

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	12/10/2022 15:50 (SGT)
Reported by	Driver
Date of Accident	11/10/2022 14:50 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	Along AYE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	XD7571S
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	KOH KOCK LEONG ENTERPRISE PTE LTD
Company Reg No	199104084W
Email Address	admin@kkle.com.sg
Mobile Phone No	(Phone) +65-68978787
Alternative Phone No	(Office) +65-68978787

VEHICLE PARTICULARS

Manufacturer	Volvo
Model	FMX370 64R DAYCAB
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	Auto
CC	10837

INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance Pte Ltd
Policy Number / Cover Note Number	SD22V03941/VCH/R03

DRIVER

Name of Driver	Chinniah Murugesan
Passport No/FIN	G8146901L
Date Of Birth	02/02/1979
Occupation	Outdoor

Date Of Driving Pass	09/01/2015
Driving experience	7 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-83446427
Alt. Phone Number	-
Email Address	admin@kkle.com.sg
Address	24 Tuas Avenue 2
Address complement	-
Postcode	639455
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	3
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)	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?	Yes
Police Station Name	Nanyang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18007929999
Alt. Police Station Phone No	(Fax) +65-67912972
Police Station Address	No. 2 Jurong West Avenue 5 Singapore 649482
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

Refer to police report T/20221011/2090

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	XD8427U
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
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	XE2625Z
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	Shahrudin Bin Ali
NRIC No	S1715339J
Contact Number	(Phone) +65-97400904
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?	XD8427U
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	Yes

SKETCH PLAN

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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: _____


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


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

SKETCH PLAN

Handwritten notes on the right side of the grid:

- C: XE 2625Z
- A: XD7571S
- B: XD 84274

Diagram on the grid:

Along AYE

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report T/2022/011/2090

DECLARATION

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

Policyholder's Signature

Date & Time:



Driver's Signature

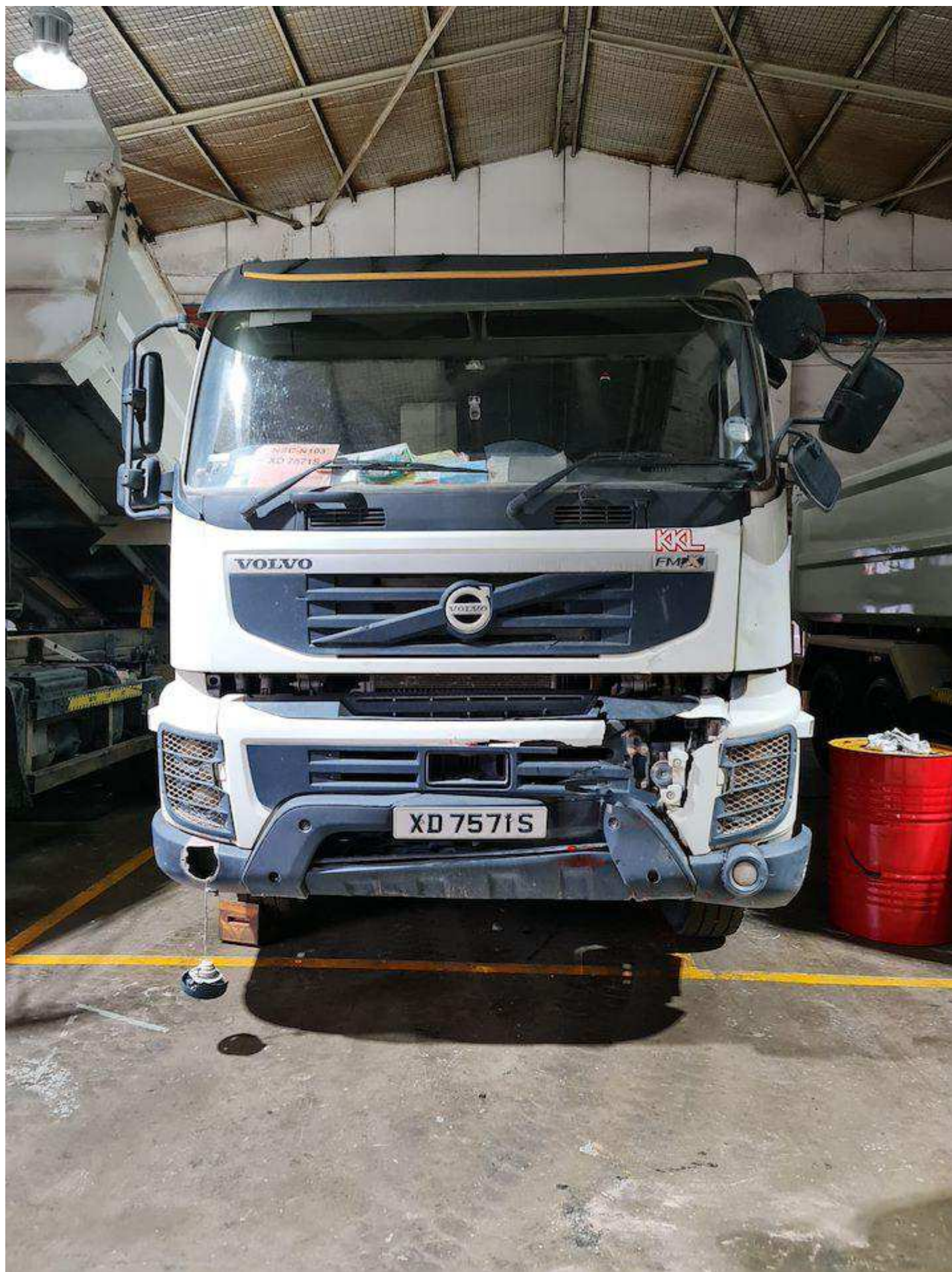
(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:







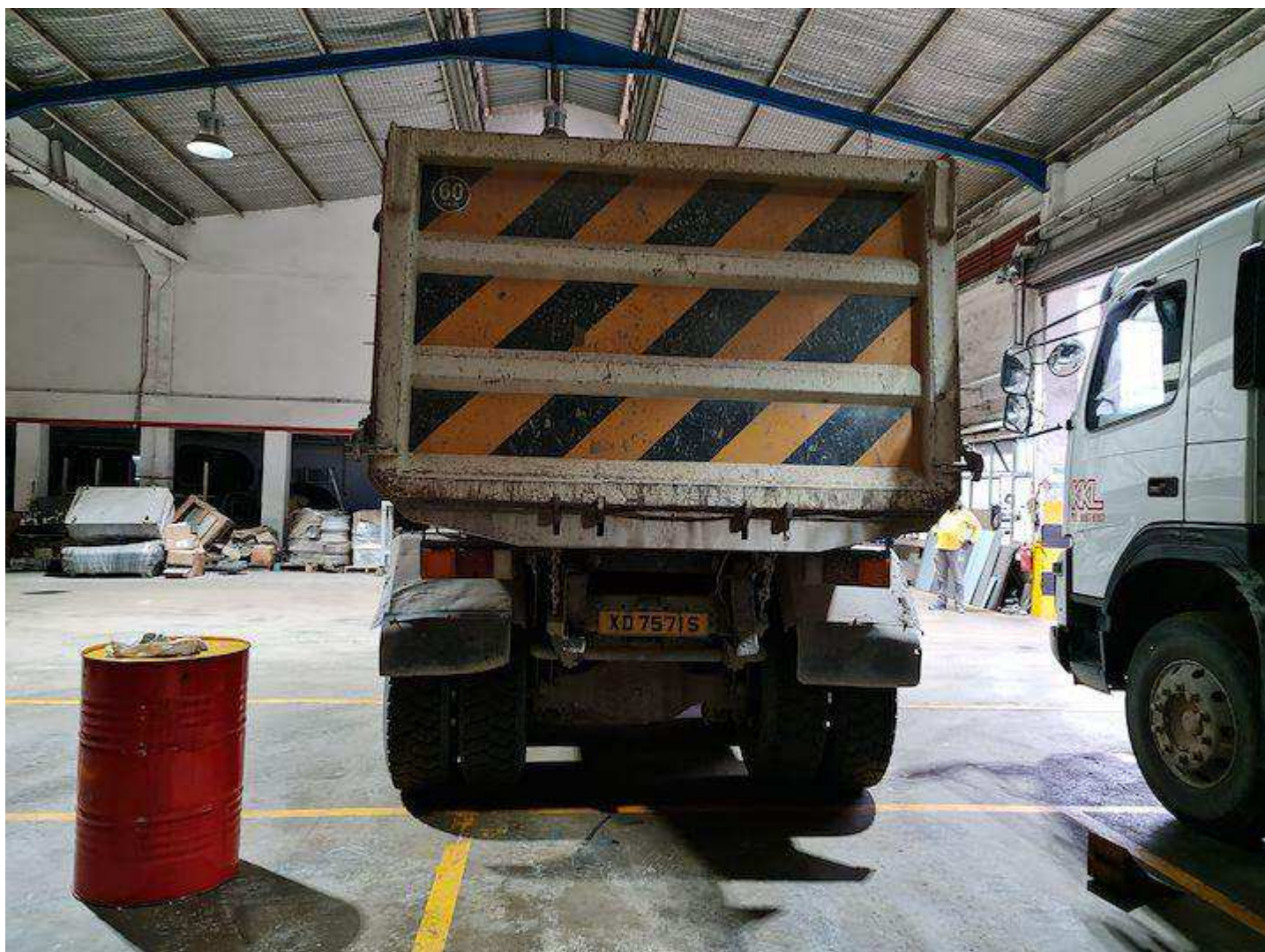


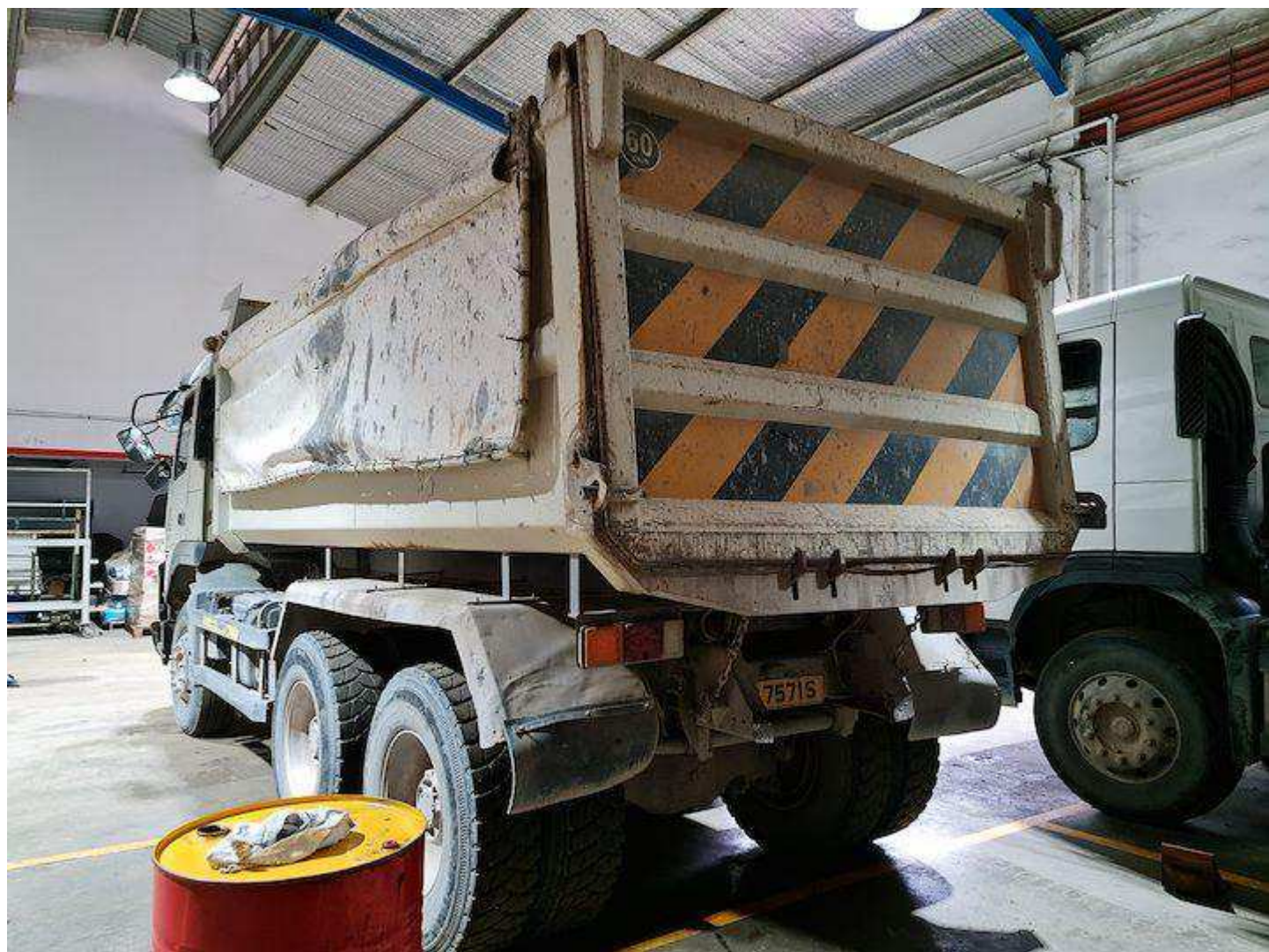








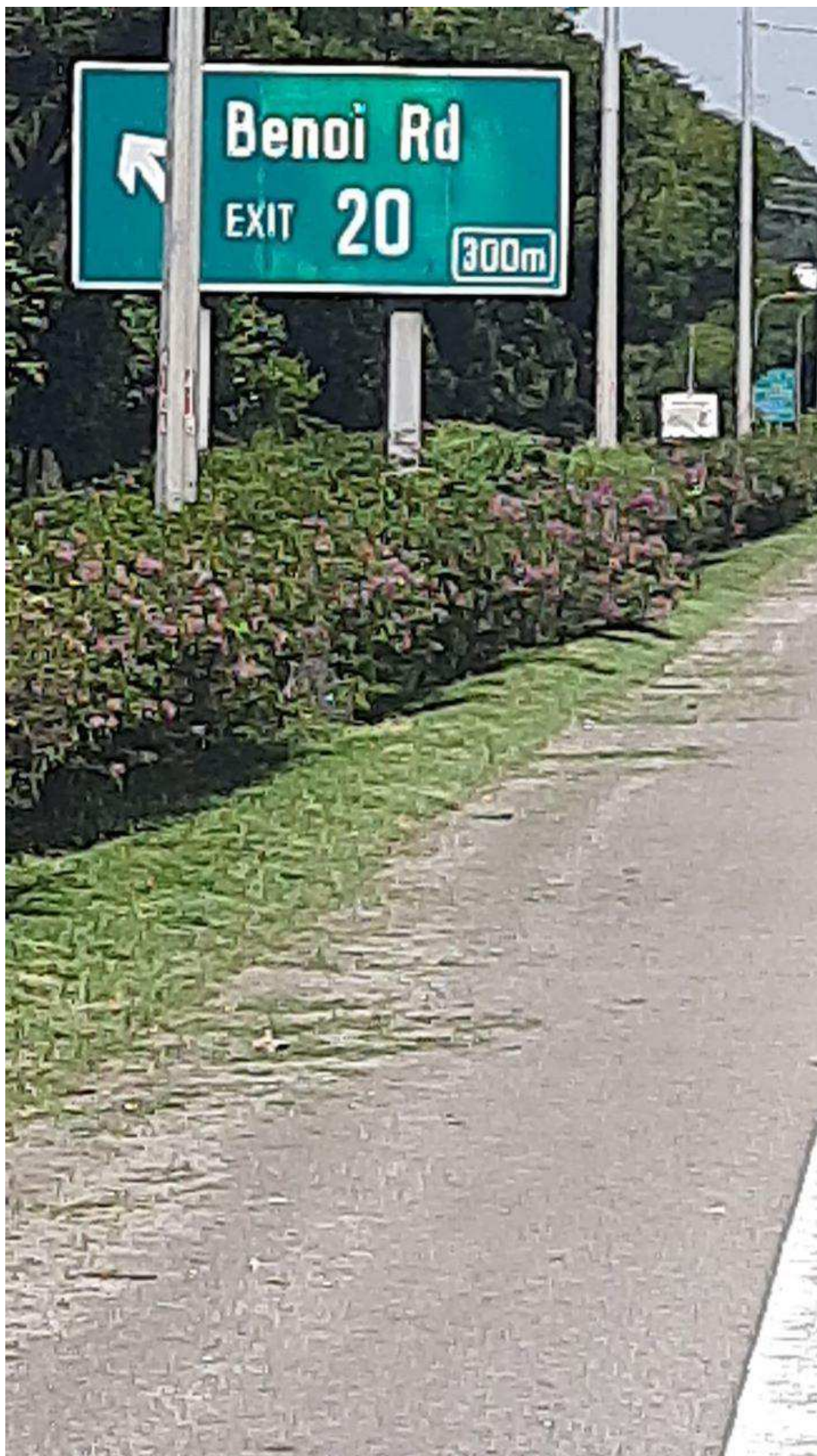














**SINGAPORE
POLICE FORCE**



T/20221011/2090

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

1 of 4

Report No. T/20221011/2090

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/10/2022 18:18		Vide Report No.: J/20221011/0099		Station Diary No.: 162	
Informant's Particulars					
Name of Informant: CHINNIAH MURUGESAN			Address: 26 TUAS AVENUE 2 SINGAPORE 639457		
ID Type / ID No.: FIN NO / G8146901L			Contact No.: Home/Office: Mobile: 83446427		
Nationality: INDIAN			Email:		
