

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 15/03/2022 14:55 (SGT)
Date of Accident 14/03/2022 11:40 (SGT)
Exact Location of Accident Near Opp Blk 1, Singapore
Additional Location Information HENDERSON ROAD TOWARDS AYE RIGHT TURN TO TELOK
BLANGAH WAY
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number YN8778S

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner W & Y ELECTRICAL TRADING
Company Reg No 5XXXX471X
Email Address SHIRYEO@HOTMAIL.COM
Mobile Phone No (Phone) +65-96384388
Alternative Phone No +65-96384388

VEHICLE PARTICULARS

Manufacturer Isuzu
Model NNR85UH4A
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? Yes
Vehicle Category Commercial vehicle
Transmission Auto
CC 2999.

INSURANCE COMPANY

Name of Insurance Company Lonpac Insurance Bhd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number Z/21/VC00/110692
Cover Note Number -

DRIVER

Name of Driver RANJIT SINGH

Passport No/FIN	GXXXX642U
Date Of Birth	07/08/1991
Occupation	Outdoor
Date Of Driving Pass	27/10/2020
Driving experience	1 YEAR AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-89056185
Alt. Phone Number	-
Email Address	SHIRYEO@HOTMAIL.COM
Address	BLK 257 BANGKIT ROAD, #04-57
Address complement	-
Postcode	670257
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?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
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	LI LIZHU
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Bukit Panjang Neighbourhood Police Centre
Police Station Address	No.1 Segar Road #01-05 Singapore 677738
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN & POLICE REPORT NO. T/20220315/2038 FOR 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	SJR7433A
Vehicle Manufacturer	-
Vehicle Model	-

SKETCH PLAN

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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.



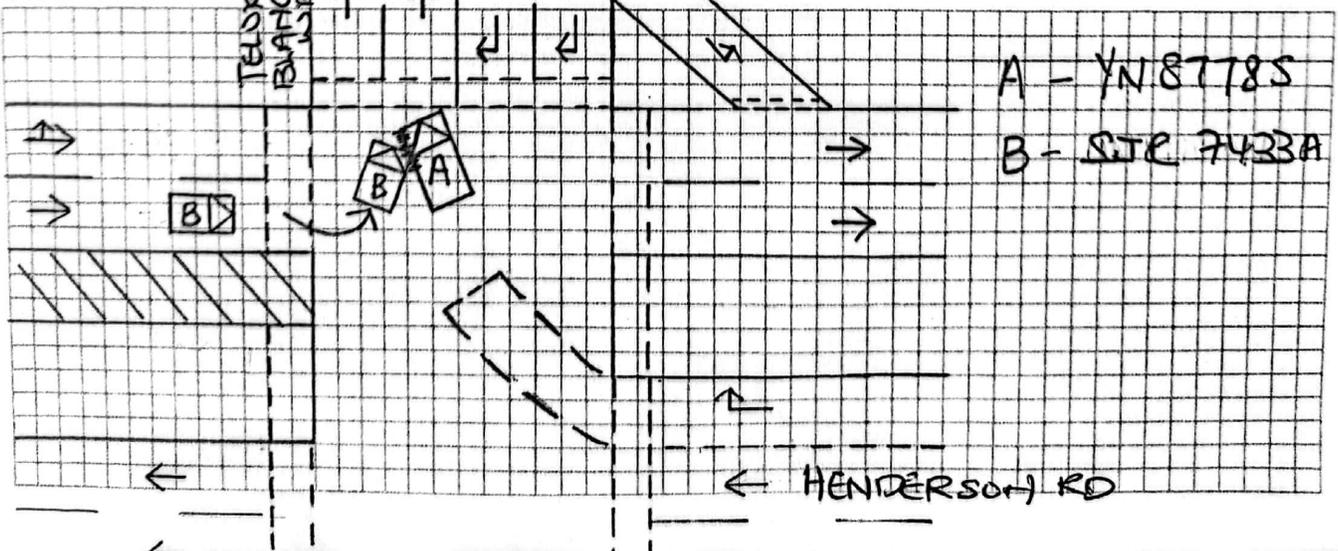
Ranjit Singh

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

REFER TO POLICE REPORT NO. T/20220315/2030

Lined area for describing the accident circumstances.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

rajit singh

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



Witnessed by Reporting Centre Personnel



**SINGAPORE
POLICE FORCE**



T/20220315/2038

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Report No. T/20220315/2038

Police Station Of Origin:
Bukit Panjang N.P.C
1 Segar Road #01-05 SINGAPORE 677738
Tel No: 1800-8929999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 15/03/2022 13:09		Vide Report No.: A/20220314/0096		Station Diary No.: 52	
Informant's Particulars					
Name of Informant: RANJIT SINGH			Address: APT BLK 257 BANGKIT ROAD #04-57 BUKIT PANJANG NEW TOWN SINGAPORE 670257		
ID Type / ID No.: FIN NO / G2302642U			Contact No.: Home/Office: Mobile: 89056185		
Nationality: INDIAN			Email: KOURHARLEEN95@GMAIL.COM		
Sex: Male	Age: 30	Date of Birth: 07/08/1991	Type of Informant: Driver		
Race: Indian			Language:		Institution / School Name:
Occupation: Lorry driver			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 14/03/2022 11:50	Type of Location: T-Junction
Location: HENDERSON ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
YN8778S	Lorry				Slightly Damaged	1

Details of Person Involved

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



**SINGAPORE
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T/20220315/2038

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1 Segar Road #01-05 SINGAPORE 677738
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Report No. T/20220315/2038

CONTINUATION OF REPORT

Driver			
Name	RANJIT SINGH	ID No.	G2302642U
Related Vehicle	YN8778S (Lorry).	Contact No.	89056185
Hospital/Clinic	SINGAPORE GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	14/03/2022	Date Discharge	14/03/2022
No. of Days granted Medical Leave	03	Degree of Injury	Slight

Brief Details.

On 14/3/2022 at about 1130hrs at said location, I was at a traffic light junction and the light was green. I signaled to the right with intention to turn right and waited at the pocket. I inched forward to lookout for oncoming traffic and I saw one car was quite faraway thus I decided to turn right. When I was about half turning, suddenly the car hit onto the left side of my lorry. I stopped my lorry and alighted and spoke to driver. Eventually I unable to capture anything and was conveyed by ambulance eventually. I unable to exchange any details with the said driver or record down his vehicle number. I suffered lower abdomen pain and was given 3days MC from Singapore General Hospital. Earlier today, I received a text message from IO Shiras to proceed to any police station to lodge report on the matter.



**SINGAPORE
POLICE FORCE**



T/20220315/2038

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1 Segar Road #01-05 SINGAPORE 677738
Tel No: 1800-8929999

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Report No. T/20220315/2038

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:
J / SR STAFF SGT ZAKIAH
BINTE MOHAMMED RASHIDIN

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
15/03/2022 13:09

Officer In Charge Of Case:
TP / GIT /
STAFF SGT SYED MUHAMMAD ISA BIN
OMAR ALHABSHEE
Contact No.: 65476214

Classification Of Case:

NP168