SA1P22620003-02 / Appraisals Associates Pte Ltd ENTRY DATE & TIME: 03/06/2022 14:14 (SGT) SUBMITTED BY: Muhammad Afiq Bin Mohamed Kamal VERSION: 3 (11/06/2022 15:04 (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 Actual 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.

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 03/06/2022 14:14 (SGT) Reported by Date of Accident 18/05/2022 22:45 (SGT) Exact Location of Accident Near 730 Geylang Rd, Singapore 389641 Additional Location Information JUNCTION OF GUILLIEMARD ROAD AND GEYLANG ROAD Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBH359A

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner PAN PACIFIC VAN & TRUCK LEASING PTE LTD Company Reg No 201511635R Email Address ppemclaims@gmail.com Mobile Phone No (Phone) +65-87233003 Alternative Phone No (Office) +65-87233003

VEHICLE PARTICULARS

Manufacturer Nissan Model Cabstar 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 - Reporting only your vehicle? Vehicle Category Commercial vehicle

Transmission Manual CC 1998

INSURANCE COMPANY

Name of Insurance Company India International Insurance Pte Ltd Policy Number / Cover Note Number D19MFL0005549 02

DRIVER

Name of Driver PALANIYANDI SARAVANAKUMAR Passport No/FIN G2951153K Date Of Birth 23/05/1988 Occupation Outdoor

Date Of Driving Pass 23/03/2020 Driving experience 2 YEARS AND 2 MONTHS Gender Mobile Number (Phone) +65-88910944 Alt. Phone Number Email Address ppemclaims@gmail.com Address 7 LORONG 42 GEYLANG #06-05 ASTON MANSIONS Address complement Postcode 398028 Is the driver the policyholder? No If No, Relationship of the Driver with the Insured Hirer Does Driver Own Other Vehicles? Nο 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 Side Swipe 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) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Nο Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement PASSENGER 1 Name **UNKNOWN** Gender PASSENGER 2 Name UNKNOWN Gender Female **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? If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO POLICE REPORT NO: G/20220601/7093 ATTACHMENT(S)

Yes

No

Are accident photos available for attachment?

Was there any video captured by Car Camera?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMX1559T
Vehicle Manufacturer	Toyota
Vehicle Model	Prius
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

- Please report <u>correctly</u> 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.
- 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.
- 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)

I understand, acknowledge, agree and consent that :

(a) My insurer, my w orkshop 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) w ho have insured vehicle(s) involved in this accident (all insurer(s) w ho have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' is w yers/law firms, the Monetary Authority of Singapore and any relevant government agencylauthority (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;
- (ii) carrying out and/or dealing w ith 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 mayican 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 Driver's Signature (If driver is not the policyholder) / Date & Time 02.06.22 1440HRS

Witnessed by Reporting Centre
Personner HAKIM

Sketch Plan

GUILLEMARD RD TOWARDS GEYLANG LORONG 4



Describe Circumstances of the Accident REFER TO POLICE REPORT Declaration I/We declare the foregoing particulars are true in every respect.

> Driver's Signature (if driver is not the policyholder) / Date 8 Time 02.06.22 1430HRS

Time

Witnessed by Reporting Centre Personnel HAKIM





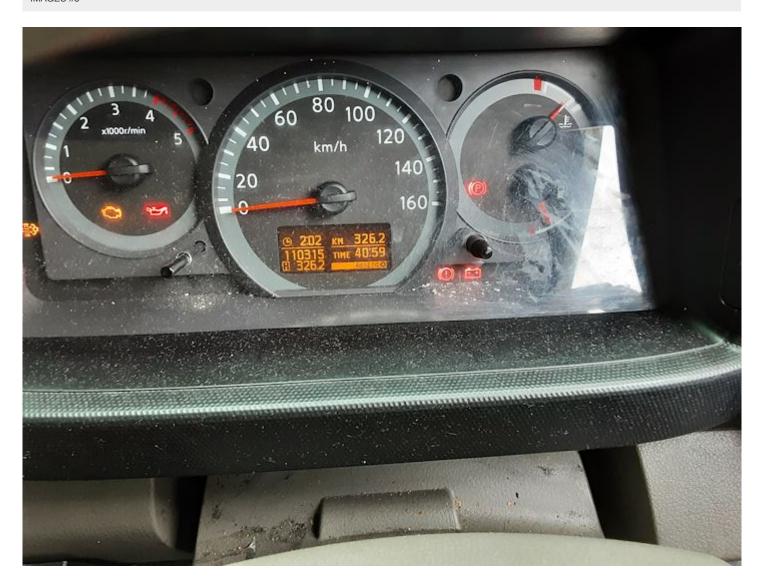
















1 of 3

Report No. G/20220601/7093

POLICE REPORT (NP299)

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

Date/Time Report Made 01/06/2022 22:00	Vide Re	port No.		Station Diary No.	
Name Of Informant	Address				
PARTEEK SINGH	7 LORONG 42 GEYLANG #06-05 ASTON MANSIONS SINGAPORE 398028				
ID Type / ID No.	Contact No.				
FIN NO / G3064714P	Home/Office: Mobile:				
<u> </u>	88910944				
Nationality	Email Address				
INDIAN	PARTEEKSINGH88@GMAIL.COM				
Occupation	Sex	Age	Date of Birth	Race	
managing director	Male	34	23/05/1988	Indian	
Institution/School Name	Language English				
Date/Time Of Incident 18/05/2022 22:45 - 18/05/2022 23:15	Location Of Incident 7 LORONG 42 GEYLANG #06-05 ASTON MANSIONS				
100 Total 100 State 117 St	SINGAPORE 398028				

Brief details.

I parteek Singh, writing this report for the behalf of my employee Palaniyandi Saravanakumar (G2951153K) accident reports reference number TP/IP/12460/2022.

On 18 may 2022 at about 10.45pm my employee palaniyandi saravanakumar just had his dinner and heading home driving along Geylang Lorong 18. While driving along the way out from Geylang Lorong 18 and waiting for the traffic to be clear before I can turn into Guillemard road. Then came a random drunken Chinese man and lady stop my vehicle randomly and just ask me to drive somewhere without asking my

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: 01/06/2022 22:00			
Officer In-Charge Of Case:	Classification Of Case:			





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POLICE REPORT (NP299)

Subjects Involved

Person Name Gender unknown

Male

Suspect

Victim

CONTINUATION OF REPORT

Report No. G/20220601/7093

permission they enter my vehicle and shouted at me to drive off. I was unable to stop them from entering my vehicle because there was cars waiting behind my vehicle to turn out. I have no choice to just driver off as I don't want to obstruct the way of other vehicle. While out on Guillemard road on the left side of the road because I was turning left towards Geylang Lorong 22 where I live somewhere there. I was slowly down as I approaching the junction to "Turn Left and the drunken man obstruct me from turning left asking me to go straight and block my view and which I can't turn into my lane and i have to re-adjust as my vehicle was going a little bit right entering the next lane and the car on my right was turning to the left to hit my vehicle on my right side bumper. So I immediately stop and went down from my vehicle to check and the car owner of vehicle Smx1559t also went down then come the drunken man and her partner out from my vehicle and start fighting with the car owner of smx1559t. The drunken man ask me to go immediately as he say then he will settle this matter as he says was his fault so I thought he will settle and i doesn't want to obstruct other vehicle to turn so about 1-2 min waiting at the scene then the drunken man shouted at me asking me to leave and go so i left the scene please feel free o contact me if you require nay further details.

Person Name	PARTEEK SINGH					
ID Type	FIN NO	ID No	G3064714P			
Gender	Male	Age	34			
		I la				
	icer Recording The Report:		Signature Of Informant:			
Not applicable		repo	identity of the person making this ort has been authenticated by Singpass. signature is required.			
Signature Of Interpreter: Not applicable			Date/Time: 01/06/2022 22:00			
Officer In-Charge Of Case:		Clas	Classification Of Case:			





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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20220601/7093

Race	Indian	Language	English
Occupation	managing director	Address	7 LORONG 42 GEYLANG #06- 05 ASTON MANSIONS SINGAPORE 398028
Mobile No	88910944	Is Informant A Victim?	Yes
Person Name	PARTEEK SINGH (Informant)		

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: 01/06/2022 22:00			
Officer In-Charge Of Case:	Classification Of Case:			



IMPORTANT NOTE: Please submit the completed Addendum form to the <u>same</u> Accident Reporting Centre with whom you submitted the Original Report.

			ADDEND	MUM			
(A)	PARTICULARS OF P	ERSON MAKING T	HE AMENDMENT	rs:			
	Original Report No:	SA1P22620003		Vehicle Registrati	on No:	GBH359A	
	Name (as shown in	PAN-PACIFIC VAN & NRIC):	TRUCK LEASING PTE	LTD NRIC/FIN/Passpo	ort No:	201511635R	
		(*Wehiole Briver/Vehicle Owner) (*) Please delete as appropriate					
	Address: 8 CHANG CHARN RD #04-01 LINK BLD			Singapore (159637)			
	Contact (Tel): 87233003 Mobile No.: 87233003						
	Email Address: PP	emclaims@gmail.co	o <mark>m</mark>	<u></u>			
	Date of Accident: 1	8/05/2022		Time of Accident:	22:4	5	
	Place of Accident:	JUNCTION OF G	UILLIEMARD F	ROAD AND GEYLA	NG RC	OAD	
	Insurance Company					2	
	ADDITIONAL INFOR						
						-	
	<u>8</u> 4					ž	
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	8					7	
	<u> </u>					5	
	News	9					
	Datis de la Company	N Simot		Decention 2	t D	Walter Black	
	Policyholder, Orive Date:	r s signature		Name: NRIC/FIN No. Date:		sonnel's Signature	

G1ARMC Addendum Form