

# 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 ..... 15/12/2021 11:55 (SGT)  
Date of Accident ..... 11/11/2021 07:30 (SGT)  
Exact Location of Accident ..... Sims Ave E, Singapore  
Additional Location Information ..... To Jalan Masjid  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... GBG6362E

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... DYNAMICWERKZ PTE. LTD.  
Company Reg No ..... 200509437R  
Email Address ..... dwerkzpl@gmail.com  
Mobile Phone No ..... (Phone) +65-91134277  
Alternative Phone No ..... (Office) +65-91134277

### VEHICLE PARTICULARS

Manufacturer ..... Kia  
Model ..... K2500  
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 - Reporting only  
Vehicle Category ..... Commercial vehicle  
Transmission ..... Manual  
CC ..... 2497

### INSURANCE COMPANY

Name of Insurance Company ..... AIG Asia Pacific Insurance Pte. Ltd.  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... 1700054576-04  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... MEIYAPPAN SINGARAVELAN  
Passport No/FIN ..... G8691866N

Date Of Birth .....	26/07/1997
Occupation .....	Outdoor
Date Of Driving Pass .....	23/04/2021
Driving experience .....	7 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-90383537
Alt. Phone Number .....	-
Email Address .....	velm88287@gmail.com
Address .....	2 TAMPINES PLACE #02-07 SINGAPORE
Address complement .....	-
Postcode .....	528821
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 - Change/cross lane
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? .....	No
Was any injured conveyed to hospital by ambulance? .....	-
Was any other vehicle or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	5
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### PASSENGER 1

Name .....	KANNADASAN VIJAY
Gender .....	Male

#### PASSENGER 2

Name .....	KARUNAMOORTHY JAYAPRAKASH
Gender .....	Male

#### PASSENGER 3

Name .....	KALIYAPERUMAL JANAGARAJ
Gender .....	Male

#### PASSENGER 4

Name .....	KIRUSHNAMOORTHY KIRUSHNA
Gender .....	Male

#### 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

#### REFER TO THE ATTACHMENT

#### 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 ..... SMC6263L  
Vehicle Manufacturer ..... Toyota  
Vehicle Model ..... -  
Vehicle Variant ..... -  
Vehicle Colour ..... -  
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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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.
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.
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.

**DYNAMICWERKZ PTE LTD**  
 10 Kaki Bukit Road 1, #03-21  
 KB Industrial Building, Singapore 416175  
 Tel: 6844 4285, 6844 4075

*[Handwritten Signature]*

*[Handwritten Signature]*



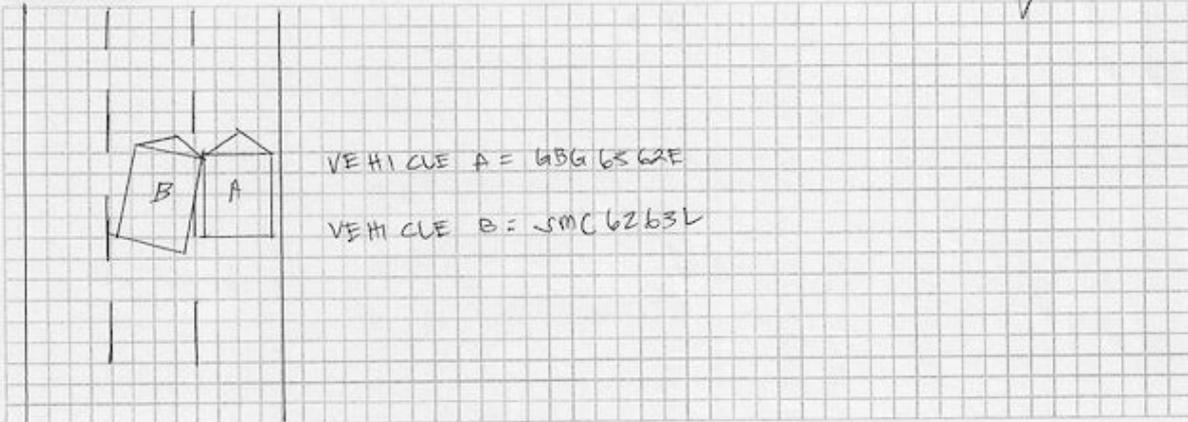
*[Handwritten Signature]*

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

**Sketch Plan**



**Describe Circumstances of the Accident**

My Name is Meiyappan SINGARAVELAN F.N. : 0269166N  
 Date: 11/11/2021 i take worker Morning 7.30 I go to  
 STM Ave Road then I feel the My Vehicle I feel  
 uncomfortable. then I stop My lorry check everything  
 My lorry. check ready then start My lorry I Moving  
 then 2nd line one vehicle SM6263L Toyota Brown Colour.  
 Car Suddenly touch My lorry.