Sex: Male	Age: 43	Date of Birth: 02/02/1979	Type of Informant: Driver		
Race: Indian			Language:		Institution / School Name:
Occupation: TIPPER TRUCK DRIVER			Driving Licence Information: Class: 2B,3,4 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 11/10/2022 14:50	Type of Location: Straight Road
Location: AYER RAJAH EXPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
XD7571S	TIPER TRUCK	VOLVO	FMX370 64R DAYCAB	White	Slightly Damaged	0
XD8427U	TRAILER	SCANIA	P440LA4X2 MSZ	Blue	Seriously Damaged	0
XE2625Z	TRAILER	MITSUBISHI	FUSO FP51SDR3V DEA	White	Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



T/20221011/2090

2 of 4

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

Report No. T/20221011/2090

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	CHINNIAM MURUGESAN	ID No.	G8146901L
Related Vehicle	XD7571S (TIPER TRUCK)	Contact No.	83446427
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	SHAHKUDIN BIN ALI	ID No.	S1715339J
Related Vehicle	XE2625Z (TRAILER)	Contact No.	97400904
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

V1 - XE2625Z
V2 - XD7571S
V3 - XD8427U

On 11/10/2022 at about 1450hrs, I was travelling in V2 along AYE on the third left most lane and making my way to Labrador Park to load my tipper truck.

I was not driving at a fast speed as I already noticed that V1 was slowing down in front of me due to the road works that was being done about 50 meters up ahead. I applied my brakes and all of a sudden, I felt a strong impact from the rear of V2. Due to this collision, V2 moved forward and collided with the rear right side of V1.

I alighted from V2 and noticed that V3 has collided with the rear of V2. V3 was badly damaged and its front windshield was shattered and its front porting was badly damaged. Driver of V3 was stuck at the driver side of V3 and he was then being brought out by SCDF and conveyed to hospital by ambulance. I did not manage to get the particulars of the driver of V3.

