

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 09/06/2021 11:25 (SGT)
Date of Accident 08/06/2021 08:55 (SGT)
Exact Location of Accident Tuas Rd, Singapore
Additional Location Information TOWARDS PIONEER
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number YN2823J

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner CHOON HIN IRON WORKS PTE LTD
Company Reg No 201103916E
Email Address info@choonhingroup.com
Mobile Phone No (Phone) +65-64428080
Alternative Phone No (Office) +65-64428080

VEHICLE PARTICULARS

Manufacturer Mitsubishi
Model Fe83beosrdea
Variant -
Exact purpose for which vehicle was being used at time of accident Private use
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Commercial vehicle
Transmission Manual
CC 2977

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DMCVSNW00034212107
Cover Note Number -

DRIVER

Name of Driver PARAMASIVAM KRISHNAMOORTHY
Work Permit No G2423130K

Date Of Birth	05/04/1982
Occupation	Outdoor
Date Of Driving Pass	15/01/2016
Driving experience	5 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91887223
Alt. Phone Number	-
Email Address	info@choonhingroup.com
Address	3 JOO KOON CRESCENT
Address complement	-
Postcode	629008
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	Raining
Road Surface	Wet

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?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	19
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	PASSENGER
Gender	Male

PASSENGER 2

Name	PASSENGER
Gender	Male

PASSENGER 3

Name	PASSENGER
Gender	Male

PASSENGER 4

Name	PASSENGER
Gender	Male

PASSENGER 5

Name	PASSENGER
Gender	Male

PASSENGER 6

Name	PASSENGER
Gender	Male

PASSENGER 7

Name	PASSENGER
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Jurong West Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002689999
Alt. Police Station Phone No	(Fax) +65-62672438
Police Station Address	700 Corporation Road Singapore 649818
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

Please refer to police report

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	CB7426M
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Bus
Name of Driver	LIM CHEE KEONG
NRIC No	S1756502H
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	MANIK MOHAMED
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	LEFT ELBOW
Injured person in which vehicle?	YN2823J
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	No

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.



Policyholder's Signature / Date & Time

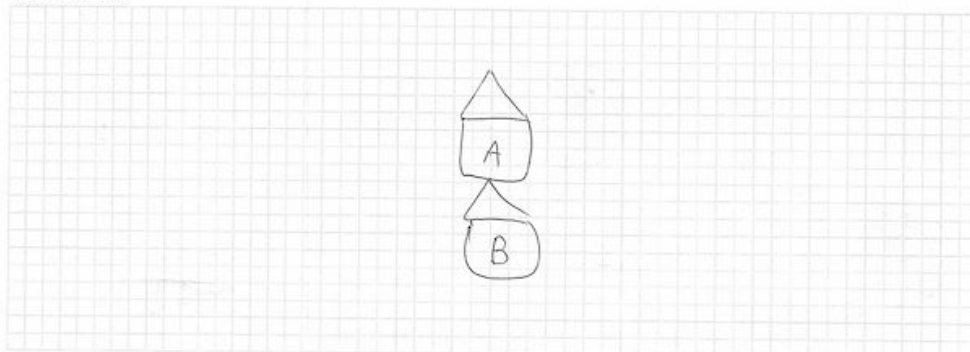
[Signature]

Driver's Signature (if driver is not the policyholder) / Date & Time



Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

REFER TO POLICE REPORT

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

[Handwritten Signature]

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



AUTHORIZE GIA REPORT TO E-MAIL
SME MOTOR SERVICE@SME MOTOR-COM-SG



Witnessed by Reporting Centre Personnel













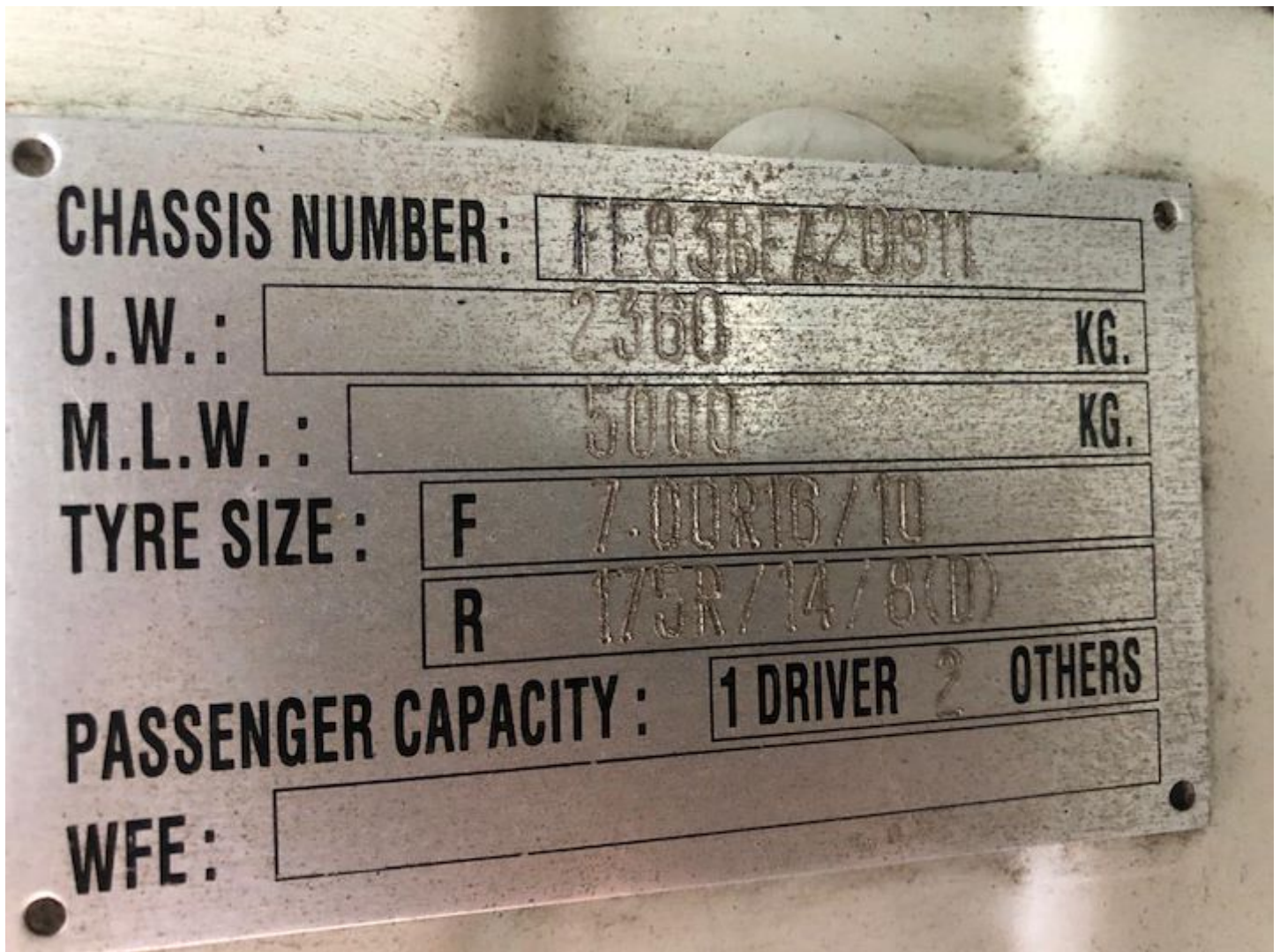














**SINGAPORE
POLICE FORCE**



J/20210608/2071

1 of 2

POLICE REPORT (NP299)

Report No. J/20210608/2071

Police Station Of Origin
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

Date/Time Report Made 08/06/2021 16:56	Vide Report No.	Station Diary No. 80
Name Of Informant PARAMASIVAM KRISHNAMOORTHY	Address APT BLK 3 Joo Koon Crescent SINGAPORE	
ID Type / ID No. FIN NO / G2423130K	Contact No. Home/Office	Mobile 94551927
Nationality INDIAN	Email Address	
Occupation Lorry driver	Sex Male	Age 39
Institution/School Name	Date of Birth 05/04/1982	Race Indian
Date/Time Of Incident 08/06/2021 08:55	Location Of Incident TUAS ROAD SINGAPORE	

Brief details.

On 08/06/2021 at about 0855hrs, I was driving company lorry, YN2823Z, along Tuas Road towards Pioneer Road. In the lorry there were around 18 passenger in the vehicle. While I was driving, there is a car were stop before the roundabout thus I stop my lorry behind the said vehicle. Subsequently, there is bus, CB7426M, were driving behind my vehicle did not stop and had collided on the rear part of the lorry. Myself and the bus driver then meet up and we then exchange particulars. One of my passenger, Manik Mohamed, suffer some injury on his left elbow thus I bring him to seek medical attention. I told the bus driver that my company will be contacting him on the matter. Manik Mohamed received 1 day MC. My company is aware on the incident and had advised me to lodge a report for insurance claiming.