**Declaration**

We declare the foregoing particulars are true in every respect.

**DYNAMICWERKZ PTE LTD**  
 10 Kaki Bukit Road 1, #03-21  
 KB Industrial Building, Singapore 416175  
 Tel: 6844 4285, 6844 4075

*Jakir*

*M. Soma*



*[Signature]*

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

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ANNEX E

## NOTICE OF REPORTING

This is to confirm that Meiyappan Singaravelan, FIN: G8691866N, Tel: 90383537 has reported to the Police a non-injury traffic accident which occurred Along Sims Ave East near to Jalan Masjid on 11/11/2021 at 0730hrs, involving the following vehicles :-

- i) **GBG6362E (Complainant's Vehicle)**
- ii) **SMC6263L (Toyota, Brown Color)**

2 If this accident was reported to the Police within 24 hours of its Occurrence, then he has complied with Sec 84(2) of the Road Traffic Act, Cap 276

Rank/Name of Issuing Officer: Sgt2 Samuel Chow  
 Date: 11/11/2021  
 Time: 1635hrs  
 Station Diary ref: 12  
 Police Post/Unit: Kembangan NPP

  
 Kg Kembangan NPP  
 Block 112 Lengkong Tiga  
 #01-215 Singapore 410112  
 Tel: 1800-7489999

Original - to be issued to informant  
 Duplicate - to be submitted to Traffic Police

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version as of 15 Sep 2000





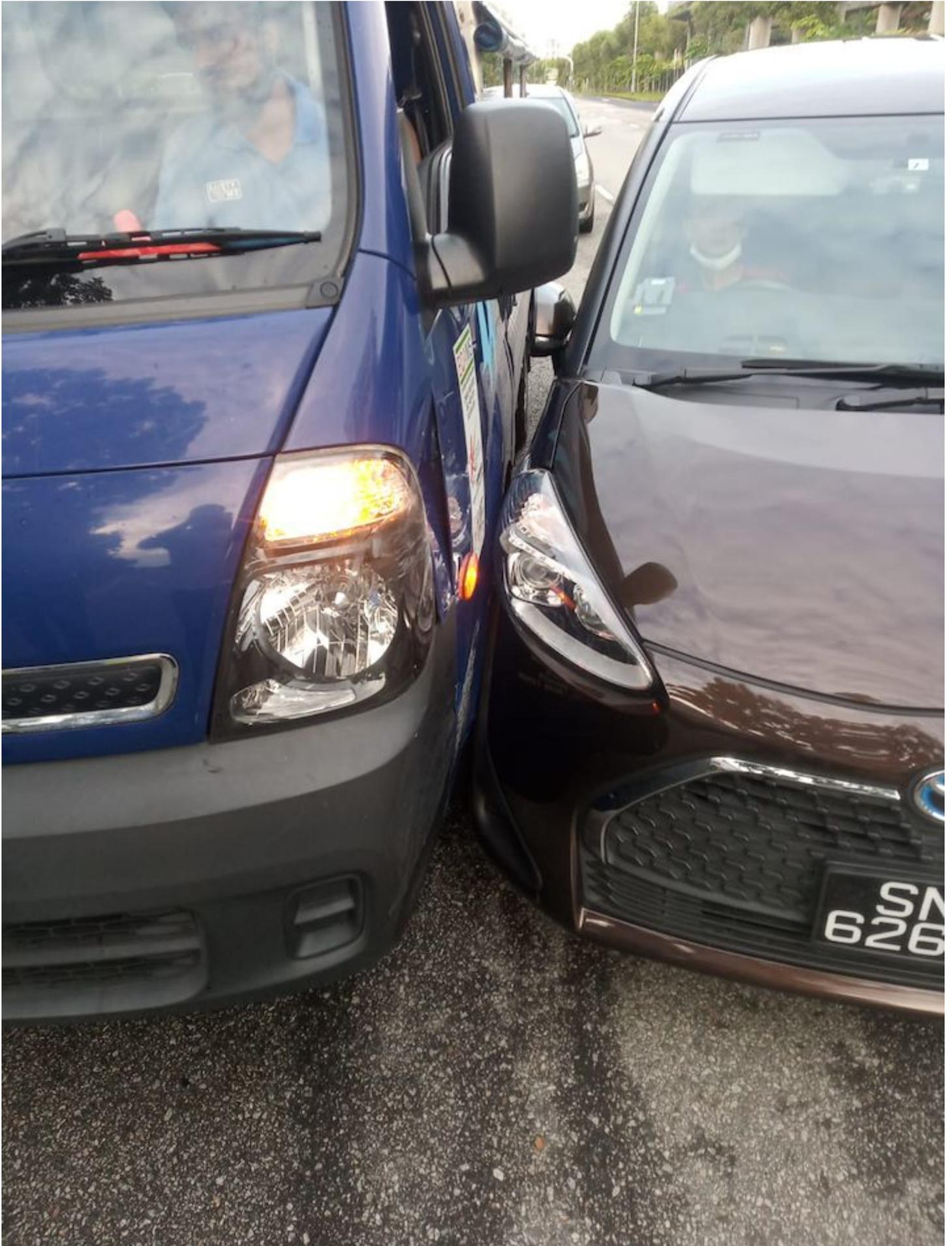


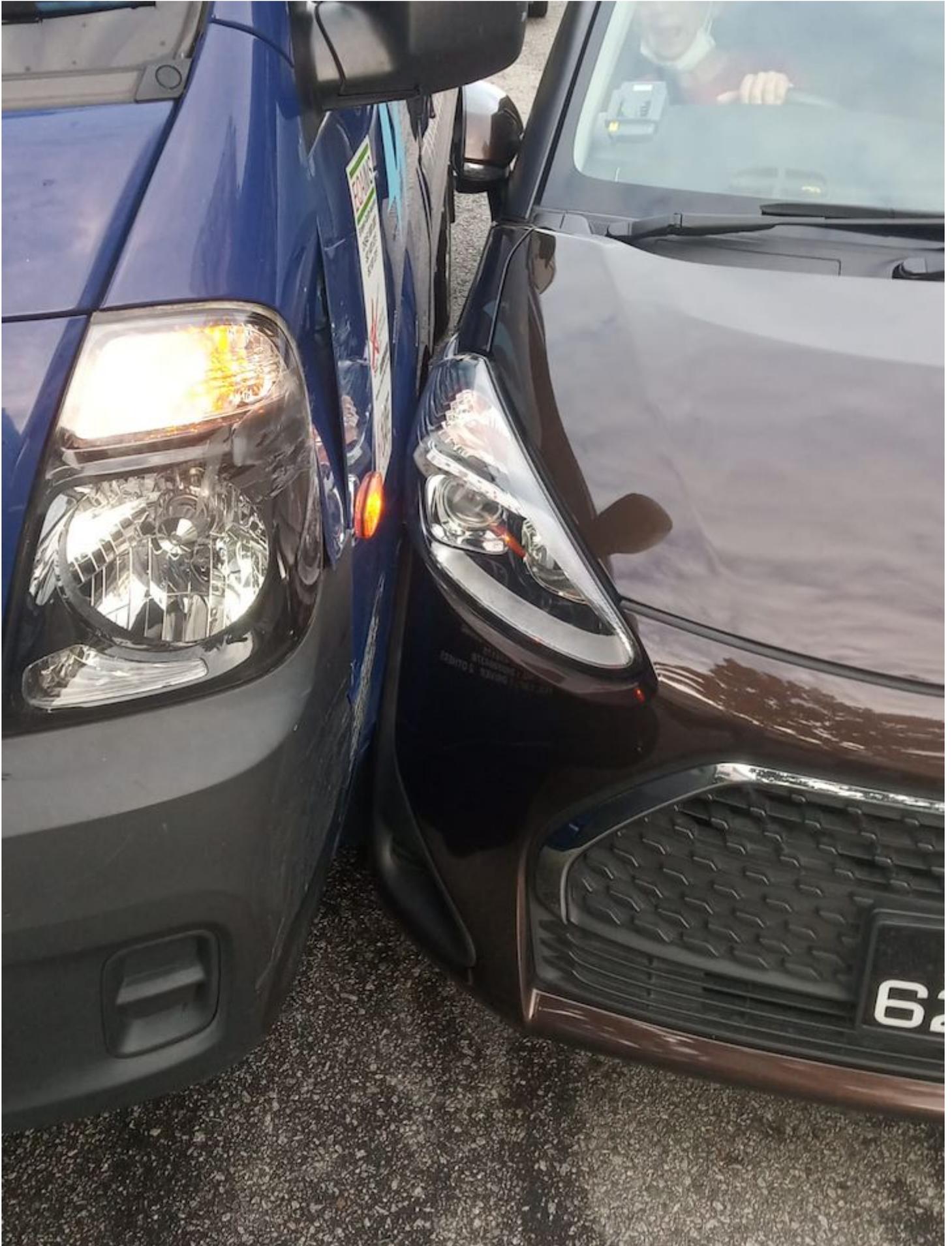
















# CERTIFICATE OF INSURANCE

## CYCLE & CARRIAGE COMMERCIAL AUTO PROTECTOR COMMERCIAL VEHICLE

<b>Name of Policyholder</b>	: Dynamicwerkz Pte Ltd	<b>Vehicle No.</b>	: GBG6362E
<b>Period of Insurance</b>	: 22 Sep 2021 To 21 Sep 2022	<b>Policy No.</b>	: 1700054576-04
<b>Engine No.</b>	: D4CBH228452	<b>Endorsement No.</b>	:
<b>Chassis No.</b>	: KNCSJX76LH7177602	<b>Issued Date</b>	: 25 Aug 2021

### ABOUT THE COVER

<b>Make/Model</b>	: KIA K2500	<b>Sum Insured</b>	: Market Value	<b>First Year of Registration</b>	: 2017
<b>Engine Capacity/Tonnage</b>	: 1.6 Tonnage	<b>Off Peak Car</b>	: No	<b>Insuring with COE/PARF</b>	: Yes
<b>Driver Restriction</b>	: NA				

#### Person or Classes of Persons Entitled to Drive\*

- a) Any person who is driving on the Policyholder's order or with their permission.  
b) This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

You have to pay an additional sum of \$3,000 as "Young and/or Inexperienced Driver Excess" ("YIDR") if You are or Your Authorised Driver (named or unnamed) is under the age of 23 and/or has less than 2 years' driving experience.

**Age Condition** : All Age Condition

#### Limitation as to use\*

- 1) Use in connection with the Policyholder's business.  
2) Use for the carriage of passenger (other than for hire or reward) in connection with the Policyholder's business.  
3) Use for social, domestic or pleasure purposes. This Policy does not cover a) use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing; b) use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle; and c) use for any purpose in connection with Motor Trade.

