

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 15/11/2021 14:03 (SGT)
Date of Accident 12/11/2021 13:04 (SGT)
Exact Location of Accident Jln Besar, Singapore
Additional Location Information JUNCTION WITH PETAIN ROAD
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBJ607Z

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner PINGGUI PLUMBING CONSTRUCTION PTE LTD
Company Reg No 2XXXXX345W
Email Address pinggui.ppc@gmail.com
Mobile Phone No (Phone) +65-88181130
Alternative Phone No +65-84874254

VEHICLE PARTICULARS

Manufacturer Kia
Model K2500
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? No - Claiming third party
Vehicle Category Commercial vehicle
Transmission Manual
CC 2497

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DMCVSNW00067792101
Cover Note Number -

DRIVER

Name of Driver HOSSAIN MOHAMMAD ANOWAR
Passport No/FIN GXXXX565P

Date Of Birth	01/02/1983
Occupation	Outdoor
Date Of Driving Pass	22/03/2019
Driving experience	2 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-84874254
Alt. Phone Number	-
Email Address	anowar9195@gmail.com
Address	62, JALAN GEMBIRA
Address complement	-
Postcode	369152
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	Side Swipe
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)	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

PLEASE REFER TO SKETCH PLAN

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	SHD2663H
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
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) -

Describe Circumstances of the Accident

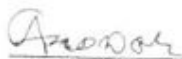
On 12/11/2021 at @ 1304 hrs, I was travelling in my vehicle (GBJ 607Z) along Jalan Besar before the junction of Potain Road on the 2nd lane from the right. I switched on my right signal as I wanted to change to the extreme right lane. I checked there were no oncoming vehicle and I changed slowly into the right lane. Suddenly, a taxi (SHD 2663H) travelling on the 2nd lane behind me speed up and could not stop in time, and swerved to the right. As a result, the rear taxi front left portion collided onto the right rear side of my vehicle.

Declaration

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



Witnessed by Reporting Centre Personnel















