

# 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 ..... 12/01/2023 17:59 (SGT)  
Reported by ..... Driver  
Date of Accident ..... 11/01/2023 15:00 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... Along AYE towards Tuas Exit 22  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... XE3860D

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... UBTS PTE LTD  
Company Reg No ..... 198103195N  
Email Address ..... ginatay@ubts.com.sg  
Mobile Phone No ..... (Phone) +65-90055874  
Alternative Phone No ..... -

### VEHICLE PARTICULARS

Manufacturer ..... Scania  
Model ..... P440LA4X2HSZ  
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? ..... Yes  
Vehicle Category ..... Commercial vehicle  
Transmission ..... Auto  
CC ..... 12742

### INSURANCE COMPANY

Name of Insurance Company ..... Allianz Insurance Singapore Pte. Ltd.  
Policy Number / Cover Note Number ..... AIS/2023/0000375/001677

### DRIVER

Name of Driver ..... Balasubramaniyan Balamurugan  
Passport No/FIN ..... G2973712L  
Date Of Birth ..... 28/05/1991  
Occupation ..... Outdoor

Date Of Driving Pass .....	22/06/2018
Driving experience .....	4 YEARS AND 7 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-87252353
Alt. Phone Number .....	-
Email Address .....	ginatay@ubts.com.sg
Address .....	12 Tanjong Penjuru Crescent
Address complement .....	-
Postcode .....	608975
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 .....	Chain Collision
Weather Conditions .....	Clear
Road Surface .....	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? .....	No
Number of vehicles involved in the accident .....	4
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) .....	1
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 .....	-

#### 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 attached 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 .....	YQ2407L
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle
Name of Driver .....	Zheng Dianwen
Passport No/FIN .....	G4119135Q

Contact Number .....	-
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number .....	UNKNOWN
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	Ng Eng Leong
NRIC No .....	S8184525E
Contact Number .....	-
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

#### DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number .....	XE2328G
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle
Name of Driver .....	Fang Shengli
NRIC No .....	G6869428R
Contact Number .....	-
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

# 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' 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 GIA 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.



Policyholder's Signature / Date & Time

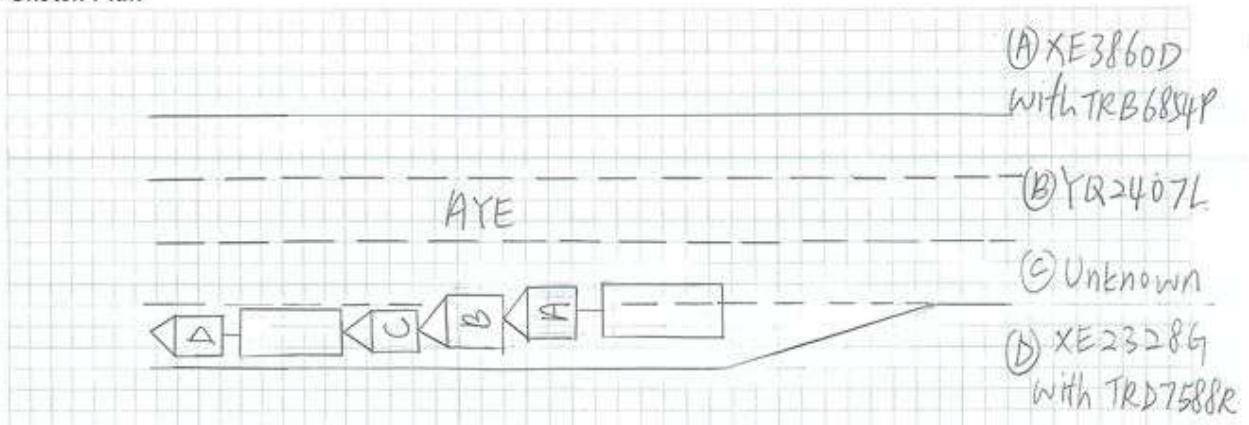
*B. Balan*

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



Witnessed by Reporting Centre Personnel

## Sketch Plan



**Describe Circumstances of the Accident**

On 11/1/22 around 15:00 hours, I was driving company vehicle XE3860D with trailer TRB6854P along ATE towards Tuas Exit 22 on lane 3 and wanted to change lane to 4. While I was on the lane between lane 3 and lane 4, suddenly, the front lorry YQ2407L stopped, I quickly stepped brake. However, due to heavy load on my trailer, my vehicle still hit onto the front lorry YQ2407L. The collision impact caused the front lorry hit onto the front car. The front car then hit onto the front vehicle.

