

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 10/01/2022 13:04 (SGT)
Date of Accident 08/01/2022 09:45 (SGT)
Exact Location of Accident BKE, Singapore
Additional Location Information BKE TOWARDS PIA AFTER DAIRYFARM
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBB5962G

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner LOGISTICS CONSTRUCTION PTE LTD
Company Reg No 1XXXXX131G
Email Address LOGISTIC@SINGNET.COM.SG
Mobile Phone No (Phone) +65-93763312
Alternative Phone No (Home) +65-93763312

VEHICLE PARTICULARS

Manufacturer Nissan
Model Cabstar
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 0

INSURANCE COMPANY

Name of Insurance Company Liberty Insurance Pte Ltd
Type of Coverage ThirdPartyFireTheft
Fleet Policy No
Policy Number SD21V04285/VCH/R00
Cover Note Number -

DRIVER

Name of Driver RAZIB MOHAMMAD
Passport No/FIN GXXXX418N

Date Of Birth	08/08/1990
Occupation	Outdoor
Date Of Driving Pass	07/09/2019
Driving experience	2 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-87756390
Alt. Phone Number	-
Email Address	LOGISTIC@SINGNET.COM.SG
Address	APT BLK 61 SENOKO DRIVE #03-07
Address complement	-
Postcode	758238
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	Chain Collision
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	MOLLAH YEASIN
Gender	Male

PASSENGER 2

Name	MUTHU KARUPPAN PERUMAL
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Tampines Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18005871999
Alt. Police Station Phone No	(Fax) +65-65871699
Police Station Address	6 Tampines Ave 4 Singapore 529682
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED

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	GBK9255R
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	GBL5593K
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	MUTHU KARUPPAN PERUMAL
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	GBB5962G
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 2

Name of injured person	RAZIB MOHAMMAD
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	GBB5962G
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

Describe Circumstances of the Accident

On 08/01/2022 at about 09:45AM. I was travelling along
 BKE towards PIE (After dairy farm). I was travelling straight.
 Vehicle C slowed down, I followed. Suddenly, I felt an impact from
 my rear. I was involved in a 3 vehicles chain-collision.

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

































CHASSIS NO: JN1SC2F24Z0800983

U.L.W : 1780 KGS

M.L.W : 3400 KGS

P. CAP : F: 1 DRIVER, 2 OTHER
R: 00

TYRE SIZE : F: 175 x 80R15PLY

R: 155 x 13R8PLY (D)









**SINGAPORE
POLICE FORCE**



T/20220108/2053

Police Station Of Origin:
Tampines N.P.C
8 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

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Report No. T/20220108/2053

CONTINUATION OF REPORT

Name	MUTHU KARUPPAN PERUMAL	ID No.	G8311141R
Related Vehicle	GBB5962G (Lorry)	Contact No.	84202417
Hospital/Clinic	WONG FAMILY CLINIC & SURGERY PTE LTD	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	08/01/2022	Date Discharge	08/01/2022
No. of Days granted Medical Leave	03	Degree of Injury	NIL
Driver			
Name	RAZIB MOHAMMAD	ID No.	G6982418N
Related Vehicle	GBB5962G (Lorry)	Contact No.	87756390
Hospital/Clinic	WONG FAMILY CLINIC & SURGERY PTE LTD	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	08/01/2022	Date Discharge	08/01/2022
No. of Days granted Medical Leave	03	Degree of Injury	NIL
Driver			
Name	MOLLAH YEASIN	ID No.	G2395476T
Related Vehicle	GBB5962G (Lorry)	Contact No.	98074172
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	LING WANG CHANG	ID No.	S9082666B
Related Vehicle	GBK9255R (Van)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL



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Report No. T/20220108/2053

CONTINUATION OF REPORT

Brief Details.

On the 08/01/2021, I was driving to Changi Village from BKE on my company lorry GBB5962G. My two other colleagues were on the ride. Mollah Yeasin was seated at the front passenger seat while Muthu was seated at the back of the 10-feet lorry. On BKE after dairy farm at the center lane, before PIE changi, the vehicle before me GBK9255R slowed down thus I also slowed down. Just as both our vehicles were about to come to a stop, suddenly there was a great impact from the rear of my vehicle and the impact pushed my vehicle forward and as a result, the front of my vehicle collided onto the rear of GBK9255R. We made a check and discovered that GBL5593K had collided onto the rear of my vehicle.

My colleague(Muthu) who was seating at the back of the lorry informed that his right elbow and his right back is in pain. Mollah informed that he has a bit of lower back pain and I also feel pain at my lower back.

Muthu and I had seen the doctor and were both given 3 days MC.

There is no in car camera in my lorry.

There is damage to the rear of my vehicle.

No police or ambulance attended to us at scene.



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Report No. T/20220108/2053

CONTINUATION OF REPORT

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 report number as reference.

Signature of Officer Recording The Report
G /
Sgt 3 CHIN XUE NI

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
08/01/2022 13:57

Officer In Charge Of Case:
TP / AEIT /
Insp (1) BOON YEN KIAN
Contact No.: 65476172

Classification Of Case:

Authentication Stamp
NP158





**SINGAPORE
POLICE FORCE**



T/20220108/2053

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

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Report No. T/20220108/2053

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/01/2022 13:57		Vide Report No.:		Station Diary No.: 41	
Informant's Particulars					
Name of Informant: RAZIB MOHAMMAD			Address: APT BLK 61 Senoko Drive #03-07 SINGAPORE 758238		
ID Type / ID No.: FIN NO / G6982418N			Contact No.: Home/Office: Mobile: 87756390		
Nationality: BANGLADESHI			Email: rajibislam570@gmail.com		
Sex: Male	Age: 31	Date of Birth: 08/08/1990	Type of Informant: Driver		
Race: Bangladeshi			Language:		Institution / School Name:
Occupation: LORRY DRIVER			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 08/01/2022 09:45	Type of Location: Straight Road
Location: BUKIT TIMAH EXPRESSWAY				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBB5962G	Lorry				Seriously Damaged	2
GBK9255R	Van					0
GBL5593K	Van					0

Details of Person Involved

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