

# 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 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 ..... 18/08/2022 18:04 (SGT)  
Reported by ..... Driver  
Date of Accident ..... 17/08/2022 11:00 (SGT)  
Exact Location of Accident ..... Clementi Rd, Singapore  
Additional Location Information ..... CLEMENTI ROAD TOWARDS AYE  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... YJ9433B

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... GUAN LEE VEG & FRUITS PTE LTD  
Company Reg No ..... 200107860H  
Email Address ..... GUANLEEVEGFRUITS@GMAIL.COM  
Mobile Phone No ..... (Phone) +65-67791009  
Alternative Phone No ..... -

### VEHICLE PARTICULARS

Manufacturer ..... Mitsubishi  
Model ..... Canter  
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? ..... No - Claiming third party  
Vehicle Category ..... Commercial vehicle  
Transmission ..... Manual  
CC ..... 3000

### INSURANCE COMPANY

Name of Insurance Company ..... NTUC Income Insurance Co-operative Ltd  
Policy Number / Cover Note Number ..... 5118696222-01

### DRIVER

Name of Driver ..... NAY LYNN THET NAING  
NRIC No ..... G6263412Q  
Date Of Birth ..... 23/06/1979  
Occupation ..... Outdoor

Date Of Driving Pass .....	16/10/2010
Driving experience .....	11 YEARS AND 10 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-83864773
Alt. Phone Number .....	-
Email Address .....	GUANLEEVEGFRUITS@GMAIL.COM
Address .....	11 WHOLESALE CENTRE
Address complement .....	01-581
Postcode .....	110011
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 .....	Hit and run / Vandalism / Damaged whilst parked
Weather Conditions .....	Clear
Road Surface .....	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? .....	No
Number of vehicles involved in the accident .....	2
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) .....	0
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 .....	-

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Jurong Neighbourhood Police Post
Police Station Phone No .....	(Phone) +65-18002659999
Alt. Police Station Phone No .....	(Fax) +65-62664987
Police Station Address .....	Blk 158 Yung Loh Road #01-58 Singapore 610158
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO SKETCH PLAN AND 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 .....	YP2709X
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) ..... -

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5. **Any false reporting may be referred to the Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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 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



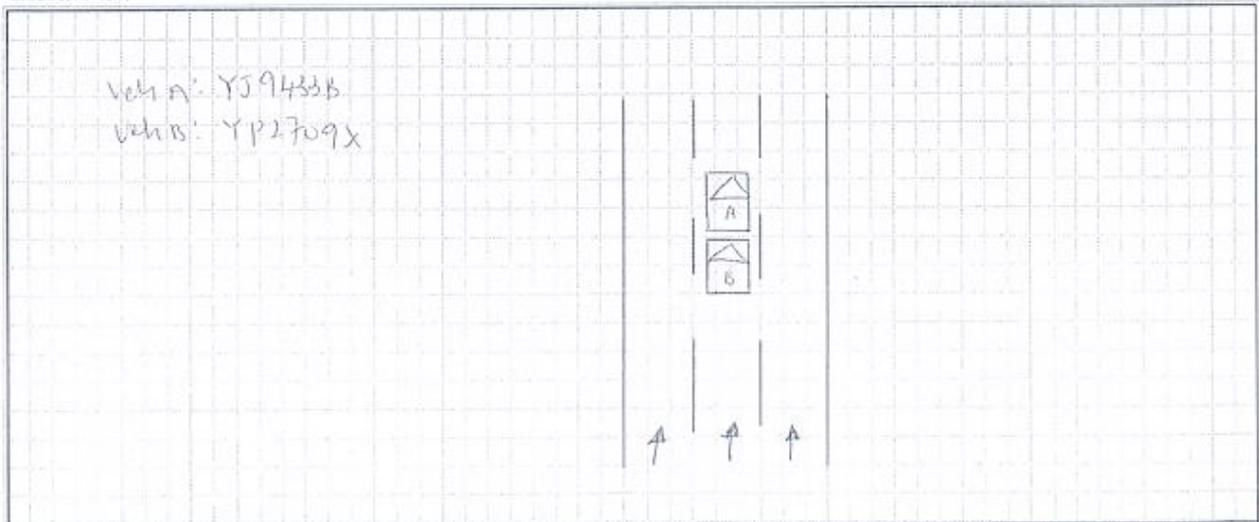
Driver's Signature (if driver is not the policyholder) / Date & Time



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



**Sketch Plan**



Describe Circumstance of the Accident

Report

Police

TU

T/20220817/2121

Peter

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

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




**SINGAPORE  
POLICE FORCE**


T:20220817/2121

Police Station Of Origin:  
Jurong NPP  
158 Yung Loh Road #01-58 SINGAPORE  
610158  
Tel No: 1800-2659999

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Report No. T:20220817/2121

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 17/08/2022 21:52	Vide Report No.: D/20220817/0058	Station Diary No.: 39
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**Informant's Particulars**

Name of Informant: NAY LYNN THET NAING		Address: APT BLK 321 TAH CHING ROAD #14-78 SINGAPORE 610321	
ID Type / ID No.: FIN NO / G6263412Q		Contact No.:	Mobile: 85414227
Nationality: MYANMAR		Email:	
Sex: Male	Age: 43	Date of Birth: 23/06/1979	Type of Informant: Driver
Race: Burmese		Language: English	Institution / School Name:
Occupation: Lorry driver		Driving Licence Information: Class: 3,4	Date of Expiry:

**General Information of the Accident**

Type of Accident: Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 17/08/2022 11:00	Type of Location: Roundabout
Location:  CLEMENTI ROAD			
Weather: Clear	Road Surface: Dry	Road Speed Limit:	
Traffic Flow:	Traffic Control:	Traffic Volume: Light	
Type of Collision: Moving Vehicle Against - Parked Vehicle			Anyone conveyed by ambulance: Yes

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
YJ9433B	Lorry				Seriously Damaged	0
YP2709X	Lorry					0

**Details of Person Involved**

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



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T/20220817/2121

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610158  
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Report No. T/20220817/2121

CONTINUATION OF REPORT

Driver			
Name	NAY LYNN THET NAING		ID No. G6263412Q
Related Vehicle	YJ9433B (Lorry)		Contact No. 85414227
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 17/08/2022 at about 1100hrs, my vehicle broke down and it was stopped along Clementi Road near bus stop number 16141. My vehicle was on the 2nd lane and I was directing the traffic while waiting for another company lorry to assist. I had also placed a box about a few meters away from my lorry as I did not have triangular plate.

Shortly after, another company came and stopped at the bus stop and we were transferring the delivery items from my lorry to the other company lorry. I had went to take the triangular plate from the other company lorry.

While I was taking the plate, I heard loud sound and when I checked, I saw that a lorry had collided onto the rear of my breakdown lorry.

Traffic Police and Ambulance were at scene. I was not injured. My vehicle has camera and but it was not recording as the engine was switched off.



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POLICE FORCE**



T/20220817/2121

Police Station Of Origin:  
Jurong NPP  
158 Yung Loh Road #01-58 SINGAPORE  
610158  
Tel No: 1800-2659999

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Report No. T/20220817/2121

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:

J/  
SR STAFF SGT GUNASEELAN  
RAVESADRAN

Signature Of Informant:

Signature Of Interpreter:  
Not applicable

Date/Time:  
17/08/2022 21:52

Officer In Charge Of Case:  
TP / GIT /  
SI KOH WEI JIE  
Contact No.: 97303412

Classification Of Case:

NP168