

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 12/12/2022 11:13 (SGT)
Reported by Driver
Date of Accident 10/12/2022 17:00 (SGT)
Exact Location of Accident 2 Lor 1 Geylang, Singapore 389115
Additional Location Information LORONG 1 GEYLANG
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBB7713X

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner EE SOON MOTOR
Company Reg No 52868238E
Email Address esmotor@hotmail.com
Mobile Phone No (Phone) +65-96367557
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Kia
Model KIA K2900
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 - Reporting only
Vehicle Category Commercial vehicle
Transmission Manual
CC 2902

INSURANCE COMPANY

Name of Insurance Company India International Insurance Pte Ltd
Policy Number / Cover Note Number D19MFL0000191_03

DRIVER

Name of Driver HOSSAIN MANIR
Passport No/FIN F8001221R
Date Of Birth 04/06/1971
Occupation Outdoor

Date Of Driving Pass	20/09/2016
Driving experience	6 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-87412505
Alt. Phone Number	-
Email Address	esmotor@hotmail.com
Address	223 YISHUN ST 21 BLK 223
Address complement	-
Postcode	-
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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 - Change/cross lane
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)	2
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	COLLEAGUE
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

REFER TO SKETCH PLAN.

ATTACHMENT(S)

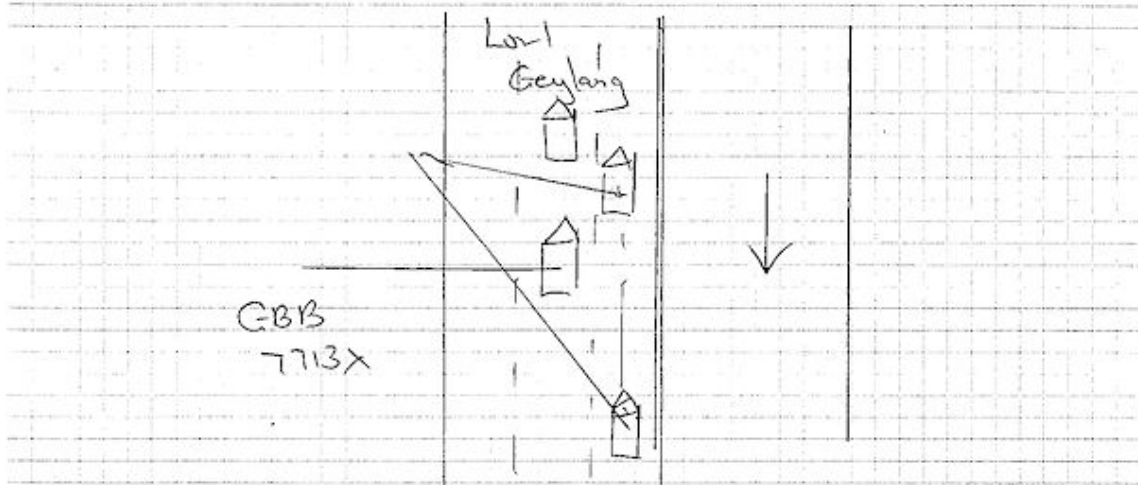
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMU6168X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	MR. TAN
Contact Number	(Phone) +65-84067127
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along Lor 1 Geylang intending to go to Sims Ave. I was on lane 2, front vehicle drove & stop, so I decided to change to lane 1. While changing lane, Veh No SMV 6168 X suddenly came at a fast speed, causing me to hit onto the left front door.

DECLARATION

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

Policyholder's Signature
Date & Time:

SPR140 SketchPlanForm_V5

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

Palindox
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:









