)	Contact No.	81356974
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	08/03/2021	Date Discharge	08/03/2021
No. of Days granted Medical Leave	05	Degree of Injury	Slight



**SINGAPORE
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370 Bukit Batok Street 31 #01-201
SINGAPORE 650370
Tel No: 1800-5679999



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Report No. T/20210308/2146

CONTINUATION OF REPORT

Passenger			
Name	SEKH AMIR HOSEN	ID No.	G2803231K
Related Vehicle	YM9932L (Lorry)	Contact No.	93443356
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	08/03/2021	Date Discharge	08/03/2021
No. of Days granted Medical Leave	05	Degree of Injury	Slight

Brief Details.

On the above mentioned date, time and location. I am driving my lorry (V2, YM9932L) on the most left lane near PIE LP: 361. Suddenly, a lorry (V1, XD6852M) apply e-brake, skidded and swerve left. As I have 13 passengers behind, I tried to brake harder rather than e-brake but still unable to stop and move away in time so the side of V2 collided onto V1 rear right side. I then alight V2 and check on my passenger. 3 of my passengers informed that they are injured and 1 of them was bleeding from the back of his head. I called for ambulance.

P1) Jayaraman Rajaguru was bleeding from the back of his head due to knocking his head onto the left pole of V2.

P2) Sekh Amir Hosen and P3) Raju Ajin felt pain from the right arm due to knocking their arm onto the rear of V2's head.

Ambulance and Traffic police then came to scene. P1 to P3 were conveyed to NTFGH conscious. All three of them have been discharged and given 5 days of MC.

While Traffic police and Ambulance were at scene, at about 0720hrs, an accident between a car (V3, SKW4483L) and a lorry (V4, XE1303J) happened behind us whereby V4 collide onto the V3 rear right side causing V3 to lose control and collided head on to the right side of V2.

V2 is not equipped with an in-car-camera.

I am not injure however I feel slight giddiness. I will continue to observe my condition before deciding to see a doctor.



**SINGAPORE
POLICE FORCE**

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SINGAPORE 650370
Tel No: 1800-5679999



T/20210308/2146

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Report No. T/20210308/2146

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 /
Sgt 3 TAN HUAY HOCK

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT
Sr Staff Sgt SYED MUHAMMAD BIN SYED
FARID ALBAR
Contact No.: 65476200

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

08/03/2021 21:00

Classification Of Case:



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

N SN

BR0060A

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.

DMCV5NA00095672000

Engine No.: J08EUC10300

Cha. No.: MKB378L00133

1. Index Mark and Registration
Number of Vehicle

YM9932L

2. Name of Policy Holder

AUSTIN ENERGY (ASIA) PTE LTD

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

01/10/2020

Excess Sect I,

\$5800.00

EX ON WINDSCREEN,

\$5100.00

4. Date of Expiry of Insurance

30/09/2021

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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: Moses Chia Wen Jye
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