

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 20/04/2022 17:45 (SGT)
Date of Accident 19/04/2022 18:15 (SGT)
Exact Location of Accident PIE, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJN9157E

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner SUPERTEC LIMOUSINE PTE LTD
Company Reg No 200911332H
Email Address SUPERTECLIMO@GMAIL.COM
Mobile Phone No (Phone) +65-96998181
Alternative Phone No (Home) +65-97777478

VEHICLE PARTICULARS

Manufacturer Toyota
Model Corolla
Variant -
Exact purpose for which vehicle was being used at time of accident -
Are you claiming under your own insurance policy for repair to your vehicle? No - Reporting only
Vehicle Category Private car
Transmission Auto
CC 1598

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DMHCSNA00005162201
Cover Note Number -

DRIVER

Name of Driver VALAM PURI MARAN S/O KRISHNAN
NRIC No S1538394A

Date Of Birth	13/02/1962
Occupation	Outdoor
Date Of Driving Pass	07/12/1999
Driving experience	22 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97777478
Alt. Phone Number	-
Email Address	SUPERTECLIMO@GMAIL.COM
Address	BLK 436 TAMPINES STREET 43
Address complement	#03-107
Postcode	520436
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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	Raining
Road Surface	Wet

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?	No
Was any injured conveyed to hospital by ambulance?	-
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	Bedok Division Headquarters
Police Station Phone No	(Phone) +65-18002440000
Alt. Police Station Phone No	(Fax) +65-64443009
Police Station Address	30 Bedok North Road Singapore 469676
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN AND POLICE REPORT NO.G/20220420/7038

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	SHD82Y
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 -
 No. Of Passenger (Including Driver) -

PASSENGER 1

Name -
 Gender -

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SMC5663J
 Vehicle Manufacturer -
 Vehicle Model -
 Vehicle Variant -
 Vehicle Colour -
 Vehicle Category Private car
 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) -

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.



Policyholder's Signature / Date & Time

[Handwritten Signature]

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



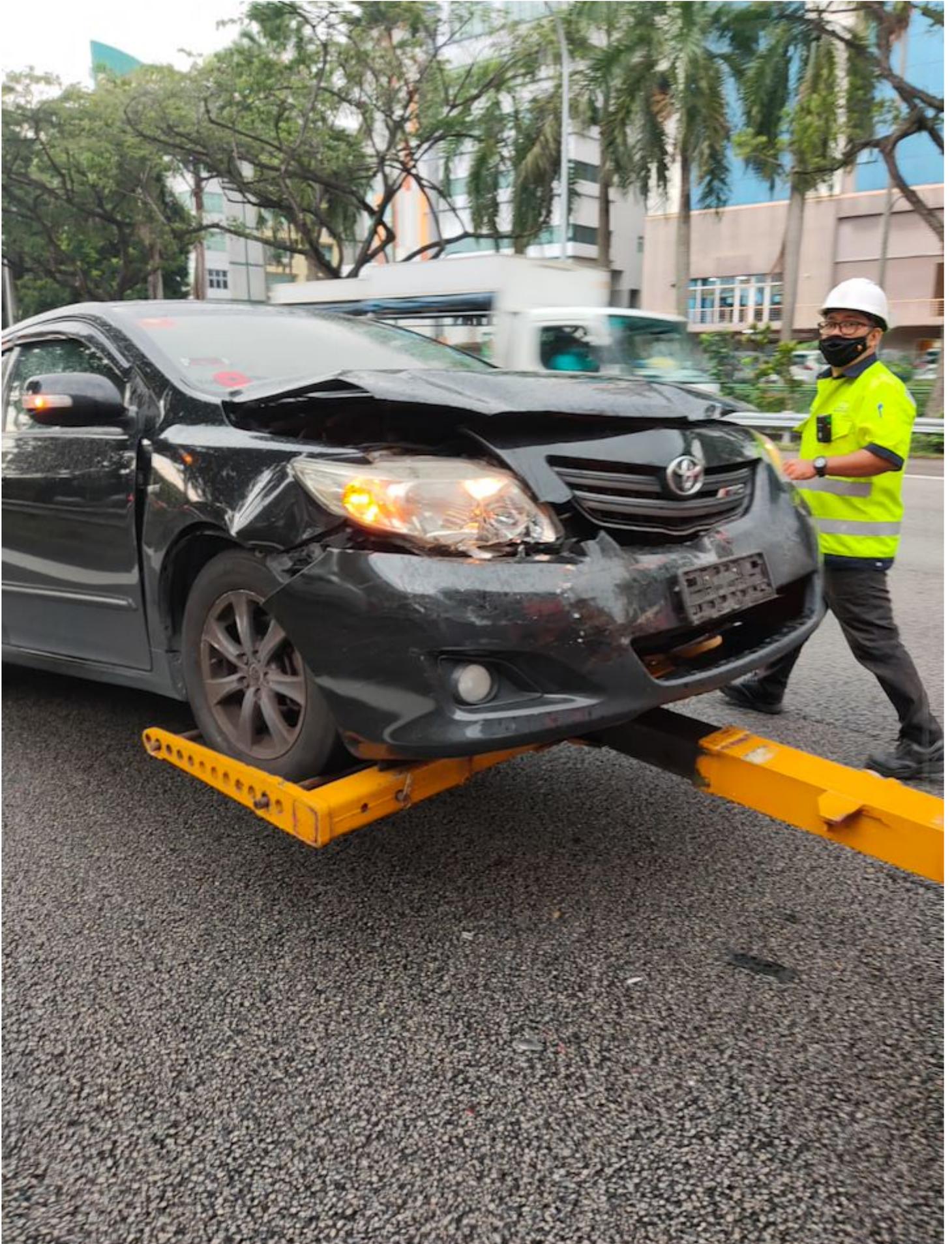
Witnessed by Reporting Centre Personnel **Kon Yin Siew**

