

Budget Direct

SP0U226M0005 / PROGRESSIVE CAR CARE PTE LTD
ENTRY DATE & TIME: 22/06/2022 15:48 (SGT)
SUBMITTED BY: Liang Siew Chin
VERSION: 1 (22/06/2022 15:48 (SGT))

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 | 22/06/2022 15:48 (SGT) |
| Date of Accident | 21/06/2022 17:30 (SGT) |
| Exact Location of Accident | AYE, Singapore |
| Additional Location Information | AYER RAJAH EXPRESSWAY SINGAPORE |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|---------|
| Vehicle Registration Number | YP7000Z |
|-----------------------------|---------|

INSURED POLICYHOLDER

| | |
|--------------------------|--------------------------|
| Is company? | Yes |
| Name Of Registered Owner | VITE LOGISTICS PTE. LTD. |
| Company Reg No | 200720354K |
| Email Address | JEFFRI-VITE@MAIL.COM |
| Mobile Phone No | (Phone) +65-98892911 |
| Alternative Phone No | +65-98892911 |

VEHICLE PARTICULARS

| | |
|--|----------------------------------|
| Manufacturer | Mitsubishi |
| Model | Canter |
| Variant | MITSUBISHI / CANTER FEB21ER3SDEB |
| 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 | 2998 |

INSURANCE COMPANY

| | |
|---------------------------|-----------------------|
| Name of Insurance Company | AXA Insurance Pte Ltd |
| Type of Coverage | Comprehensive |
| Fleet Policy | No |
| Policy Number | GA586272/1 |
| Cover Note Number | - |

DRIVER

| | |
|-----------------|-----------------------|
| Name of Driver | NOR ISAM BIN ABDULLAH |
| Passport No/FIN | G2188146K |

| | |
|--|--|
| Date Of Birth | 06/02/1981 |
| Occupation | Outdoor |
| Date Of Driving Pass | 15/02/2013 |
| Driving experience | 9 YEARS AND 4 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-82600841 |
| Alt. Phone Number | - |
| Email Address | NORISAM1981@GMAIL.COM |
| Address | 18 YISHUN AVNUE 9 #02-22 JUNCTION NINE |
| Address complement | - |
| Postcode | 768897 |
| 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 | Tampines North Neighbourhood Police Post |
| Police Station Phone No | (Phone) +65-18007818999 |
| Alt. Police Station Phone No | (Fax) +65-67838603 |
| Police Station Address | Blk 461 Tampines Street 44 #01-56 Singapore 520461 |
| Was notice of intended Prosecution given? | No |
| If yes, against whom? | - |

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED
STATEMENT RECORDED BY ANNIE - PROGRESSIVE CAR CARE PTE LTD
TEL 67415336

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 | SMP9373B |
| Vehicle Manufacturer | - |
| Vehicle Model | - |
| Vehicle Variant | - |

| | |
|---|----------------------|
| Vehicle Colour | - |
| Vehicle Category | Private car |
| Name of Driver | UMI SALNI BINTE NANI |
| NRIC No | S7435857H |
| 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 | SMM7588C |
| Vehicle Manufacturer | - |
| Vehicle Model | - |
| Vehicle Variant | - |
| Vehicle Colour | - |
| Vehicle Category | Private car |
| Name of Driver | TEO SZE KIAT |
| NRIC No | S8123078A |
| 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 | NOR ISAM BIN ABDULLAH |
| Gender | Male |
| Phone No | (Phone) +65-82600841 |
| Address | 18 YISHUN AVENUE 9 #02-22 JUNCTION NINE |
| Address Complement | - |
| Post Code | 768897 |
| Approximate Age Years Old | - |
| Injuries Sustained | - |
| Injured person in which vehicle? | YP7000Z |
| Were seat belts worn? | - |
| Was this injured conveyed to hospital by ambulance? | - |

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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.



[Handwritten Signature]

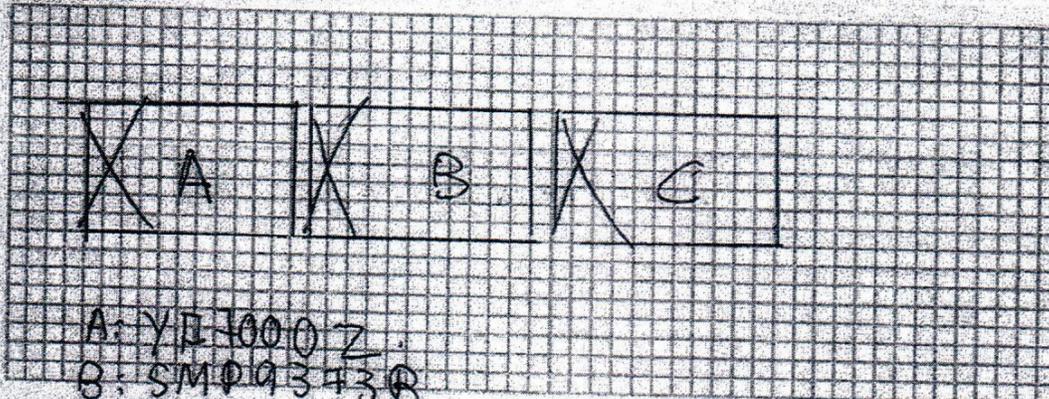
[Handwritten Signature]

