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.

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 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 26/08/2022 17:43 (SGT) Reported by Date of Accident 26/08/2022 10:20 (SGT) Exact Location of Accident PIE, Singapore Additional Location Information JALAN BAHAR EXIT Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number XD4439L

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner SANTA WAREHOUSING PTE LTD Company Reg No 199804840E Email Address ALVIN.WONG@SANTA.COM.SG Mobile Phone No (Phone) +65-65433333 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Nissan Model Cgb45clsmnb 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 Tanker Transmission Manual CC 13074

INSURANCE COMPANY

Name of Insurance Company India International Insurance Pte Ltd Policy Number / Cover Note Number D19MFL0000295 03

DRIVER

Name of Driver LIM KIM CHOON NRIC No S0199689D Date Of Birth 30/01/1952 Occupation Outdoor

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	02/08/1996 26 YEARS Male (Phone) +65-98335563 - ALVIN.WONG@SANTA.COM.SG BLK 538 JELAPANG ROAD #11-24 - 670538 No Employee No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Collision - Head to Rear Raining Wet
OTHER INFORMATION	
Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement	No 2 No - Yes 1 No
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 Was notice of intended Prosecution given? If yes, against whom?	Yes Nanyang Neighbourhood Police Centre (Phone) +65-18007929999 (Fax) +65-67912972 No. 2 Jurong West Avenue 5 Singapore 649482 No
CIRCUMSTANCES OF ACCIDENT	
REFER TO THE ATTACHED POLICE REPORT T/20220826/2049	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera?	Yes No
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number	GBJ4291Z

Vehicle Model
Vehicle Variant

Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	Allianz Insurance Singapore Pte. Ltd.
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 Formmust 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 and the
- of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by interested parties,
- 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 (all 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;
- (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 may/can be disclosed by any of the insurers and/or GA 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.



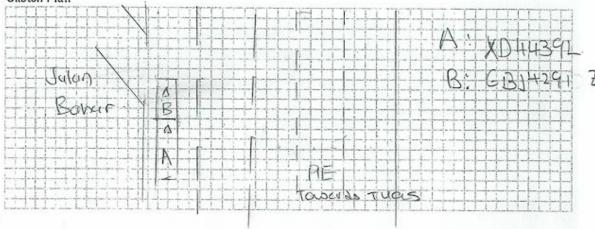
Time

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

OTUA 33

Witnessed by Reporting Centre Personnel

Sketch Plan



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Please state:				034		
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Declaration						
We declare the	foregoing particulars	are true in every respec	t			
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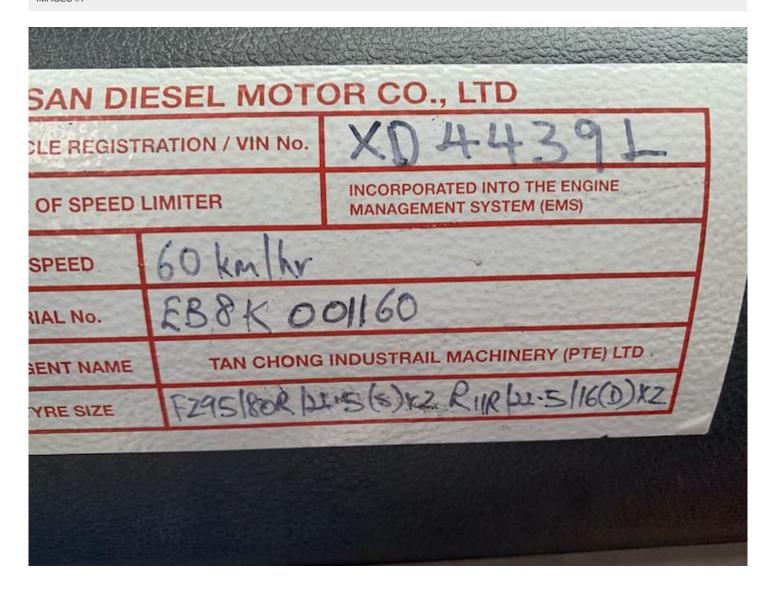