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 160), Section 95 of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019, are not to be included under these headings.

### EXCESS

**Section 1**  
Fire - \$0 Own Damage - \$600 Theft - \$0 Flood Cover - \$0

**Section 2**  
Property Damage - \$0

**Windscreen** : \$100

**Named Driver and Excess** (where applicable)

### APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

- Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 600 Sin Ming Ave Singapore 575733 69326000
- Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 241 Alexandra Road Singapore 159931 64278800
- Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 20 Leng Kee Rd Singapore 159094 64708688
- Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 20 Leng Kee Rd Singapore 159094 64708600
- Cycle & Carriage Authorised Service Centre (For accident reporting & windscreen claim only) Add: 330 Ubi Rd 3 Singapore 408650 67461000
- Cycle & Carriage Body & Paint Centre Add: 209 Pandan Gardens Singapore 608339 65684501

For other Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website [www.aig.sg](http://www.aig.sg) or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

### IMPORTANT NOTES

Hire Purchase Company/Employer's Loan: HONG LEONG FINANCE LTD

We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 160), Part IV of the Road Transport Act, 1987 (Malaysia), Road Transport (Amendment) Act 2019 and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0500710050

C&C FULCO-CORP SALES

22 UBI ROAD 4 FULCO BUILDING  
SINGAPORE 408617 ANSP - MOTOR

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

**AIG Asia Pacific Insurance Pte. Ltd.**

This computer generated document does not require a signature.

SSCNMD