**Declaration**

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

*Bealmyr*

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



Witnessed by Reporting Centre Personnel

































































































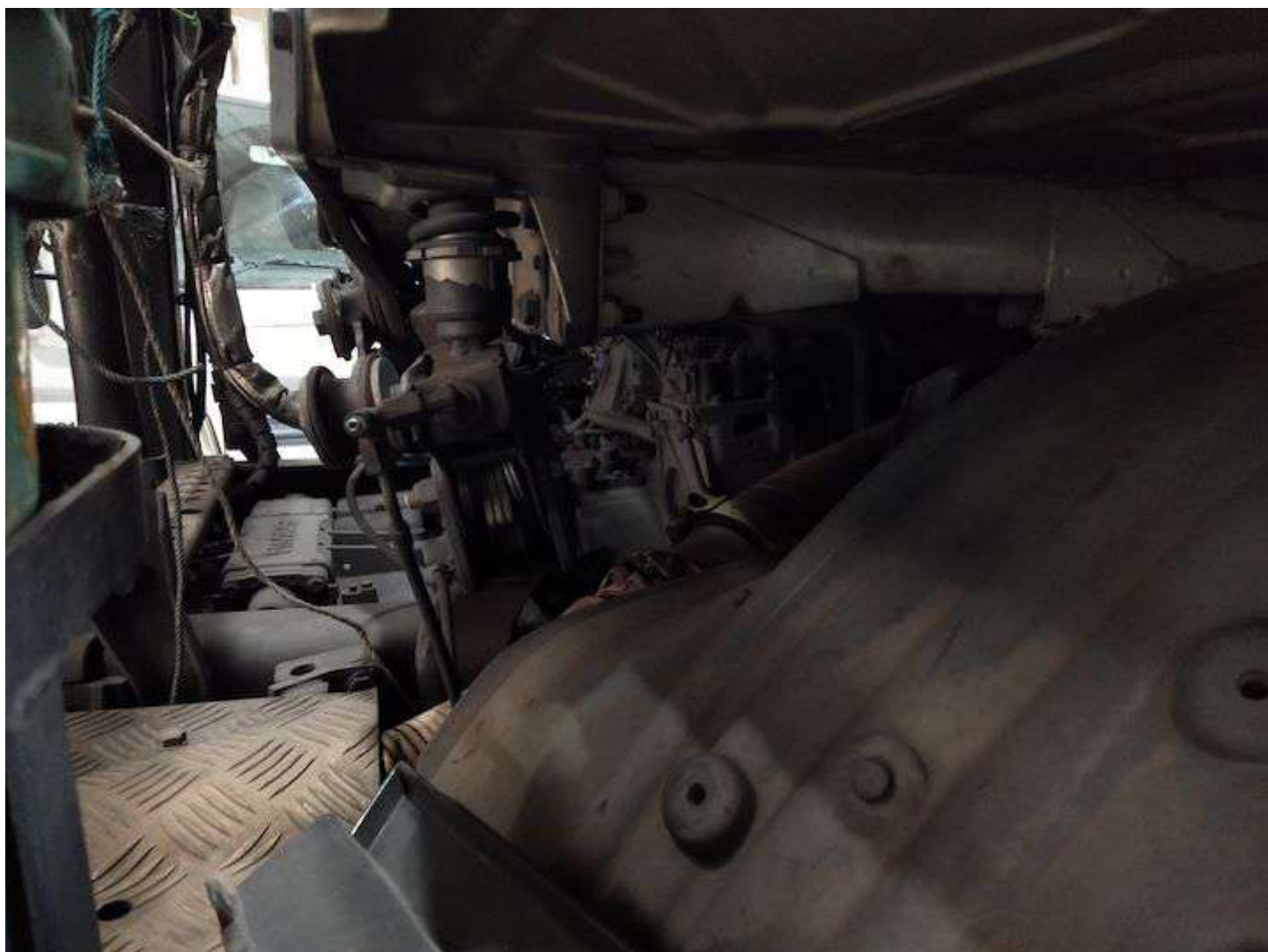






















































Allianz Insurance Singapore Pte. Ltd.

## COVER NOTE

In consideration of the Insured having agreed to pay the agreed Premium in respect of the Motor Vehicle described in the Schedule below, the Insurance is hereby HELD COVERED in the terms of the Company's usual form of Comprehensive / Third Party Fire & Theft / Third Party (whichever is applicable) Policy applicable thereto for and shall be valid for a period of THIRTY (30) days from date of issue. The Cover Note will be replaced with a Motor Certificate of Insurance / Policy.

<b>Cover Note Number</b>	AIS/2023/0000375/001677		
<b>Insured</b>	UBTS PTE LTD		
<b>Usage</b>	Use in connection with the Insured's Business other than for hire & reward		
<b>Make &amp; Model</b>	SCANIA / P440LA4X2HSZ		
<b>Attachment</b>	NIL		
<b>Engine Capacity/Tonnage</b>	12742 / 73.06tons		
<b>Engine Number</b>	DC13112L017033663		
<b>Chassis Number</b>	YS2P4X20005480009		
<b>Registration Number</b>	XE3860D		
<b>Estimated Value</b>	Market Value at time of Loss		
<b>Coverage</b>	Comprehensive - Authorised Workshop		
<b>Deductible</b>	AS PER POLICY		
<b>Period of Insurance</b>	23-Dec-22	to	22-Dec-23
<b>Hire Purchase</b>	Nil		
<b>Issued By</b>	Agency Distribution	on	23-Dec-22

We hereby certify that this Cover Note is issued in accordance with the provisions of  
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (Chapter 189)  
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960  
 ROAD TRANSPORT ACT, 1987 (MALAYSIA)  
 MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Signed for and On Behalf of  
 Allianz Insurance Singapore Pte Ltd

Authorised Signatory

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