

# 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 ..... 31/12/2021 12:05 (SGT)  
Date of Accident ..... 30/12/2021 10:17 (SGT)  
Exact Location of Accident ..... Marina View Link, Singapore  
Additional Location Information ..... -  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... YN5174D

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... CREMELAND PTE LTD  
Company Reg No ..... 201301094H  
Email Address ..... creamland@singnet.com.sg  
Mobile Phone No ..... (Phone) +65-84377230  
Alternative Phone No ..... +65-84377230

### VEHICLE PARTICULARS

Manufacturer ..... Mitsubishi  
Model ..... Fuso  
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 ..... Auto  
CC ..... 2998

### INSURANCE COMPANY

Name of Insurance Company ..... ERGO Insurance Pte. Ltd.  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... DMCG21W7752  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... SELVAEASU SAMBATHKUMAR  
Passport No/FIN ..... G5499060Q

Date Of Birth	06/05/1992
Occupation	Outdoor
Date Of Driving Pass	22/07/2020
Driving experience	1 YEAR AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-84377230
Alt. Phone Number	-
Email Address	creamland@singnet.com.sg
Address	1007 ALJUNIED AVE 4 #01-17
Address complement	-
Postcode	389908
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	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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### PASSENGER 1

Name	KOU CHANG DI
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

ON 30/12/2021 AT ABOUT 10.17AM, MY LORRY (YN5174D) WAS STATIONARY ALONG ROAD SIDE OF MARINA VIEW LINK WITH HAZARD LIGHT ON TO UNLOAD STUFF TO MY CLIENTS. AFTER FINISH UNLOADING STUFF, I JUST ABOUT TO GET INTO MY LORRY'S DRIVER SEAT AND JUST ABOUT TO MOVE. OUT OF SUDDEN, THERE'S AN IMPACT COMING FROM BEHIND. SO I CAME OUT FROM MY LORRY TO INSPECT AND REALISED THERE WAS A YELLOW CAB (SHC7022E) DID NOT AWARE MY LORRY STILL IN FRONT OF HIM AND TAXI DRIVER DID NOT KEEP A PROPER LOOKOUT AND THEN COLLIDED ONTO REAR PORTION OF MY LORRY. HENCE, I HERE TO LODGE THIS REPORT TO CLAIM AGAINST VEHICLE B (SHC7022E)'S INSURANCE FOR MY ACCIDENT DAMAGES.

#### 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	SHC7022E
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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 .....	VEHICLE B
No. Of Passenger (Including Driver) .....	-

**SKETCH PLAN**

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5. **Any false reporting may be referred to the Police for investigation.**
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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.

*31/12/21*  
*9:47 AM*

*[Signature]*

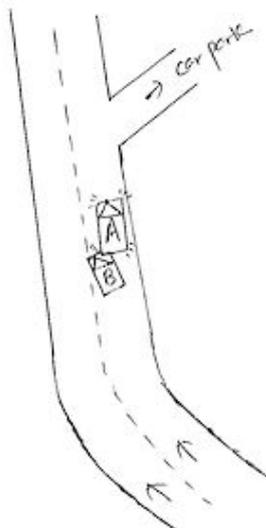
Policyholder's Signature / Date & Time



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

Witnessed by Reporting Centre Personnel

Sketch Plan



- (A) YN 5174D
  - (B) SHC 7022E
- Along Marina View Link.

**Describe Circumstances of the Accident**

On 30/12/2021 @ about 10:17am, my lorry (YN5174D) <sup>was</sup> stationary along road side of Marina View Link with hazard light on to unload stuff to my clients. After finished unload stuff, then i was just get into my lorry's driver seat and just about to move. Out of sudden, there's an impact come from behind so i come out from my lorry to inspect and was realized that a yellow cab (SHC 7022E) did not aware my lorry still in front of him and taxi driver did not keep a proper lookout and then collided onto rear portion of my lorry. Hence, I hereto lodge this report to claim against veh-B (SHC 7022E)'s insurance for my accident damages!

**Declaration**

We declare the foregoing particulars are true in every respect.

 31/12/21





Policyholder's Signature / Date & Time  
9:47AM

Signature (if driver is not the policyholder) / Date & time

Witnessed by Reporting Centre Personnel



















ERGO

## 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)  
 ROAD TRANSPORT (AMENDMENT) ACT 2019 (MALAYSIA)

Certificate/Policy Number	:	DMCG21007752		
Vehicle Registration Number	:	YN5174D		
Cover Type	:	Comprehensive		
Policy Type	:	Commercial Vehicle (Pte Use)		
Name of Policyholder/Insured	:	CREMELAND PTE. LTD		
Commencement Date of Insurance	:	17/07/2021		
Expiry Date of Insurance	:	16/07/2022		
Excess	:	EXCESS: (SECTION D).....	S\$	500.00
		ADDL EXCESS: NON-AUTH WORKSHOPS (SECTION D)	S\$	300.00
		EXCESS: WINDSCREEN COVER/VEH BELOW 10 TONS)	S\$	100.00
		YOUNG&INEXP DRIVERS(SECTION D)	S\$	2,500.00
		DAIMLER FINANCIAL SERVICES AFRICA & ASIA PACIFIC LTD		
Finance Company/Hire Purchase Owner:		LTD		



\*Persons or Classes of Persons entitled to drive:

1. The Policyholder
2. Any Person who is driving on the Policyholder's order or permission

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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

\*Limitations as to Use:

- 1) Use in connection with the Policyholder's business
- 2) Use for carriage of passengers (other than for hire or reward) in connection with the Policyholder's business
- 3) Use for social domestic and pleasure purposes

This Policy does not cover:

- 1) Use for hire or reward, racing, pace-making, reliability trial or speed testing
- 2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle

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 (\*).

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), the Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia), Part IV of the Road Transport Act, 1987 (Malaysia) and Road Transport (Amendment) Act 2019 (Malaysia).

For and on behalf of ERGO Insurance Pte. Ltd.  
 Approved Insurer

*Karl-Heinz Jung*

Authorized Signature

B000161	FINANCIAL ALLIANCE PTE LTD	Contact Number: 62221889
Vehicle Chassis Number: FEB21EA30436, Vehicle Engine Number: 4P10E08450		CP1, 22/06/2021 16:40

ERGO Insurance Pte. Ltd. Co. Reg. No.: 19930521H GST Reg. No.: M2-0116930-5  
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