Signature Of Officer Recording The Report: J / Sgt 1 MUHAMMAD AQIL BIN MUHAMMAD TASRIN	Signature Of Informant: <i>[Signature]</i>
Signature Of Interpreter: Not applicable	Date/Time: 08/06/2021 16:56
Officer In-Charge Of Case: J / Jurong Police Divisional Investigation Branch / SI MOHAMMAD HASNI BIN MOHAMED HASHIM Contact No.: 67910000	Classification Of Case:

Authentication Stamp





SINGAPORE
POLICE FORCE



J/20210608/2071

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20210608/2071

Subjects Involved			
Others			
Person Name	Manik Mohammad		
ID Type	FIN NO	ID No	G2482064K
Gender	Male	Age	33
Nationality	BANGLADESHI	Race	Bangladeshi
Language	English	Mobile No	84054962
Person Name	Lim Chee Keong		
ID Type	NRIC NO	ID No	S1756502H
Gender	Male	Nationality	SINGAPORE CITIZEN
Race	Chinese	Mobile No	98185947

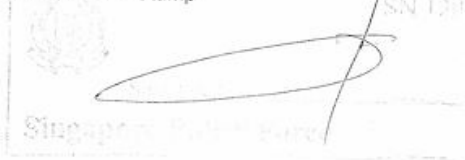
Signature Of Officer Recording The Report:

J / Sgt 1 MUHAMMAD AQIL BIN-MOHAMMAD
TASRIN

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:
J / Jurong Police Divisional Investigation Branch /
SI MOHAMMAD HASNI BIN MOHAMED HASHIM
Contact No.: 67910000

Authentication Stamp



Signature Of Informant:

Date/Time:
08/06/2021 16:56

Classification Of Case:



J/20210608/2074

Case Summary Form (CSF)

1 of 1

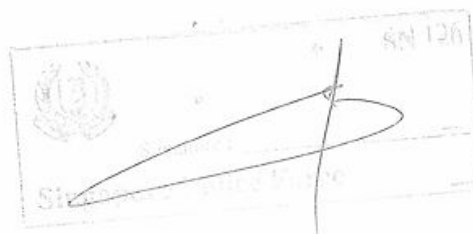
Report No. J/20210608/2074

Manual Form Serial No J/20210608/2071
Report Number J/20210608/2074
Vide Report Number J/20210608/2071
Date/Time of Report Made 08/06/2021 17:13
Place Report Lodged Jurong West N.P.C
Name of Informant PARAMASIVAM KRISHNAMOORTHY
ID Type / ID No. FIN NO / G2423130K
Home/Office
Mobile 94551927
Email
Date/Time of Incident From 08/06/2021 08:55
Date/Time of Incident To
Incident Location TUAS ROAD SINGAPORE

Brief Facts

Reference to J/20210608/2071, I would like to amend my report as the correct vehicle number for my vehicle is YN2823J. That's all.

Case Sensitivity No
Officer-in-Charge of Case J / Jurong Police Divisional Investigation Branch /
MOHAMMAD HASNI BIN MOHAMED HASHIM
Contact No. 67910000
Classification of Case 1) NO OFFENCE DISCLOSED





Co. Reg No. 201103916E

CHOON HIN IRON WORKS PTE LTD

3 Joo Koon Crescent, Singapore 629008

Tel: (65) 6442-8080 Fax: (65) 6442-0088

Email: info@choonhingroup.com

Ref No: CHIW-HR-2021-002

09 June 2021

Choon Hin Stainless Steel Pte Ltd
140 Gul Circle Singapore 629601

Dear Sir / Madam,

RE: AUTHORISED TO DRIVE VEHICLE NO YN2823J

This letter to confirm that we allowed staff of Choon Hin Stainless Steel Pte Ltd PARAMASIVAM KRISHNAMOORTHY Fin no: G2423130K to drive vehicle no YN2823J.

Please do not hesitate to contact me @ 6951 8103 if you need further assistance.

Thank you for prompt attention to this matter and look forward your reply.

Yours Faithfully,

Kaye

ADMIN/HR Department