

Accident Reporting Draft

VEHICLE NO: GBC2323R

MODEL: TOYOTA DYNA

AUTO/MANUAL

DATE OF ACCIDENT	24/8/2022	C.C: 2,982
TIME OF ACCIDENT	1900	HRS AM/PM
LOCATION OF ACCIDENT	PIE (AIRPORT) BEFORE STEVEN ROAD EXIT	
EXACT PURPOSE USE DURING ACCIDENT	EMPLOYMENT/ PRIVATE USE/ PRIVATE HIRE	
NAME OF OWNER	BESTEC CONSTRUCTION PTE LTD	
CONTACT NO.	98182798 (D), 98177470 EMAIL: ENQUIRY@BESTEC.COM.SG	
NRIC	200107579R	
CLAIM TYPE	OD / THIRD PARTY / REPORTING ONLY 3P	
INSURANCE CO.	NTUC	
TYPE OF COVERAGE	COMPREHENSIVE/ THIRD PARTY/ THIRD PARTY FIRE & THEFT	
POLICY NO.		
NAME OF DRIVER	AS ABOVE / IF NO: ROY TAPAN CHANDRA	
NRIC	G8362097N	ANY PASSENGER: 7
DATE OF BIRTH	7/10/1985	1) VEERAPPAN SURESH
OCCUPATION	OUTDOOR / INDOOR	2) SHANMUGAM MARIYAPPAN
DATE OF DRIVING PASS	24/4/2018	3) ZAW WIN TUN
GENDER	MALE / FEMALE	4) HASSAN MD RUBEI
CONTACT NO.	98182798 (D), 98177470	5) SUN ZHAOLIAN
ADDRESS	23 DEDAP PLACE S(809522)	
DOES DRIVER OWN OTHER VEHICLES	NO/ IF YES: REG NO.	
RELATIONSHIP	EMPLOYEE/ IF NO:	
WEATHER CONDITION	CLEAR / RAINY/ OTHER: RAINY	
ROAD SURFACE	DRY / WET/ OTHER: WET 7	
ANY INJURIES	NO / IF YES: YES - DRIVER + PASSENGERS	
CONTACT NO.		
POLICE REPORT	NO / IF YES: NOTICE OF INTENDED PROSECUTION GIVEN?	
VIDEO RECORDING	NO / YES	NO/IF YES: WHO?
AUDIO RECORDING	NO / YES	SCENE PHOTO(S) NO / YES
VEHICLE B NO.	GBJ7073S	ANY PASSENGER:
NAME		
CONTACT NO.		
VEHICLE C NO.	YQ6135U	ANY PASSENGER:
VEHICLE D NO.		ANY PASSENGER:
VEHICLE E NO.		ANY PASSENGER:
VEHICLE F NO.		ANY PASSENGER:
ANY WITNESS		
WITNESS CONTACT NO.		
PARTICULAR WORKSHOP	<div style="text-align: center;"> <p>Ryder Auto Pte Ltd</p> <p>2 Kaki Bukit Ave 2, #02-19/22 @ Kaki Bukit Auto Hub, Singapore 417921</p> <p>Email: ryderautoworkshop@gmail.com</p> <p>Tel: 67418277</p> </div>	
MOBILE NO.		
CONTACT PERSON		
FAX NO.		
HAVE YOU BEEN APPROACHED BY UNKNOWN PERSON SOLICITING(S)/ OFFERING ACCIDENT CLAIMS ASSISTANCE?	NO / YES	

SKETCH PLAN

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. 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 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

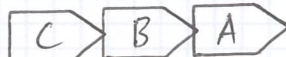


Driver's Signature (If driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan

PIE (AIRPORT) BEFORE STEVEN ROAD EXIT



A: GBC2323R
B: GBJ7073S
C: YQ61354

Describe Circumstances of the Accident

I (GBC2323R) WAS TRAVELLING ALONG PIE (AIRPORT) BEFORE STEVEN ROAD EXIT. VEHICLE AHEAD SLOWED DOWN AND STOPPED. I FOLLOWED SUIT. MOMENTS LATER, WHILE MY VEHICLE WAS STILL STATIONARY, VEHICLE B (GBJ7073S) REAR-ENDED MY VEHICLE. VEHICLE C (YQ6135U) THEN REAR ENDED VEHICLE B AND VEHICLE B THEN COLLIDED WITH THE REAR OF MY VEHICLE FOR A SECOND TIME.

Declaration

We declare the foregoing particulars are true in every respect.

If you wish to claim against your own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more details.

Policyholder's Signature / Date & Time



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

Witnessed by Reporting Centre Personnel

LETTER OF AUTHORISATION

To: Ryder Auto Pte Ltd

Re: ACCIDENT ON 24/8/2022 INVOLVING GBC2323R GBJ7073S YQ6135U

ALONG / AT

PIE (AIRPORT) BEFORE STEVEN ROAD EXIT

I/We BESTEC CONSTRUCTION PTE LTD (NRIC No. 200107579R)

of 23 DEDAP PLACE S(809522)

1. The owner of motor vehicle no. GBC2323R hereby authorise **Ryder Auto Pte Ltd** to commence repairs of the said vehicle forthwith. I/We agree to assign the whole proceeds of my/our third party claim to **Ryder Auto Pte Ltd** including any claim for Loss of Use if a vehicle had been provided by **Ryder Auto Pte Ltd** during the period of repairs to my/our vehicle if applicable. My/our solicitors (to be appointed by **Ryder Auto Pte Ltd** on my/our behalf) shall accept this as my/our irrevocable authority to pay the amount compensated direct to **Ryder Auto Pte Ltd** after deduction of their cost on a solicitor & client basis. **I/We undertake to co-operate fully with Ryder Auto Pte Ltd and/or my/our solicitors and also with a true Motor Accident Report/Police Report until the claim to a successful conclusion including court proceedings, failing which, I/We undertake to bear repair costs, rental, legal costs and any other incidentals incurred.**
2. If the 3rd party claim is unsuccessful or partly successful as the case may be, I/we hereby instruct and authorise **Ryder Auto Pte Ltd** to claim direct from my/our insurance company on my/our vehicle immediately without any delay.
3. If for any reason my/our insurer's are not willing to settle the repair costs either in part or in whole then I/ we undertake to pay **Ryder Auto Pte Ltd** the repair cost.
4. In alternative to serial number 2 and 3 above if the 3rd party claim fails or is only partly successful then I/we undertake to pay **Ryder Auto Pte Ltd** the difference in amount of the repair cost.
5. I/We authorise **Ryder Auto Pte Ltd** to sign all discharge voucher/indemnity forms and all necessary papers on my/our behalf in connection with the above claim. **We confirm full discharge of all property damage claims upon signing of the discharge voucher by our repairer, Ryder Auto Pte Ltd.**
6. I/We also authorise **Ryder Auto Pte Ltd** to appoint such a firm of solicitors on my/our behalf as **Ryder Auto Pte Ltd** deem fit for the purpose of third party/own insurance claims.
7. I/We undertake to inform **Ryder Auto Pte Ltd** and/or the solicitors appointed by **Ryder Auto Pte Ltd** on my/our behalf in the event the third party's insurance company communicate with me/us directly by telephone or in writing and I/We further undertake not to accept any monies or other or settlement from the third party's insurers without first communicating with you.
8. In the event that third party insurer issued the **Agreed Settlement Cheque** to me/us, I/We undertake to either give the said cheque to **Ryder Auto Pte Ltd**, or bank into my/our account and re-issue the cheque amount to **Ryder Auto Pte Ltd**.



DATED THIS _____ DAY OF 24/8/2022 20____



Signature of owner

(Company's stamp – if any)

Signature of Witness

Name of Witness