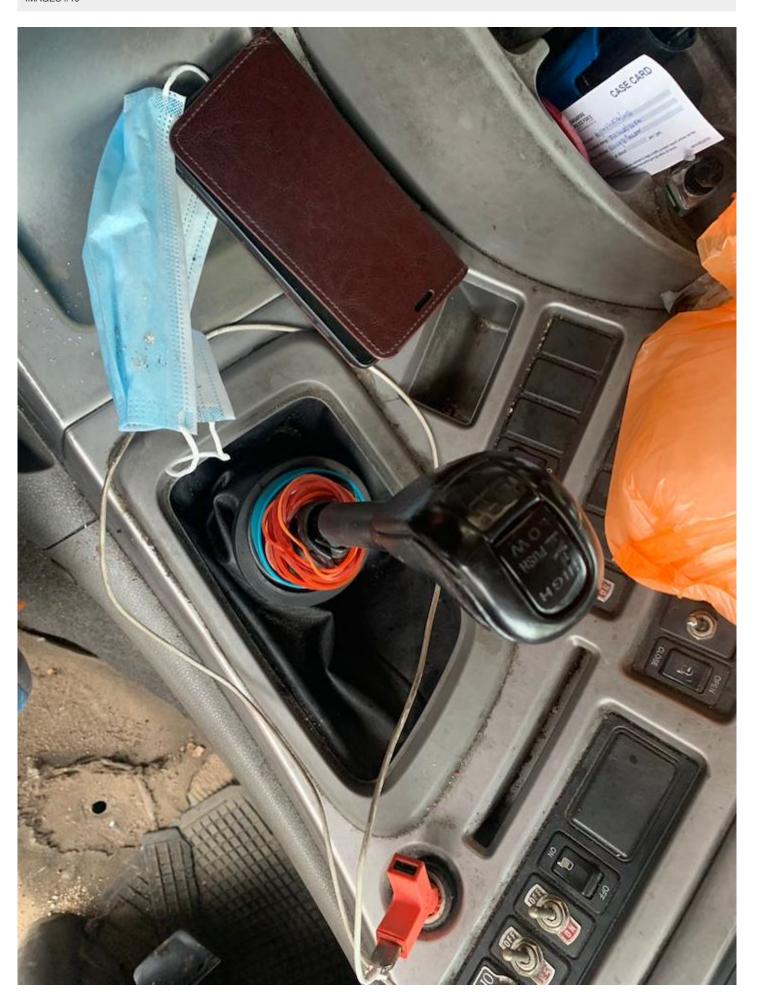
















Police Station Of Origin:

Nanyang N.P.C

2 Jurong West Avenue 5 SINGAPORE 649482

Tel No: 1800-7929999

1 of 3 Report No. T/20220826/2049

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: Vide Report No.: Station Diary No.: 26/08/2022 13:46 E/20220826/0056

20/00/20	122 13.40		E/20220826/0036	43	
Informa	nt's Partic	ulars		A Proposition of the Control of the Control	
	f Informant: I CHOON		Address: APT BLK 538 JELAPANG ROAD #11-24 SINGAPORE		
ID Type / ID No.: NRIC NO / S0199689D			Contact No.: Home/Office: Mobile: 98335563		
National SINGAP	ity: ORE CITIZ	EN .	Email:		
Sex: Male	Age: 70	Date of Birth: 30/01/1952	Type of Informant: Driver		
Race: Chinese		Language:	Institution / School Name:		
Occupation: Lorry driver		Driving Licence Information: Class: 2B,2A,2,4,5 Date of Expiry:			

Type of Attended by Police		Drink Date/Time of Drive: Accident: No 26/08/2022 10		Type of Location Slip Road	
PAN-ISLAND	EXPRESSWAY				
Weather: Raining		Road Surface: Wet		Road Speed Limit:	
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
GBJ4291Z	Lorry				Slightly Damaged	3
XD4439L	Lorry				Slightly Damaged	0





Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482 2 of 3 Report No. T/20220826/2049

Tel No: 1800-7929999

Brief Details.

V1) XD4439L (Nissan) V2) GBJ4291Z (Toyota)

On 26/08/2022 at 1020hrs, I was driving V1 along PIE towards Tuas and was about to exit the expressway via Jalan Bahar. There was a heavy traffic and I was driving at 40km/h - 50km/h at that point of time. I was on the most left lane and about to turn left to the slip road exit Jalan Bahar. Suddenly, V2 which was infront of me stopped his vehicle due to the traffic. I was about 10 meters behind V2. I immediately applied my brakes however my vehicle could not stop in time. My lorry (V1) hit onto V2's rear. There was a slight damaged to my front bumper. V2 also sustained slight damaged to the rear part of the vehicle.

CONTINUATION OF REPORT

A while later, traffic police and ambulance came to scene. The driver and two passengers sitting at the back of the lorry (V2) were conveyed to the hospital. I wish to state that V1 is my company's lorry, Santa Warehousing Pte Ltd. The Traffic Police handed me a case card report number E/20220826/0056.

I further states that it was raining and the road was wet at that point of time. The accident happened just before the Jalan Bahar exit, PIE towards Tuas near lamp post 1795. I do not have any in-car camera. I am not injured and do not require any medical attention.





Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482 Tel No: 1800-7929999

Report No. T/20220826/2049

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 Informant:		
	1 6.	
Date/Time: 26/08/2022 13:46		
Classification Of Case:		
	Date/Time: 26/08/2022 13:46	