# **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.

  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 14/07/2021 10:41 (SGT) Date of Accident 13/07/2021 17:00 (SGT) Exact Location of Accident Singapore Additional Location Information JUNTION OF BEDOK NORTH AVE 3 Country/State of Loss Singapore

# **DETAILS OF OWN VEHICLE**

Vehicle Registration Number YP6279T

## INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner METAQUIP TC INDUSTRIAL PTE LTD Company Reg No 199305621Z **Email Address** jonathan\_goh@tanchong.com Mobile Phone No (Phone) +65-87775119 Alternative Phone No (Office) +65-62653666

## VEHICLE PARTICULARS

Manufacturer JAC Model LORRY 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 Transmission Manual CC 2776

## **INSURANCE COMPANY**

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd. Type of Coverage Comprehensive Fleet Policy Policy Number 999993682-100835473-00000 Cover Note Number

# DRIVER

Name of Driver PALANIVEL SELVAM Passport No/FIN G2530622N

Date Of Birth 27/07/1979 Occupation Outdoor Date Of Driving Pass 12/02/2015 Driving experience 6 YEARS AND 5 MONTHS Gender Mobile Number (Phone) +65-82836079 Alt. Phone Number Email Address selvamp14@gmail.com Address NO 3 JALAN KIRIAN Address complement Postcode Is the driver the policyholder? No If No. Relationship of the Driver with the Insured Hirer Does Driver Own Other Vehicles? Nο 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 - Change/cross lane 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? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No **DETAILS OF POLICE ACTION** Was the accident reported to the police? 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? Nο If yes, against whom? CIRCUMSTANCES OF ACCIDENT 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? **DETAILS OF OTHER VEHICLE PROPERTY 1** Vehicle Registration Number SGH7239H Vehicle Manufacturer Honda

Jazz

Private car

Vehicle Model

Vehicle Variant
Vehicle Colour
Vehicle Category

Name of Driver	HUNDANI LIE
Contact Number	(Phone) +65-82989017
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 Formmust 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)

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' 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.

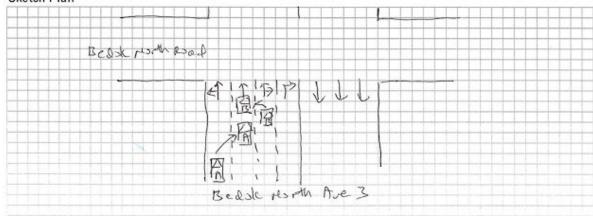
p. 30 Nom.

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

TC AutoClinic Pte Lto 1 SIXTH LOK YANG ROAD SINGAPORE 628089 TEL: 6262 2212 FAX: 6262 3692

Witnessed by Reporting Centre Personnel

# Sketch Plan



Describe Circumstances of the Accident
Twen travelling along Belok Moth Are 3 approaching jurcher of Borock Moth Road. I hanged lane I than lane 4 to lane 3. Vehile B charged lane from lane 2 to lane 3, As the trathe light turned red, rehill B suddenly of p in front of the traffic light. I applied brake to top to stop my rehile but cannot stop in home doe to the west ordinary of the rear of vehile B.
approaching jurcher of Robole Morth Road. I changed
lane I from lare 4 to lone 3. Vehille B charged
lane from lane 2 to lone 3. As the truthe light
turned red, retirel B subserly stop in front
of the traffic light. I applied brace to to to stop
my reliable but carnot stop in time due to the
wet writing at the road. I accidentally wit
the rear at vehille B.
DESTRUCTION OF THE PROPERTY OF
Applicate Application of the second s
10,000 00
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# Declaration

IWe 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

TC AMOCHUIC PER LIO 1 SUTTH LOK YANG ROAD SINGAPORE 629090 TEL: 6262 2212 FAX: 6262 3662

Witnessed by Reporting Centre Personnel







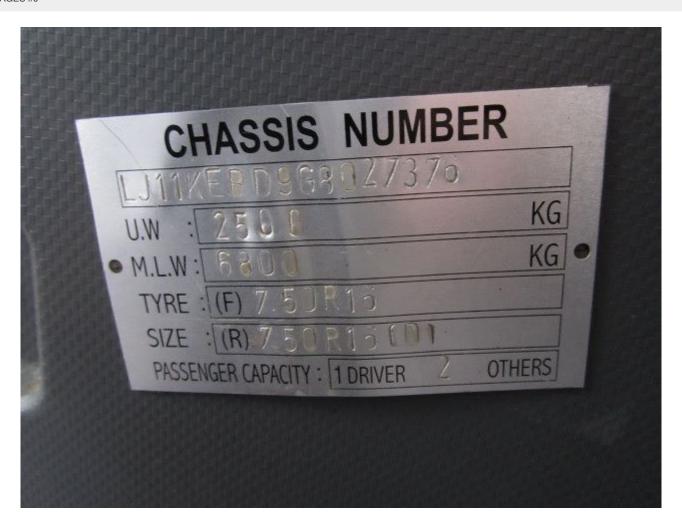


















Date of Expiry:

13/07/2021 17:00

Police Station Of Origin: Jurong West N.P.C

700 Corporation Road SINGAPORE 649818

Tel No: 1800-2689999

REPORT OF A TRAFFIC ACCIDENT

1 of 3 Report No. T/20210714/2019

Date/Time Report Made: 14/07/2021 08:37	Vide Report No.: Station Diary No.:		
Informant's Particulars			
Name of Informant: PALANIVEL SELVAM	Address:		
ID Type / ID No.: FIN NO / G2530622N	Contact No.: Home/Office:	Mobile: 82836079	
4.4	and 12		

Nationality: Email: INDIAN Sex: Date of Birth: Type of Informant: Age: Male 41 27/07/1979 Driver Race: Language: Institution / School Name: Others Occupation: Driving Licence Information:

General Information of the Accident

Type of Non-Injury Drink Date/Time of Accident: X-Junction

Class: 2B,3

Accident: Location:

BEDOK NORTH AVENUE 3

CONSTRUCTION WORKER

Lamp Post Number: 21A

Weather: Road Surface: Road Speed Limit: Wet

Road Surface: Road Speed Limit: Wet

No

Traffic Flow: Traffic Control: Traffic Volume:
Two Way Traffic Light - Working Light

Type of Collision:

Between Moving Vehicles - Head To Rear

Anyone conveyed by ambulance:
No

Details of Vehicle Involved Vehicle No. Make Model Color Condition No of Passenger Type SGH7239H Car HONDA JAZZ 1.4A Blue Slightly 0 Damaged YP6279T JAC HFC1068K White Slightly Lorry 2.8 MT Damaged

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





2 of 3

Report No. T/20210714/2019

Police Station Of Origin: Jurong West N.P.C

700 Corporation Road SINGAPORE 649818

Tel No: 1800-2689999

CONTINUATION OF REPORT

Driver						
Name	Hundani Lie		ID No.		S6981270H	
Related Vehicle	SGH7239H (Car)		Contact No.		82989017	
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date		Class: 3 Date of Expiry: NIL	
Date Treatment	NIL		Date Disc	harge	NIL	
No. of Days granted Medical Leave NIL		Degree o	of Injury NIL			
Driver				Man and		
Name	PALANIVEL SELVAM		ID No.		G2530622N	
Related Vehicle	YP6279T (Lorry)		Contact No.		82836079	
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date		Class: 2B,3 Date of Expiry: 10/02/2025	
Date Treatment	NIL Da		Date Disc	Discharge NIL		
No. of Days gran	ted Medical Leave	NIL	Degree o	f Injury	NIL	

## Brief Details.

On 13/7/2021, at about 1700hrs, I was driving my vehicle bearing the plate number YP6279T along Bedok North Ave 3. I was on Lane 3, driving straight. As I was about to drive past the traffic light, a car bearing the plate number SGH7239H suddenly switched lane from Lane 2 to my lane, Lane 3. I quickly applied the brakes, however I was unable to stop my vehicle in time as it was raining and the road surface was wet. My vehicle then collided into the rear of the other vehicle. My vehicle suffered slight damages to the front. The other vehicle suffered damages to the rear and also the rear windscreen was shattered. No police or ambulance attended to the scene.

I am lodging this report for insurance purposes.





3 of 3

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

Report No. T/20210714/2019

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 <u>report number</u> as reference.

Signature Of Officer Recording The Report:  J /  Sgt 3 CHANG WAI CHUNG, MARC	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 14/07/2021 08:37
Officer In Charge Of Case: TP / GIA / SI TAN JEOK LENG Contact No.: 65476151	Classification Of Case:
Authentication Stamp NP168 Signature: Singapore Police Force	



HOTLINE TEL: (65) 6419-3000

# 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)

M.Z.301

COMPREHENSIVE COMMERCIAL MOTOR

CERTIFICATE NO. 999993682/100835473-00000

OWN DAMAGE EXCESS WINDSCREEN EXCESS

\$\$1,000.00 (1) S\$100.00

SUM INSURED S\$1.00 INSURING WITH COEIPARF YES

1) VEHICLE REGISTRATION NO.

2) NAME OF INSURED

YP6279T

Metaquip TC Industrial Pte Ltd

3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT

1 Jan 2021

4) DATE OF EXPIRY OF INSURANCE

31 Dec 2021

5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE \*

Any person who is driving on the Insured's order or with their permission. An additional Young and Inexperienced Driver (YIDR) Excess of \$\$3,000 (unless otherwise stated) applies to any drivers(named and unnamed) who is below age 23 or has less than 2 years driving experience.

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) LIMITATION AS TO USE \*

Use for the carriage of passengers or goods in connection with the Insured's business.

Use for social, domestic, pleasure purposes and business purposes of any person whom the vehicle is hired. The Policy does not cover

1) Use for racing, pace-making, reliability trial or speed-testing.

2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.
3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.

LOSS OF USE NOT INCLUDED

\* NAMED DRIVER

HIRE PURCHASE COMPANY NA

\* 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.

17 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).

Issued At Singapore 9 Feb 2021

AIG ASIA PACIFIC INSURANCE PTE. LTD.

TAN CHONG CREDIT PTE LTD 913 BUKIT TIMAH ROAD TAN CHONG MOTOR CENTRE SINGAPORE 589623

Authorised Representative

ORIGINAL

SSCNEY