

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 02/11/2022 11:04 (SGT)
Reported by Driver
Date of Accident 16/10/2022 07:20 (SGT)
Exact Location of Accident Near 8 Flora Rd, Singapore 509728
Additional Location Information SLIP ROAD OF TPE EXIT TO LOYANG AVENUE
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBC5205D

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner CKR CONTRACT SERVICES PTE LTD
Company Reg No 2XXXXX739G
Email Address ckreng@ckrgroup.com
Mobile Phone No (Phone) +65-63089300
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Kia
Model K2900 2.9L
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 2902

INSURANCE COMPANY

Name of Insurance Company Lonpac Insurance Bhd
Policy Number / Cover Note Number Z/21/VC05/008624

DRIVER

Name of Driver VAIRAVAN KARTHIKEYAN
Passport No/FIN GXXXX320Q
Date Of Birth 17/05/1991
Occupation Outdoor

Date Of Driving Pass	10/12/2013
Driving experience	8 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-84321125
Alt. Phone Number	-
Email Address	karthivm81@gmail.com
Address	33 KAKI BUKIT ROAD 6
Address complement	-
Postcode	415808
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	Raining
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	1
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)	6
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	N.A.
Gender	Male

PASSENGER 2

Name	N.A.
Gender	Male

PASSENGER 3

Name	N.A.
Gender	Male

PASSENGER 4

Name	N.A.
Gender	Male

PASSENGER 5

Name	N.A.
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

ON 16/10/2022 AT ABOUT 0720 HOURS, I WAS TRAVELLING ALONG THE TPE EXIT TO LOYANG AVENUE. AT THAT TIME, IT WAS RAINING AND THE ROADS WERE WET. I HAD STOPPED MY VEHICLE (REGN NO: GBC5205D) AT THE SLIP ROAD OF TPE EXIT/LOYANG AVENUE TO GIVE WAY TO VEHICLES FROM MY RIGHT. MOMENTS LATER, I HEARD A LOUD BANG AND FELT MY VEHICLE JOLTED FORWARD. I IMMEDIATELY REALISED THAT THE VEHICLE BEHIND ME (REGN NO: GBC122S) HAD COLLIDED INTO THE REAR PORTION OF MY STATIONARY VEHICLE GBC5205D. NEXT I ALIGHTED FROM MY VEHICLE TO CHECK ON MY REAR PASSENGERS, THE DAMAGES, TOOK PHOTOS AND EXHCHANGED PARTICULARS. THE DRIVER OF GBC122S, MR ABDULRAHMAN S/O KITHUBUDEEN (NRIC NO: S9331704A) TOLD ME THAT HE WANTED TO DO PRIVATE SETTLEMENT. HE THEN SPOKE WITH MY BOSS AND WE AGREED ON PRIVATE SETTLEMENT. HE WAS SUPPOSED TO COME DOWN TO MY OFFICE AND PAY UP BUT NEVER TURNED UP. MY BOSS TRIED CALLING HIM MANY TIMES BUT HE NEVER ANSWERED. SO I AM NOW LODGING THE REPORT AND WILL SUBMIT A CLAIM AGAINST HIS INSURANCE.

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 GBC122S
 Vehicle Manufacturer Nissan
 Vehicle Model Urvan
 Vehicle Variant -
 Vehicle Colour Gray
 Vehicle Category Commercial vehicle
 Name of Driver ABDULRAHMAN S/O KUTHUBUDEEN
 NRIC No SXXXX704A
 Contact Number (Phone) +65-83559583
 Address -
 Address complement -
 Postcode -
 Insurance Company Name -
 Nature Of Damage SERIOUS DAMAGE
 Details of property damaged in accident FRONT PORTION DAMAGED
 No. Of Passenger (Including Driver) 1

SKETCH PLAN

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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.

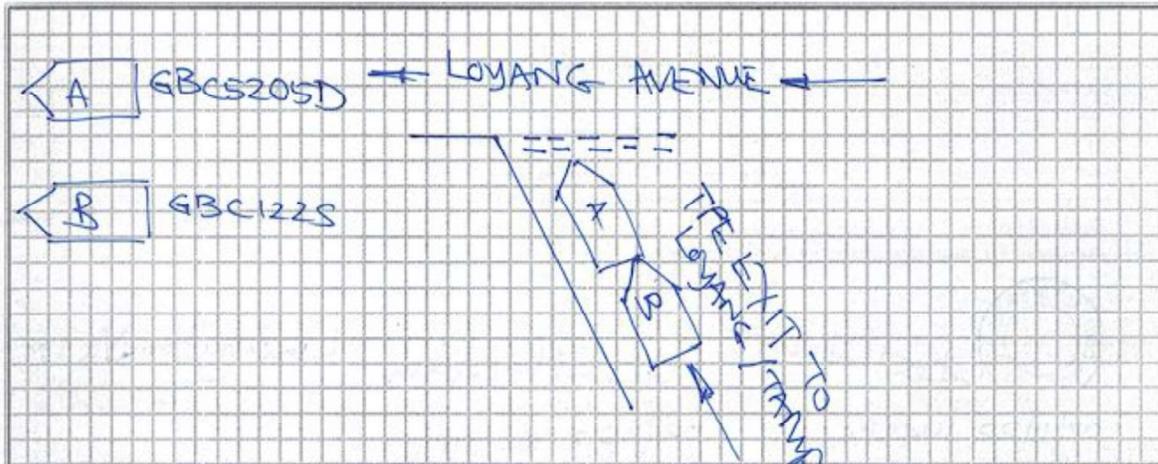


v. keathikeren
Policyholder's Signature / Date & Time
02/11/22 1045hrs

v. keathikeren
Actual Driver's Signature (if driver is not the policyholder) / Date & Time
02/11/22 1045hrs

Lee Pung Hong Victor
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Sketch Plan



vJun2022

Describe Circumstance of the Accident

REFER TO REPORT

Declaration

I/We declare the foregoing particulars are true in every respect.



V. Keethikesem
Policyholder's Signature / Date & Time
02/11/22 1045HRg

V. Keethikesem
Actual Driver's Signature (if driver is not the policyholder) / Date & Time
02/11/22 1045HRg

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











