

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 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. 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 03/01/2022 17:56 (SGT)
Date of Accident 31/12/2021 06:50 (SGT)
Exact Location of Accident Singapore
Additional Location Information Boon Lay Way towards Upper Jurong Road
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number PC2410G

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner TIONG HENG TRANSPORT PTE. LTD.
Company Reg No 201329925H
Email Address penghock@tiongheng.com.sg
Mobile Phone No (Phone) +65-81393273
Alternative Phone No (Office) +65-63395885

VEHICLE PARTICULARS

Manufacturer King Long
Model XMQ6117K
Variant -
Exact purpose for which vehicle was being used at time of accident -
Are you claiming under your own insurance policy for repair to your vehicle? No - Reporting only
Vehicle Category Bus
Transmission Manual
CC 6693

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd
Type of Coverage ThirdPartyFireTheft
Fleet Policy Yes
Policy Number GA461475
Cover Note Number -

DRIVER

Name of Driver RAMAIAH VENKATESAN
Passport No/FIN G8068939Q

Date Of Birth	15/06/1986
Occupation	Outdoor
Date Of Driving Pass	22/01/2016
Driving experience	5 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-84507714
Alt. Phone Number	-
Email Address	penghock@tiongheng.com.sg
Address	99 TANGLIN HALT ROAD
Address complement	#40-336
Postcode	141090
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	2
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	11
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	UNKNOWN
Gender	Male

PASSENGER 2

Name	UNKNOWN
Gender	Male

PASSENGER 3

Name	UNKNOWN
Gender	Male

PASSENGER 4

Name	UNKNOWN
Gender	Male

PASSENGER 5

Name	UNKNOWN
Gender	Male

PASSENGER 6

Name	UNKNOWN
Gender	Female

PASSENGER 7

Name	UNKNOWN
Gender	Female

PASSENGER 8

Name	UNKNOWN
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Gender Female

PASSENGER 9

Name UNKNOWN

Gender Female

PASSENGER 10

Name UNKNOWN

Gender Female

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

Refer to the police report.

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GX2326M
Vehicle Manufacturer -
Vehicle Model -
Vehicle Variant -
Vehicle Colour -
Vehicle Category Commercial vehicle
Name of Driver LAU CHIN CHOON
NRIC No S1155516J
Contact Number (Phone) +65-92391279
Address -
Address complement -
Postcode -
Insurance Company Name -
Nature Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person -
Gender -
Phone No -
Address -
Address Complement -
Post Code -
Approximate Age Years Old -
Injuries Sustained -
Injured person in which vehicle? GX2326M
Were seat belts worn? -

Was this injured conveyed to hospital by ambulance? -

SKETCH PLAN**IMPORTANT NOTICE**

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7. By the lodgment 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.



Policyholder's Signature
Date & Time:

R. V. S. S. S.

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

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

SKETCH PLAN

Jln Boon Lay

Boon Lay Way

A: PC2410 G
B: GX2326 M

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to the police report.

DECLARATION

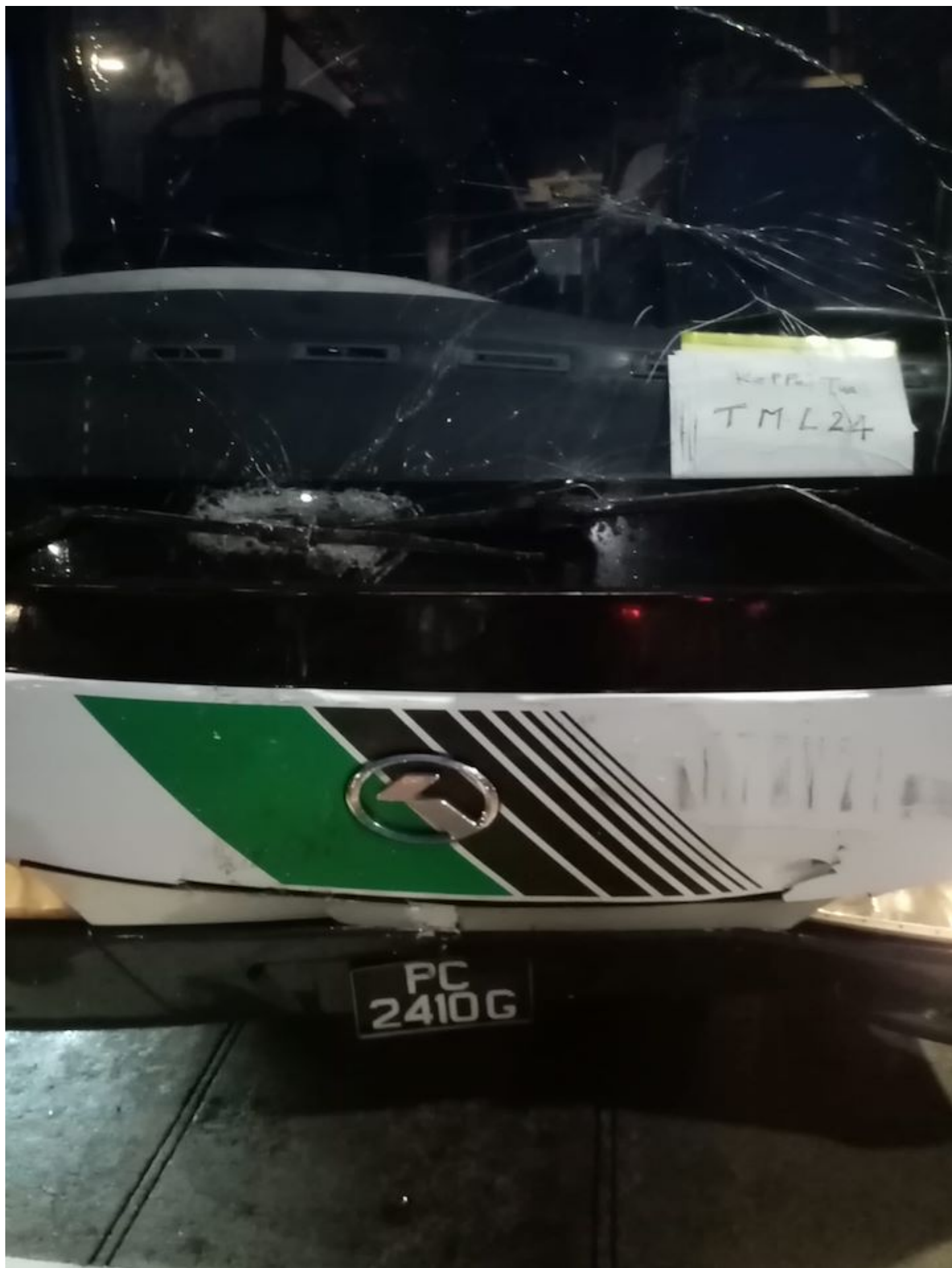
I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature
Date & Time:

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

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























**SINGAPORE
POLICE FORCE**



T/20211231/2046

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

1 of 3

Report No. T/20211231/2046

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 31/12/2021 13:37	Vide Report No.: J/20211231/0049	Station Diary No.: 9
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Informant's Particulars

Name of Informant: RAMAIAH VENKATESAN			Address: 90 TANGLIN HALT ROAD #40-336 COMMONWEALTH VIEW SINGAPORE 141090		
ID Type / ID No.: FIN NO / G8068939Q			Contact No.: Home/Office: Mobile: 84507714		
Nationality: INDIAN			Email:		
Sex: Male	Age: 35	Date of Birth: 15/06/1986	Type of Informant: Driver		
Race: Indian			Language: English	Institution / School Name:	
Occupation: Bus driver			Driving Licence Information: Class: 2B,3,4 Date of Expiry: 24/02/2022		

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 31/12/2021 06:50	Type of Location: Straight Road
Location: BOON LAY WAY				
Lamp Post Number: 118				
Weather: Raining		Road Surface: Wet	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GX2326M	Van				Slightly Damaged	0
PC2410G	Bus/Coach/Minibus				Slightly Damaged	10

Details of Person Involved

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



**SINGAPORE
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T/20211231/2046

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/20211231/2046

CONTINUATION OF REPORT

Driver			
Name	RAMAIAH VENKATESAN	ID No.	G8068939Q
Related Vehicle	PC2410G (Bus/Coach/Minibus)	Contact No.	84507714
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,3,4 Date of Expiry: 24/02/2022
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 31.12.2021 at 0649 hrs, I was driving along Boon Lay Way towards Upper Jurong Road near to lamp post 118. As it was raining, I failed to brake on time and collided onto the rear of GX2326M. One of the lady inside GX2326M was conveyed to the hospital. I am not in possession of in-car footages and I am not injured in the road traffic accident.



**SINGAPORE
POLICE FORCE**



T/20211231/2046

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/20211231/2046

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 YAP HOW KIAT MICHAEL	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 31/12/2021 13:37
Officer In Charge Of Case: TP / GIT / Staff Sgt NUR ADELINA BIN MOHAMMAD FUAT Contact No.: 65476066	Classification Of Case:
	
	



redefining / insurance

AXA Insurance Pte Ltd
 1800 880 4888 (Within Singapore)
 (65) 6880 4888 (International)
 (65) 6880 4740
 customer.care@axa.com.sg
 www.axa.com.sg

date
 02/08/2021

policy number
 GA461475

Certificate of Insurance

Commercial Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) - Commercial Vehicles (Third-Party Risks and Compensation) Rules, 1960 - Road Transport Act, 1987 (Malaysia) - Commercial Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

Policy details

Policyholder name	TIONG HENG TRANSPORT PTE. LTD.	Certificate number	GA461475 / 1
Cover	Third Party, Fire & Theft	NCD	15%
Engine number	ISBE42R521985883	Chassis number	LAGR1FSH18B103709
Period of insurance	from 13/08/2021 to 12/08/2022 (both dates inclusive)		
Sum Insured	Market Value at The Time of Loss		
Finance Loan Company	SWEET SENG CREDIT PTE LTD		

Persons or classes of persons entitled to drive

Any person provided he is in the Policyholder's employ and/or is driving on their order or with their permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

Limitations as to use*

- (a) Use only for the carriage of passengers or goods in connection with the Policyholder's business as specified in the Policy.
 (b) Use only in the Republic of Singapore.

The Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed testing
 (b) Use whilst drawing a trailer except the towing (other than for reward) of anyone disabled mechanically propelled vehicle

* Limitations rendered inoperative by Section 8 of the Commercial Vehicles (Third-Party Risks and Compensation) Act, (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia) and not to be included under these headings.

Excess

Section 11 Excess SGD1,500.00

An additional excess is applicable as follows:

Additional All Claims Excess of S\$2,000 is applicable for any named/unnamed drivers who:

- a) is 18 years old to 26 years old and/or
 b) is 66 years old and above and/or
 c) with driving experience of less than 1 year on the relevant classes of driving license

Additional clauses & endorsements to your policy

Nil

1 of 2

AXA Insurance Pte Ltd (199903512M)
 8 Shenton Way, #24-01, AXA Tower,
 Singapore 068811
 Customer Centre, #B1-01