

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 | 18/08/2021 13:28 (SGT) |
| Date of Accident | 17/08/2021 14:53 (SGT) |
| Exact Location of Accident | Singapore |
| Additional Location Information | KJE/ PIE |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

Vehicle Registration Number YP3257B

INSURED/POLICYHOLDER

| | |
|--------------------------|--------------------------------|
| Is company? | Yes |
| Name Of Registered Owner | Kwan Yong Construction Pte Ltd |
| Company Reg No | 1XXXXX800E |
| Email Address | normah.ali@kwanyong.com.sg |
| Mobile Phone No | (Phone) +65-68982323 |
| Alternative Phone No | +65-68982323 |

VEHICLE PARTICULARS

| | |
|--|--------------------|
| Manufacturer | Mitsubishi |
| Model | Canter |
| Variant | - |
| Exact purpose for which vehicle was being used at time of accident | - |
| Are you claiming under your own insurance policy for repair to your vehicle? | Yes |
| Vehicle Category | Commercial vehicle |
| Transmission | Manual |
| CC | 2998 |

INSURANCE COMPANY

| | |
|---------------------------|----------------------|
| Name of Insurance Company | Lonpac Insurance Bhd |
| Type of Coverage | Comprehensive |
| Fleet Policy | No |
| Policy Number | Z20VC05006467 |
| Cover Note Number | - |

DRIVER

| | |
|-----------------|---------------------|
| Name of Driver | Chinnaiah Rajakumar |
| Passport No/FIN | GXXXX000Q |

| | |
|--|----------------------------|
| Date Of Birth | 03/07/1995 |
| Occupation | Outdoor |
| Date Of Driving Pass | 17/10/2019 |
| Driving experience | 1 YEAR AND 10 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-87319272 |
| Alt. Phone Number | - |
| Email Address | normah.ali@kwanyong.com.sg |
| Address | 11 Joo Koon Crescent |
| Address complement | - |
| Postcode | 629022 |
| 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 | 3 |
| Was anybody injured in the Accident? | No |
| Was any injured conveyed to hospital by ambulance? | - |
| Was any other vehicle or property damaged? | Yes |
| Number of Passengers (Including Driver) | 1 |
| 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? | No |
| Was notice of intended Prosecution given? | No |
| If yes, against whom? | - |

CIRCUMSTANCES OF ACCIDENT

On 17/08/2021, @ about 14:53 hrs, my vehicle was travelling along KJE/ PIE when suddenly, front vehicle braked, I immediately braked but could not stop in time, hence hitting into vehicle in front (unknown, tipper truck). I alighted my vehicle from the passenger's side window and went down to the road to signal for other drivers to switch lane. i could not take my breakdown signage which was at the back of my seat, hence I alighted my vehicle to direct traffic. Suddenly, vehicle C, XD7055R came along and hit into my vehicle's rear right side.

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 | UNKNOWN |
| Vehicle Manufacturer | - |
| Vehicle Model | - |
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Commercial vehicle |
| Name of Driver | - |

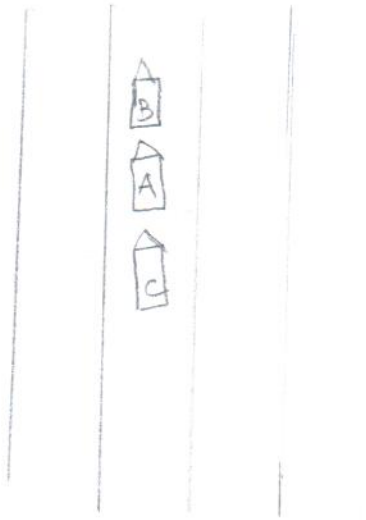
| | |
|---|---|
| Contact Number | - |
| Address | - |
| Address complement | - |
| Postcode | - |
| Insurance Company Name | - |
| Nature Of Damage | - |
| Details of property damaged in accident | - |
| No. Of Passenger (Including Driver) | - |

DETAILS OF OTHER VEHICLE PROPERTY 2

| | |
|---|----------------------|
| Vehicle Registration Number | XD7055R |
| Vehicle Manufacturer | - |
| Vehicle Model | - |
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Commercial vehicle |
| Name of Driver | Jaganathan Alagiri |
| Passport No/FIN | FXXXX023X |
| Contact Number | (Phone) +65-82082637 |
| Address | - |
| Address complement | - |
| Postcode | - |
| Insurance Company Name | - |
| Nature Of Damage | - |
| Details of property damaged in accident | - |
| No. Of Passenger (Including Driver) | - |

SKETCH PLAN

A-YP3257B
B- UNKNOWN
C- XD7055R



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

on 17/8/21, @ about 14:53 hrs, my vehicle was traveling along

KSE/PE, when suddenly front vehicle braked, I immediately braked

but could not stop in time, hence hitting into vehicle in front (unknown, tipper truck

I alighted my vehicle from the passenger's side window and went down

to the road to signal for other drivers to switch lane. I could not

take my breakdown signage which was at the back of my seat, hence

I alighted my vehicle to direct traffic. suddenly, vehicle C, XD7055R

came along and hit into my vehicle's rear right side.

DECLARATION

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



Reporting Officer's Signature
Date & Time

C. Rajabany
Driver's Signature 13/8/21
(If driver is not the principal)
Date & Time

h. 18/8/21
Reporting Centre Personnel's Signature
Name
NATIONALITY