Driver of V1 and myself were not injured during the collision however my left fingers are feeling numb right now. I will go and see a doctor after this. V1 suffered slight damaged to its rear right side and V2 suffered slight damages to its front bottom left portion and left side mirror.



**SINGAPORE
POLICE FORCE**



T/20221011/2090

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

3 of 4

Report No. T/20221011/2090

CONTINUATION OF REPORT

I wish to state that Traffic police also attended to the accident and gave me a case card reference J/20221011/0099 and instructed me to go and lodge an accident report.

The footage of the in car camera in V2 has been sent to the traffic police by my manager.



**SINGAPORE
POLICE FORCE**



T/20221011/2090

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

4 of 4

Report No. T/20221011/2090

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 /
SGT 2 MUHAMMAD FAUZI BIN
MOHD ZAIN

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
11/10/2022 18:18

Officer In Charge Of Case:
TP / GIT /
INSP (1) THABAGESH JEYATHESH
Contact No.: 65476178

Classification Of Case:

NP168



Liberty Insurance Pte Ltd
 Registration no. 199002781D
 51 Club Street
 #03-03 Liberty House
 Singapore 069426
 Tel: (65) 6221 6511
 Website: <http://www.libertyinsurance.com.sg>

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1980
 ROAD TRANSPORT ACT, 1987
 ROAD TRANSPORT (AMENDMENT) ACT 2019
 THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959

Certificate No	SD22V03941 /VCH/R03
Form	MZ301A
Date Of Issue	17-MAR-2022
1.Index Mark and Registration No. of Vehicle:	XD7571S
2.Chassis number of Vehicle:	YV2J1E1D5DA746465
3.Name of Policyholder:	KOH KOCK LEONG ENTERPRISE PTE LTD
4.Effective date of Commencement of Insurance for the purposes of the Act:	12-MAR-2022 00:00 AM
5.Date of Expiry of Insurance:	11-MAR-2023 23:59 PM
6.Persons or Classes of Persons entitled to drive*:	<p>陳保險經紀私營有限公司 TAN INSURANCE BROKERS PTE LTD 3A/5A Alhwal Street, Chenn Leonn Building Singapore 199896 www.tib.com.sg Tel: (65) 6742 6766 Fax: (65) 6742 6669</p>
<p>A) Whilst the vehicle is being used in connection with the Policyholder's business :- Any person provided he is in the Policyholder's employ and is driving on their order or with their permission.</p> <p>B) Whilst the vehicle is being used for social, domestic and pleasure purposes :- Any person who is driving on the Policyholder's order or with their permission.</p> <p>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.</p> <p>And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.</p>	
<p>7.Limitations as to use:</p> <p>A) Use in connection with the Policyholder's business.</p> <p>B) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.</p> <p>C) Use for social, domestic and pleasure purposes.</p>	
<p>8.The Policy does not cover:</p> <p>A) Use for racing, pace-making, reliability trials or speed-testing.</p> <p>B) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.</p> <p>C) Use for the carriage of passengers for hire or reward.</p>	
<p>*Limitations rendered Inoperative by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 are not to be included under these headings.</p>	
<p>I/We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987.</p>	
<p>For and on behalf of LIBERTY INSURANCE PTE LTD Approved Insurers</p> <p> Authorised Signature</p>	
<p>For information only:</p> <p>COVERAGE : Comprehensive, Unlimited Windscreen, Third Party Property Damage</p> <p>SUM INSURED: MARKET VALUE AT THE TIME OF LOSS</p> <p>EXCESS: Section I S\$1500, Section II S\$1000, Additional Excess - All Claims - Young, Elderly & Inexperienced Drivers S\$1000, Windscreen Excess S\$0</p> <p>FINANCE COMPANY:</p> <p>PRODUCER NAME: TAN INSURANCE BROKERS PTE LTD</p>	

PLFM/21-MAR-22

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21-MAR-22

Mar 21, 2022, 1:55 PM