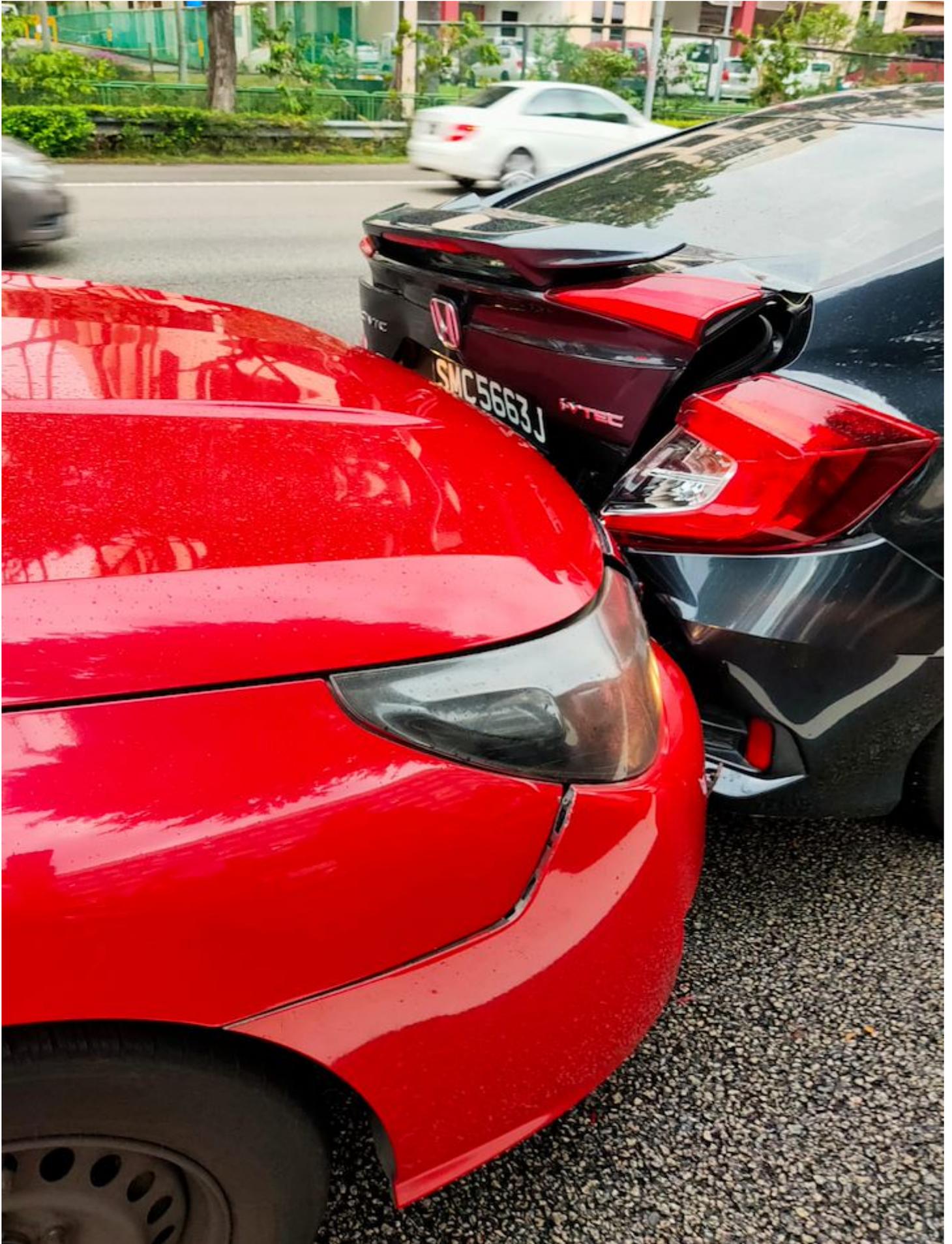
Sketch Plan

REFER TO POLICE REPORT NO. G/20220420/7038	
