

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	05/07/2022 14:10 (SGT)
Reported by	Both
Date of Accident	04/07/2022 14:20 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	CTE (AYE) AT 10KM
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBF7430R
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	KANG JIE TECHNOLOGY LIMITED LIABILITY PARTNERSHIP
Company Reg No	T10LL0938L
Email Address	xingxing1199@hotmail.com
Mobile Phone No	(Phone) +65-90251829
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	CABSTAR 3.0 5M/T ABS 2DR 2WD EURO 5
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	Manual
CC	2953

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMCVSNW00016222201

DRIVER

Name of Driver	RAJU ARASU
Passport No/FIN	G5207701Q
Date Of Birth	30/07/1989
Occupation	Outdoor

Date Of Driving Pass	18/09/2018
Driving experience	3 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-84069551
Alt. Phone Number	-
Email Address	xingxing1199@hotmail.com
Address	C/O KANG JIE TECHNOLOGY LIMITED LIABILITY PARTNERSHIP
Address complement	-
Postcode	-
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	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?	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
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

PASSENGER 1

Name	WORKER
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Sembawang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18005549999
Police Station Address	4 Sembawang Crescent Singapore 757633
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT ATTACHED.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBD230H
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial 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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SHD3357K
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	DRIVER
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SHD3357K
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	Yes

SKETCH PLAN

VEH NO: GBF 7430 R
 INSURER: China Taiping
 DATE OF ACC: 04/7/22 @ 14:20

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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

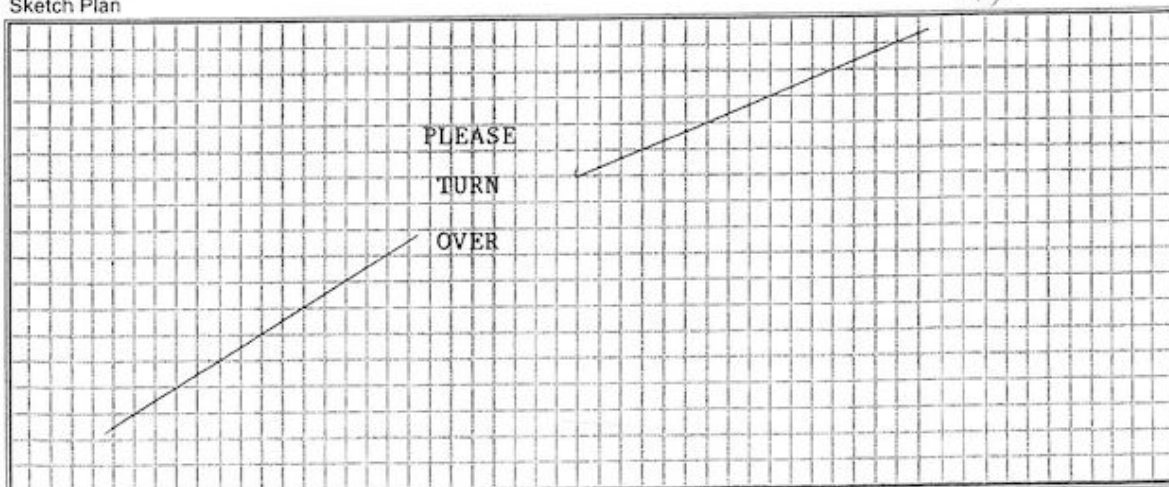
 Co Reg No. 104110228

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


Witnessed by Reporting Centre Personnel
 (Name as in NRIC/ID card) 5/2/22


Sketch Plan

PLEASE
TURN
OVER



Describe Circumstance of the Accident

** NOTE : PLEASE TAKE NOTE THAT YOUR INSURER HAVE 14DAYS TIME FRAME for you to submit OWN DAMAGE Claim under your Own Comprehensive policy. Pls check your policy for more information.

(☒) Claim Own Policy () Claim Third party () Reporting Only

() Claim OD/ TP at other workshop ()

Sketch Plan

A- GBF7430R
B: GBD230H
C: SHD3357K

Refer to Police Report attached.


Declaration

I/We declare the foregoing particulars are true in every respect.


Policyholder's Signature / Date & Time


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



 5/7/22
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card) (YS)




















**SINGAPORE
POLICE FORCE**


T/20220704/2088

Police Station Of Origin:
Sembawang N.P.C
4 Sembawang Crescent SINGAPORE
757633
Tel No: 1800-5549999

1 of 3

Report No. T/20220704/2088

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/07/2022 18:03	Vide Report No.: F/20220704/0106	Station Diary No.: 103
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Informant's Particulars

Name of Informant: RAJU ARASU			Address: APT BLK 36 CIRCUIT ROAD #13-418 BALAM GARDENS SINGAPORE 370036		
ID Type / ID No.: FIN NO / G5207701Q			Contact No.: Home/Office: Mobile: 84069551		
Nationality: INDIAN			Email:		
Sex: Male	Age: 32	Date of Birth: 30/07/1989	Type of Informant: Driver		
Race: Indian			Language:	Institution / School Name:	
Occupation: DELIVERY DRIVER			Driving Licence Information: Class: 2B,3 Date of Expiry: 19/08/2023		

General Information of the Accident

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 04/07/2022 14:20	Type of Location: Straight Road
Location: CENTRAL EXPRESSWAY				
Weather: Clear		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
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
GBD230H	Van				Slightly Damaged	1
GBF7430R	Lorry				Slightly Damaged	1

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20220704/2088

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Police Station Of Origin:
Sembawang N.P.C
4 Sembawang Crescent SINGAPORE
757633
Tel No: 1800-5549999

Report No. T/20220704/2088

CONTINUATION OF REPORT

Driver			
Name	RAJU ARASU	ID No.	G5207701Q
Related Vehicle	NIL	Contact No.	84069551
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: 19/08/2023
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 04/07/22 at 1420hrs, I was driving (GBF7430R Silver Lorry) behind of a van (GBD230H Silver Van) at CTE (AYE) 10 Km. While my lorry and van were driving to an exit, I was driving at a speed of 60km/h while the van was driving at a speed of 70km/h. The van in front of me suddenly brake while exiting the exit. When I saw the van brake, I quickly brake but I was unable to stop in time causing my lorry hit to the van.

When I gotten down lorry, I saw the van's right taillight was slightly damages. I saw both driver and the passenger of the van both did not sustain any injuries. I saw my lorry's front have a slight dent near the left headlight and my left mirror was broken. Both my passenger and me did not sustain any injuries. When I look at the front of the van, I saw a blue taxi. The taxi was not damaged the driver was sent to hospital by ambulance, but the passenger of the taxi did not sustain any injuries.



**SINGAPORE
POLICE FORCE**



T/20220704/2088

Police Station Of Origin:
Sembawang N.P.C
4 Sembawang Crescent SINGAPORE
757633
Tel No: 1800-5549999

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Report No. T/20220704/2088

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:
L /
SC2 SOH ZHAOXUAN

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
04/07/2022 18:03

Officer In Charge Of Case:
TP / GIT /
STAFF SGT SYED MUHAMMAD ISA BIN
OMAR ALHABSHEE
Contact No.: 65476187

Classification Of Case:

NP168