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 witholding 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.

- 4. The issue and acceptance of this is form by instrained 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 25/07/2022 13:13 (SGT) Reported by Date of Accident 22/07/2022 21:30 (SGT) Exact Location of Accident Braddell Rd, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number PC7687S

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner SINGAPORE BUS CHARTER Company Reg No 5XXXX842J Email Address connect3lau@gmail.com Mobile Phone No (Phone) +65-94579785 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Isuzu Model LT134P 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 No - Claiming third party your vehicle? Vehicle Category Bus

Transmission Auto CC 7790

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Policy Number / Cover Note Number DMB1SNW00002952200

DRIVER

Name of Driver PANDIAN SIVAKUMAR Passport No/FIN FXXXX438P Date Of Birth 06/12/1975 Occupation Outdoor

Date Of Driving Pass 11/09/2020 Driving experience 1 YEAR AND 10 MONTHS Gender Mobile Number (Phone) +65-82810941 Alt. Phone Number Email Address connect3lau@gmail.com Address BLK 6 FLORA ROAD #04-05 Address complement AZALEA PARK CONDOMINIUM Postcode 509727 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 Collision - Head to Rear Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 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) 35 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 **UNKNOWN** Gender Male PASSENGER 2 Name UNKNOWN Gender Male PASSENGER 3 Name **UNKNOWN** Gender Male PASSENGER 4 Name **UNKNOWN** Gender Male PASSENGER 5 Name UNKNOWN Gender Male PASSENGER 6 UNKNOWN Gender Male PASSENGER 7 UNKNOWN Gender

Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?

Police Station Name

Police Station Phone No

Alt. Police Station Phone No

Police Station Address

Police Station Phone No

Police Station Address

Police Station Phone No

Police Station Pho

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT E/20220723/7007

ATTACHMENT(S)

Are accident photos available for attachment?

Yes
Was there any video captured by Car Camera?

Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLV9454G 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

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 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. The 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

lunderstand, 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 (as 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;
- (tr) 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
- (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 GM 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 &

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

Watersed by Reporting Centre Personnel

Sketch Plan

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Report No. E/20220723/7007

POLICE REPORT (NP299)

Police Station Of Origin Tanglin Division HQ 21 Kampong Java Road SINGAPORE 228892

Tel No:1800-3910000

Date/Time Report Made	Vide Re	port No.		Station Diary No.
23/07/2022 09:29				
Name Of Informant	Address			
PANDIAN SIVAKUMAR	APT BLK 6 FLORA ROAD #04-05 AZALEA PARK CONDOMINIUM SINGAPORE 509727			
ID Type / ID No. FIN NO / F8459438P	Contact No. Home/Office: Mobile: 82810941			
Nationality INDIAN	Email A	ddress a@gmail.co	m	
Occupation	Sex	Age	Date of Birth	Race
Bus driver	Male	46	06/12/1975	Indian
Institution/School Name	Language English			
Date/Time Of Incident 22/07/2022 21:25 - 22/07/2022 21:30	Location Of Incident BRADDELL ROAD 11KM			
Dulaf datalla				

Brief details.

ON 22/07/2022 @ 21:25HRS, I WAS DRIVING MY BUS PC7687S ALONG CTE TOWARDS BRADDELL ROAD AND WAS ON THE EXTREME LEFT LANE. AS I AM APPROACHING THE EXIT OF BRADDELL ROAD, A CAR SLV9454G AHEAD OF ME KEEP JAMMING ON HIS BRAKES FOR NO REASON AND AFTER PASSING THE TRAFFIC LIGHT JUNCTION, THE CAR JAMMED BRAKED AGAIN FOR NO REASON AND THERE IS NOTHING VISIBLE INFRONT OF THE CAR AND UPON SEEING I SWERVE MY BUS TO MY RIGHT TO AVOID THE CAR AND WHEN I SWERVE BACK TO THE LEFT LANE AGAIN AS I NEEDED TO EXIT TO BRADDELL ROAD WHEN THE CAR AGAIN JAMMED BRAKE FOR

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. Date/Time: 23/07/2022 09:29		
Signature Of Interpreter: Not applicable			
Officer In-Charge Of Case:	Classification Of Case:		





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POLICE REPORT (NP299)

Subjects Involved

Person Name

Suspect

CONTINUATION OF REPORT

Report No. E/20220723/7007

NO REASON AND THIS TIME I COULD NOT AVOID THE ACCIDENT.

AFTER THE ACCIDENT, THE CAR DID NOT STOP IMMEDIATELY TO EXCHANGE PARTICULARS WITH ME BUT INSTEAD DROVE FOR A DISTANCE BEFORE STOPPING THE CAR DRIVER CAME DOWN OF THE CAR. AFTER ALIGHTING HIS CAR HE DID NOT DARE TO COME NEAR ME AND HE DID NOT WANT TO EXCHANGE HIS PARTICULARS WITH ME BUT INSTEAD HE WANT MY DRIVING LIC DETAILS WHICH I FURNISH HIM. I ONLY MANAGE TO GET HIS CONTACT NUMBER AND WHICH I PASSED TO MY BOSS.

MY BOSS TRIED TO CALLED HIM BUT HE BLOCKED MY BOSS CALL AND AFTER AT AROUND 2AM HE CONTACTED MY BOSS AND THE BACKGROUND SOUNDED LIKE DISCO ACCORDING TO MY BOSS THERE IS ONLY SOUND BUT NEVER TALK TO MY BOSS AT ALL.

WE SUSPECT THIS IS A FRAUD ACCIDENT CASE HENCE WE ARE MAKING A POLICE REPORT.

MY BUS HAVE CCTV RECORDING OF THE INCIDENT.

UNKNOWN

Gender	Male	Race	Chinese
Language	English	Mobile No	94524682
Victim	Market State of the State of th		
Signature Of Officer Recording The Report: Not applicable		The ide	ure Of Informant: entity of the person making this
			has been authenticated by Singpass. nature is required.
Signature Of Interpreter: Not applicable		Date/T 23/07/	Time: 2022 09:29
Officer In-Charge Of Case:		Classit	fication Of Case:





3 of 3

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. E/20220723/7007

Person Name	PANDIAN SIVAKUMAR		
ID Type	FIN NO	ID No	F8459438P
Gender	Male	Age	46
Race	Indian	Language	English
Occupation	Bus driver	Address Type	
Address	APT BLK 6 FLORA ROAD #04- 05 AZALEA PARK CONDOMINIUM SINGAPORE 509727	Mobile No	82810941
ls Informant A Victim?	Yes		

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. Date/Time: 23/07/2022 09:29		
Signature Of Interpreter: Not applicable			
Officer In-Charge Of Case:	Classification Of Case:		