

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 07/04/2022 12:15 (SGT)
Date of Accident 06/04/2022 08:00 (SGT)
Exact Location of Accident Near 17 Joo Koon Cir, Singapore 629049
Additional Location Information FIRST LOK YANG RD TO AYE EXPRESSWAY TWDS TUAS SHIPYARD
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number YN2564G

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner DOUBLE S CONSTRUCTION PTE LTD
Company Reg No 2XXXXX599E
Email Address admin@doublesconstructions.com
Mobile Phone No (Phone) +65-98870900
Alternative Phone No (Office) +65-62644752

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 ThirdPartyFireTheft
Fleet Policy No
Policy Number 2021-V0116783-VCV
Cover Note Number -

DRIVER

Name of Driver ANTHONY JOSHUA

Work Permit No	GXXXX391R
Date Of Birth	01/07/1996
Occupation	Outdoor
Date Of Driving Pass	01/10/2019
Driving experience	2 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81200445
Alt. Phone Number	-
Email Address	antonyjoshwa01@gmail.com
Address	13 KIAN TECK LANE
Address complement	BLUE STARS DORMITORY
Postcode	627849
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)	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?	Yes
Police Station Name	Nanyang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18007929999
Alt. Police Station Phone No	(Fax) +65-67912972
Police Station Address	No. 2 Jurong West Avenue 5 Singapore 649482
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT T/20220407/2025

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	PA9817G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-

Vehicle Category	Bus
Name of Driver	LIM KIAN BENG
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	China Taiping Insurance (Singapore) Pte. Ltd.
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	XE9989C
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Goods 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	ANTHONY JOSHWA
Gender	Male
Phone No	(Phone) +65-81200445
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	BACK AND RIGHT SHOULDER INJURIES
Injured person in which vehicle?	YN2564G
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN**IMPORTANT NOTICE**

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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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



Policyholder's Signature / Date & Time

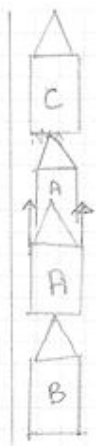
Driver's Signature (If driver is not the policyholder) / Date & Time



Witnessed by Reporting Centre Personnel

Sketch Plan

AYE BEFORE
EXIT BEND!
RD.



A: YN2564G
B: PA9817G
C: XE9989C

Describe Circumstances of the Accident

On 6th April 2022, @ about 8:00am, I was driving vehicle A (YN25644) travelling along AYE before EXIT Benoi rd on the extreme left lane. There was a vehicle (C) XE9989C ^{In front of mine} stopped. I follow to stop too. Suddenly, I felt an strong impact from my rear and resulted my vehicle move forward and collided on the rear of vehicle C XE9989C. I alighted and check, It was a chain collision that involved with 3 vehicle. Vehicle B PA9817G had collided on my rear portion. ~~After~~ After the accident I felt pain on my Lower pain. We exchanged our particular and left the scene.

A. John

REFER TO police report: T/20220407/2025.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

A. John

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



Witnessed by Reporting Centre Personnel
























**SINGAPORE
POLICE FORCE**


T/20220407/2025

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

1 of 3

Report No. T/20220407/2025

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 07/04/2022 10:46	Vide Report No.:	Station Diary No.: 25
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Informant's Particulars

Name of Informant: ANTHONY JOSHWA			Address:		
ID Type / ID No.: FIN NO / G2837391R			Contact No.: Home/Office: Mobile: 81200445		
Nationality: INDIAN			Email: antonyjoshwa01@gmail.com		
Sex: Male	Age: 25	Date of Birth: 01/07/1996	Type of Informant: Driver		
Race: Indian			Language:		Institution / School Name:
Occupation: Lorry driver			Driving Licence Information: Class: 3 Date of Expiry: 30/09/2024		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 06/04/2022 08:00	Type of Location: Expressway
Location: AYER RAJAH 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 Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
PA9817G	Bus/Coach/Mi nibus				Slightly Damaged	3
XE9989C	Lorry				No Damage	0
YN2564G	Lorry				Slightly Damaged	0

Details of Person Involved

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



**SINGAPORE
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T/20220407/2025

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

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Report No. T/20220407/2025

CONTINUATION OF REPORT

Driver			
Name	LIM KIAN BENG	ID No.	S1386333D
Related Vehicle	PA9817G (Bus/Coach/Minibus)	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
Driver			
Name	ANTHONY JOSHUA	ID No.	G2837391R
Related Vehicle	YN2564G (Lorry)	Contact No.	81200445
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: 30/09/2024
Date Treatment	06/04/2022	Date Discharge	06/04/2022
No. of Days granted Medical Leave	03	Degree of Injury	Slight

Brief Details.

On 06/04/2022 at about 0800hrs, I was driving my lorry bearing vehicle registration number YN2564G from First Lok Yang Road to AYE Expressway towards Tuas Shipyard on the third lane. I was driving in between a lorry bearing vehicle registration number XE9989C (in front of me) and a bus bearing vehicle registration number PA9817G (behind me). The traffic was very heavy, everyone was driving very slowly. As I saw the front lorry braking, I too used my brake but only to move slow and not to stop and suddenly the bus behind me hit my lorry at the rear which cause a chain of accident between the three of us. The bus had hit my lorry and cause my lorry to move forward and hit the lorry in front. I suspected that the bus had braked and hit my lorry. We all came out of our vehicles and wanted to exchange particulars however the lorry driver in front of me refused to give me his particulars as he told me that the bus driver is at fault and should only ask from him. I am not sure how many people inside the bus as only the bus driver came out. No police or ambulance came to scene. No government property damage. My lorry sustained some damages to the front, body, and rear. The lorry did not sustain any damages and the bus has some damages to the front. I am not sure if they are injured. I sustained some injuries to my back and my right shoulder which caused me to visit the clinic at Pioneer Medical Centre which referred me to the hospital at Ng Teng Fong General Hospital. My lorry had no dash camera installed.



**SINGAPORE
POLICE FORCE**



T/20220407/2025

Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

3 of 3

Report No. T/20220407/2025

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/ SCCPL MUHAMMAD FIKRI BIN JOHARI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 07/04/2022 10:46
Officer In Charge Of Case: TP / AEIT / SI TAN JEOK LENG Contact No.: 65476151	Classification Of Case:

NP168

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 H2300

Policy No. : 2021-V0116783-VCV Risk# : 0001
Policy Type : Commercial Vehicle Cover : Third Party, Fire & Theft

DESCRIPTION OF VEHICLES:
Vehicle Registration : YN2564G
Vehicle Make & Model : MITSUBISHI FE83BEOSRDEA

Name of Insured : DOUBLE S CONSTRUCTION PTE LTD

Period of Insurance : 10-05-2021 (0000HRS) to 09-05-2022

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

04-05-2021