

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 24/02/2022 13:22 (SGT)
Date of Accident 23/02/2022 15:00 (SGT)
Exact Location of Accident 11 Penjuru Rd, Singapore 609159
Additional Location Information 11 PENJURU ROAD, OUTSIDE KIAN HUA HARDWARE
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GX5409M

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner TIAN SAN SHIPPING (PTE) LTD
Company Reg No 1XXXXX912W
Email Address SAYHOONG.TAY@TIANSAN.COM.SG
Mobile Phone No (Phone) +65-81230783
Alternative Phone No +65-81230783

VEHICLE PARTICULARS

Manufacturer Mitsubishi
Model Canter
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 2998

INSURANCE COMPANY

Name of Insurance Company Great Eastern General Insurance Limited
Type of Coverage ThirdParty
Fleet Policy No
Policy Number 2021-V0112825-VCV-R001
Cover Note Number -

DRIVER

Name of Driver SOMAN KRISHNAN
Work Permit No FXXXX363X

Date Of Birth	04/06/1969
Occupation	Indoor
Date Of Driving Pass	20/07/2018
Driving experience	3 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98110917
Alt. Phone Number	-
Email Address	SAYHOONG.TAY@TIANSAN.COM.SG
Address	6 , JALAN SAMULUN
Address complement	-
Postcode	629123
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 on 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	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)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	PADINJARATH RAMAN AJITHPUMAR
Gender	Male

PASSENGER 2

Name	TRANGANATHAN BABU
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 SKETCH & SUMMARY

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	GW7073P
Vehicle Manufacturer	Toyota

Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	SETHU RAVIKUMAR
Contact Number	(Phone) +65-87130069
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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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.



Policyholder's Signature / Date & Time

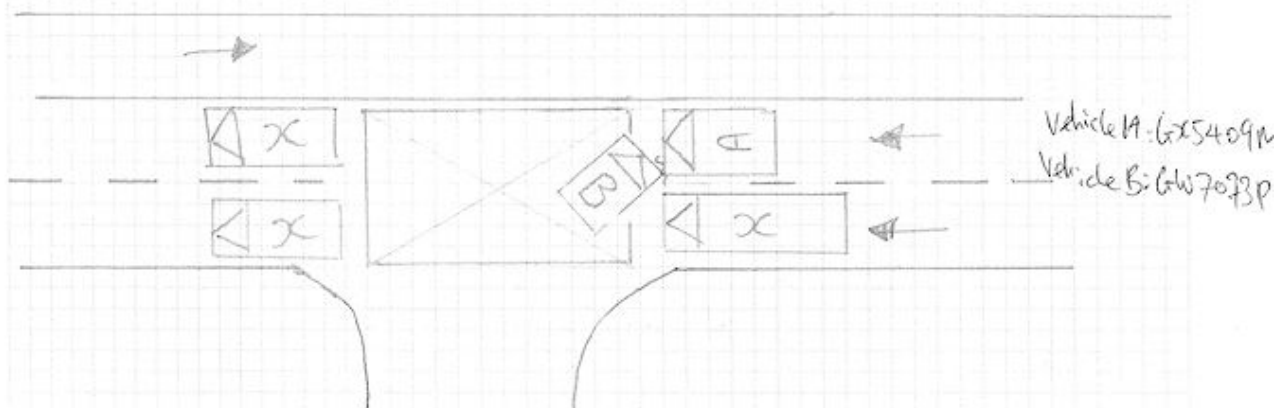
L. K. H.

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



Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

On 23/2/22 at about 3pm I was driving my vehicle Gx 5409 along penang road out side Kien hua hardware towards AYF. while approaching the traffic junction I slow down and come to a stop behind the yellow box. Vehicle Gw 7073P was seen turning out from Kien hua hardware Exit while vehicle B was turning the driver collided on my vehicle left front portion.

No one was injured in this accident at the point of time.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

[Signature]

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



Witnessed by Reporting Centre Personnel

Describe Circumstances of the Accident

On 23/2/22 at about 3pm I was driving my vehicle Gx 5409 along penang Road out side Hion hua hardware towards AYF. while approaching the traffic junction I slow down and come to a stop behind the yellow box. Vehicle Gx 7093P was seen turning out from Hion hua hardware Exit while vehicle B was turning the driver collided on my vehicle left front portion.

No one was injured in this accident at the point of time.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

[Handwritten Signature]

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



Witnessed by Reporting Centre Personnel

















For Customer Service please visit
1 Pickering Street
#01-01 Great Eastern Centre
Tel: +65 6248 2888 Fax: +65 6327 3080



Certificate of Insurance

ORIGINAL

The Motor Policy to which this Certificate relates is issued in accordance with the provisions of the following Legislation:
Motor Vehicles (Third-Party Risks and Compensation) Act (Cap.189 of the Revised Edition) (Singapore)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1996 Edition (Singapore)
Motor Vehicles (Third-Party Risks) Rules, 1959 (of Federation of Malaya)
Road Transport Act 1987 (of Malaysia)
Road Transport (Amendment) Act 2019 (of Malaysia)

FORM M2300

Policy No. : 2021-V0112825-VCV-R001 Risk# : 0001
Policy Type : Commercial Vehicle Cover : Third Party Only

DESCRIPTION OF VEHICLES:
Vehicle Registration : GX5409M
Vehicle Make & Model : MITSUBISHI/FB511BOJSRDE

Name of Insured : TIAN SAN SHIPPING (PTE) LTD

Period of Insurance : 30-06-2021 (0000HRS) to 29-06-2022

PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE *

Any person who is driving on the Policyholder's order or with their 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 the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
 - (3) Use for social, domestic and pleasure purposes.
- The policy does not cover :-
- (1) Use for racing, pace-making, reliability trial or speed-testing.
 - (2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.
 - (3) Use for the carriage of passengers for hire or reward.

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 (of Malaysia) are not to be included under these headings.

Signed for and on behalf of the Company

Authorised Signature

GPICWEL

10-06-2021

Great Eastern General Insurance Limited (Reg. No. 1920 00003W)
(A wholly-owned subsidiary of Great Eastern Holdings Limited)
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