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



A: YHJ000Z
 B: SMD9343B
 C: SMM7588C


**SINGAPORE
POLICE FORCE**


T/20220622/2050

1 of 3

Police Station Of Origin:
Tampines North NPP
461 Tampines Street 44 #01-56 SINGAPORE
520461
Tel No: 1800-7818999

Report No. T/20220622/2050

REPORT OF A TRAFFIC ACCIDENT

| | | |
|--|--------------------------------------|--------------------------|
| Date/Time Report Made: 22/06/2022 14:24 | Video Report No.: D/20220621/0076 | Station Diary No.: 12 |
|--|--------------------------------------|--------------------------|

| | |
|---|---|
| Name of Informant: NOR ISAM BIN ABDULLAH | Address: 18 YISHUN AVENUE 9 #02-22 JUNCTION NINE SINGAPORE 768897 |
|---|---|

| | |
|---|---|
| ID Type / ID No.: FIN NO / G2188146K | Contact No.: Home/Office: Mobile: 82600841 |
|---|---|

| | |
|---------------------------|--------|
| Nationality: MALAYSIAN | Email: |
|---------------------------|--------|

| | | | |
|--------------|------------|------------------------------|------------------------------|
| Sex: Male | Age: 41 | Date of Birth: 06/02/1981 | Type of Informant: Driver |
|--------------|------------|------------------------------|------------------------------|

| | | |
|----------------|----------------------|----------------------------|
| Race: Malay | Language: English | Institution / School Name: |
|----------------|----------------------|----------------------------|

| | | |
|-----------------------------|--|-----------------|
| Occupation: Lorry driver | Driving Licence Information: Class: 2B,3,4A | Date of Expiry: |
|-----------------------------|--|-----------------|

| | | | | |
|--|---------------------------|------------------------------------|--|--------------------------------------|
| Type of Accident: | Injury Attended by Police | Drink Drive: No | Date/Time of Accident: 21/06/2022 17:30 | Type of Location: Straight Road |
| 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: Yes |

| | | Model | Color | Condition | |
|----------|-------|------------|-------|-------------------|---|
| SMM7588C | Car | TOYOTA | Black | Seriously Damaged | 0 |
| SMP9373B | Car | TOYOTA | Black | Seriously Damaged | 0 |
| YP7000Z | Lorry | MITSUBISHI | White | Slightly Damaged | 0 |



**SINGAPORE
POLICE FORCE**



T/20220622/2050

2 of 3

Police Station Of Origin
Tampines North NPP
101 Tampines Street 44 #01-56 SINGAPORE
520461
Tel No: 1800-7818999

Report No. T/20220622/2050

CONTINUATION OF REPORT

| | | | |
|-----------------------------------|---|--|---------------------------------------|
| Any Pedestrian Involved: No | | | |
| No. of Pedestrians Injured: NIL | | Use of Pedestrian Crossing: NA | |
| Name | NOR ISAM BIN ABDULLAH | ID No. | G2188146K |
| Related Vehicle | YP7000Z (Lorry) | Contact No. | 82600841 |
| Hospital/Clinic | SUNSHINE CLINIC FAMILY PRACTICE & SURGERY | Class of Driving Licence & Expiry Date | Class: 2B,3,4A Date of Expiry: NIL |
| Date Treatment | 22/06/2022 | Date Discharge | 22/06/2022 |
| No. of Days granted Medical Leave | 05 | Degree of Injury | Slight |

Brief Details.

On the 21/06/2022 at about 1731hrs, I was driving my company's lorry reg no YP7000K along AYE towards Tuas. The incident happened after Clementi Ave 2 exit and before Clementi Ave 5 exit. I was driving along the extreme left lane at the speed about 50km/h. Suddenly an impact hit onto the rear of my vehicle. I stopped my vehicle and alighted. I discovered that it was chain collision involving another 2 vehicles behind me. Traffic police and ambulance were called down to the scene. I sustained back injuries due to the impact and was given 5 days MC. My alternative Msian contact number +600177766843



**SINGAPORE
POLICE FORCE**



T/20220622/2050

Police Station Of Origin:
Tampines North NPP
461 Tampines Street 44 #01-56 SINGAPORE
520461
Tel No: 1800-7818999

3 of 3
Report No. T/20220622/2050

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/
SR STAFF SGT MUHAMMAD
AZFAR BIN ALI

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
22/06/2022 14:24

Officer In Charge Of Case:
TP / GIT /
STAFF SGT MOHAMED SUFIAN BIN
MOHAMED JUNID
Contact No.: 65476247

Classification Of Case:

NP168