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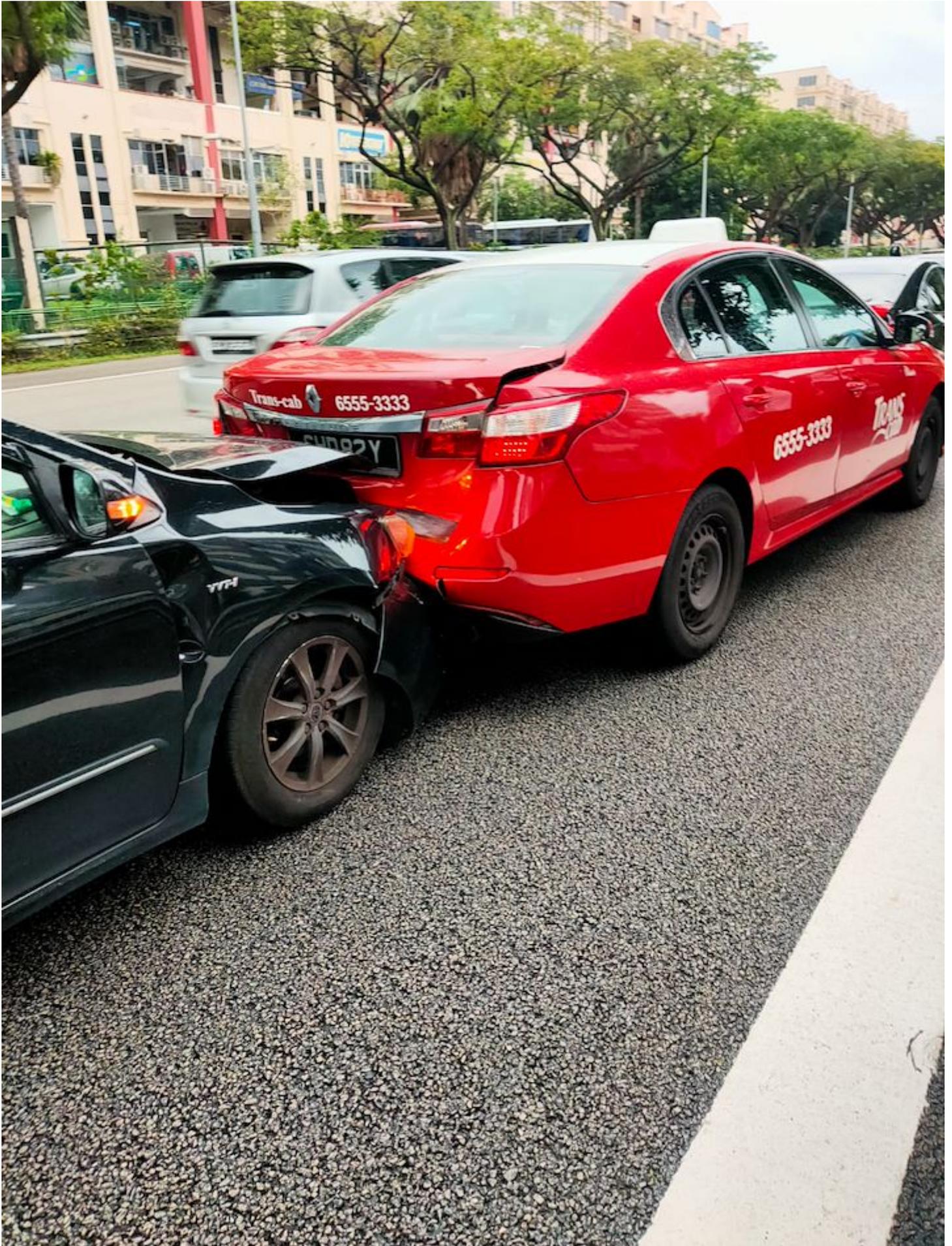


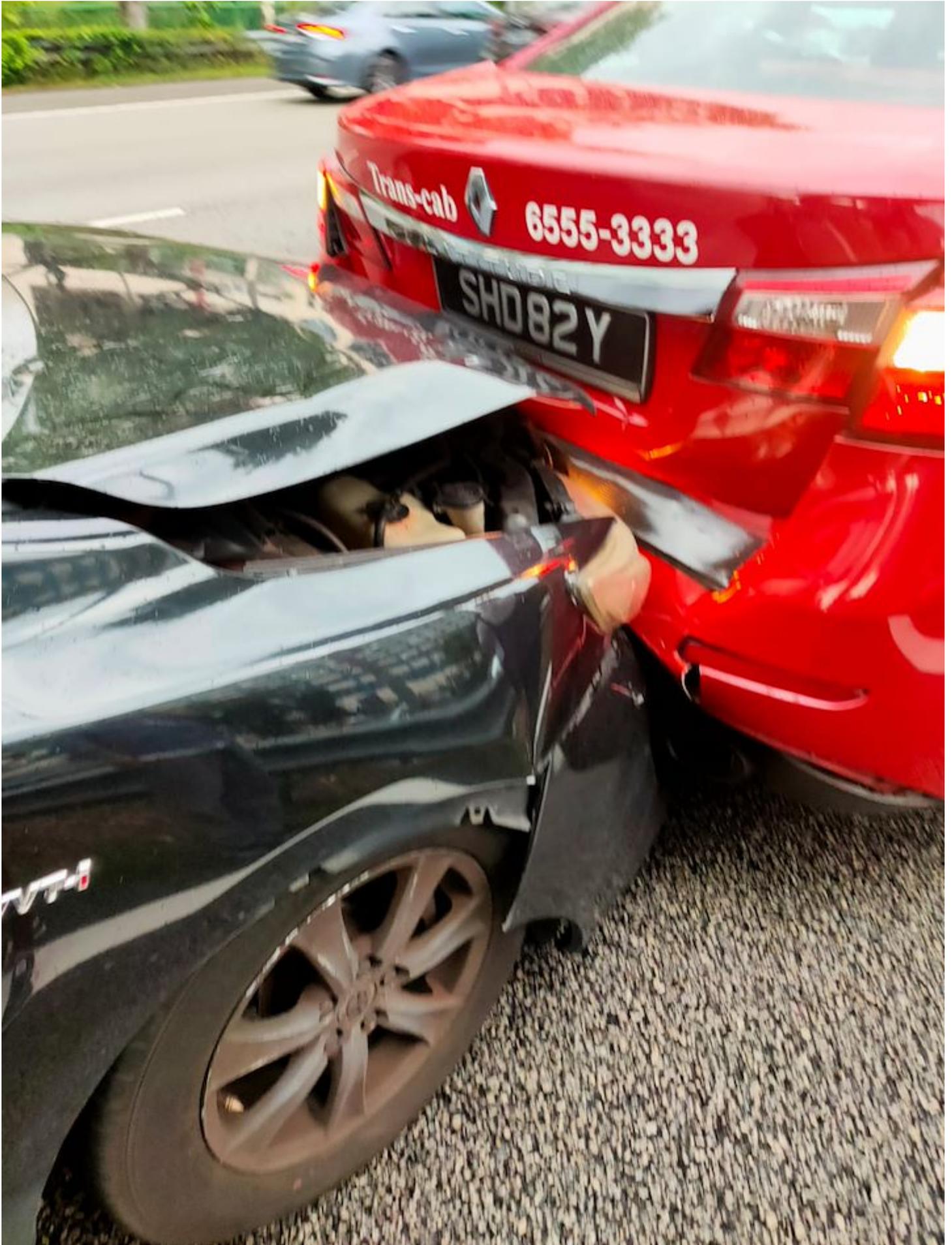




















**SINGAPORE
POLICE FORCE**



G/20220420/7038

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POLICE REPORT (NP299)

Report No. G/20220420/7038

Police Station Of Origin
Bedok Division HQ
30 Bedok North Road SINGAPORE 469676
Tel No:1800-2440000

Date/Time Report Made 20/04/2022 13:49	Vide Report No.	Station Diary No.
Name Of Informant VALAM PURI MARAN S/O KRISHNAN	Address 436 TAMPINES STREET 43 #03-107 SINGAPORE 520436	
ID Type / ID No. NRIC NO / S1538394A	Contact No. Home/Office:	Mobile: 97777478
Nationality SINGAPORE CITIZEN	Email Address maranvip3062@gmail.com	
Occupation PHV driver	Sex Male	Age 60
Institution/School Name	Date of Birth 13/02/1962	Race Indian
Date/Time Of Incident 19/04/2022 18:15 - 19/04/2022 18:15	Location Of Incident PAN ISLAND EXPRESSWAY	

Brief details.

On the mentioned date and time, I was travelling (SJN9157E) along PIE towards Changi Airport. Just near Eunos exit, I heard a loud bang and saw Transcab taxi (SHD82Y) in front of me already banged into rear of another vehicle (SMC5663J). I immediately tried to react by braking but could not stop in time, hence banging into rear of the taxi. I wish to state that it was drizzling and road was slippery. We alighted to exchange particulars and left the accident scene shortly after. There were no injuries on all parties involved. That is all.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 20/04/2022 13:49
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE
POLICE FORCE**



G/20220420/7038

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20220420/7038

Subjects Involved			
Victim			
Person Name	JUHARI BIN ARSHAD		
ID Type	NRIC NO	ID No	S1469285A
Gender	Male	Race	Malay
Mobile No	91548119		
Person Name	Unknown		
ID Type	NRIC NO	ID No	S7120920B
Gender	Male	Race	Chinese
Mobile No	97883614		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 20/04/2022 13:49
Officer In-Charge Of Case:	Classification Of Case: