SK0U233F0003 / KAN FOOK SING MOTOR WORKSHOP [533758] ENTRY DATE & TIME: 15/03/2023 11:18 (SGT) SUBMITTED BY: LEK YEE KHENG VERSION: 1 (15/03/2023 11:18 (SGT))

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 witholding 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.

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 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 15/03/2023 11:18 (SGT) Reported by Date of Accident 13/03/2023 22:10 (SGT) Exact Location of Accident Singapore Additional Location Information SIMS WAY Country/State of Loss Singapore **DETAILS OF OWN VEHICLE** Vehicle Registration Number XD6210R INSURED/POLICYHOLDER Is company? Yes Name Of Registered Owner WEE GUAN ENGINEERING PTE LTD Company Reg No 199804158D Email Address ALEX.CHIA@WEEGUAN.COM.SG Mobile Phone No (Phone) +65-96868669 Alternative Phone No VEHICLE PARTICULARS Manufacturer Isuzu Model Cyz52k Variant Exact purpose for which vehicle was being used at time of accident

Are you claiming under your own insurance policy for repair to

No - Claiming third party your vehicle? Vehicle Category Commercial vehicle Transmission Manual CC 15681

INSURANCE COMPANY

Name of Insurance Company Great Eastern General Insurance Limited Policy Number / Cover Note Number 2023-A5088952-AME-R001

DRIVER

Name of Driver Passport No/FIN	SUNDARAPANDIAN KUMARESAN G7290216K
Date Of Birth	05/03/1982
Occupation	Outdoor

Date Of Driving Pass 03/02/2015 Driving experience 8 YEARS AND 1 MONTH Gender Mobile Number (Phone) +65-88009877 Alt. Phone Number Email Address ALEX.CHIA@WEEGUAN.COM.SG Address 677C JURONG WEST ST 64 #09-287 EDELWEISS@JURONG Address complement Postcode 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 Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 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) 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 **WORKER** Gender Male 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 ATTACHED ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes

Reasons for not uploading a video of the accident

FILE SIZE TOO LARGE, UNABLE TO UPLOAD

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number Vehicle Manufacturer	SGL20X Volvo
Vehicle Model	V40
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	TOH MING XUAN
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

IMPORTANT NOTICE

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- 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.
- 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")

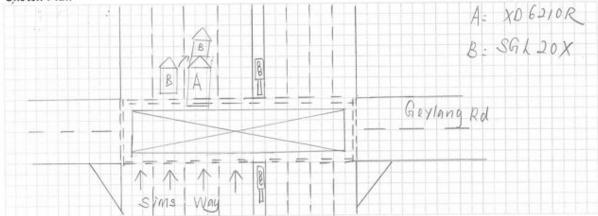
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' law yers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the 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 &

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

Witnessed by Reporting Centre Personnel

Sketch Plan



escribe Circu	mstances o	f the Accid	ent				
	Monon	Doles	To Dolino	Donat	Rod No	: 7/20230.	2111/2084
	PIXASE	NATH	10 Folice	/ KPUT	145-110	1/20230.	514/2007
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		-					
250							

Declaration

We declare the foregoing particulars are true in every respect.

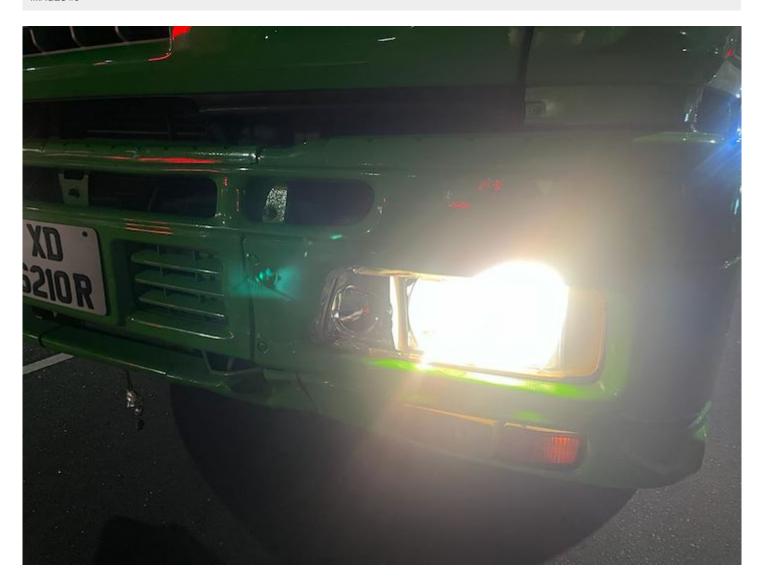
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel



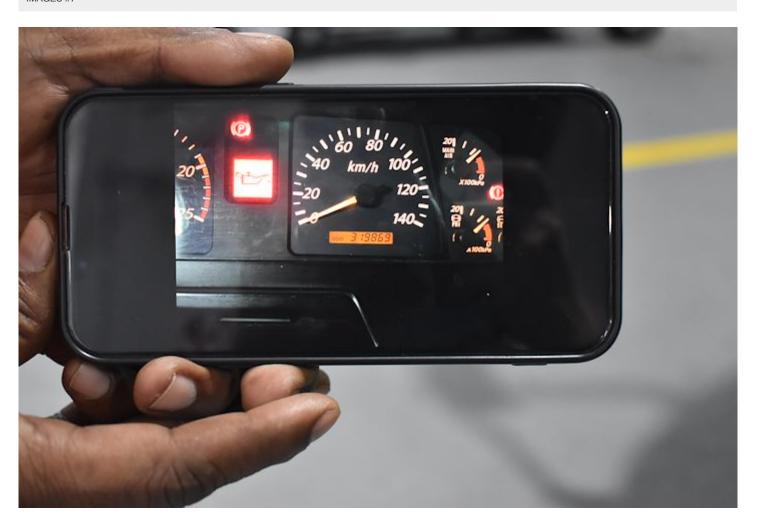




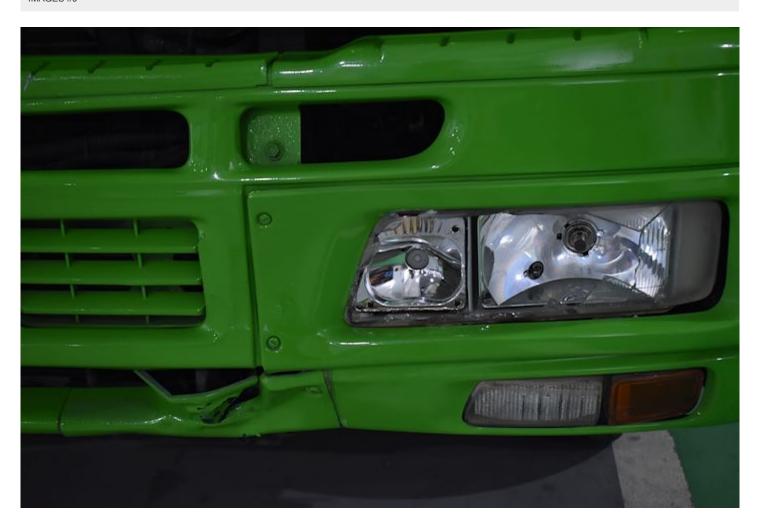




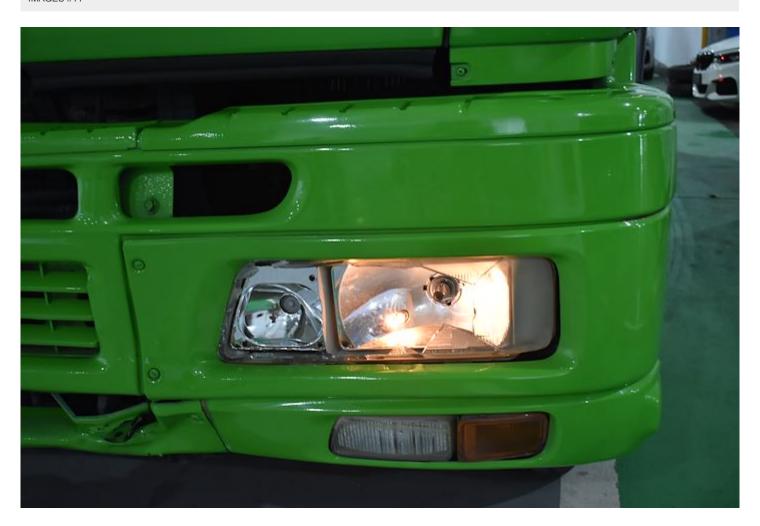


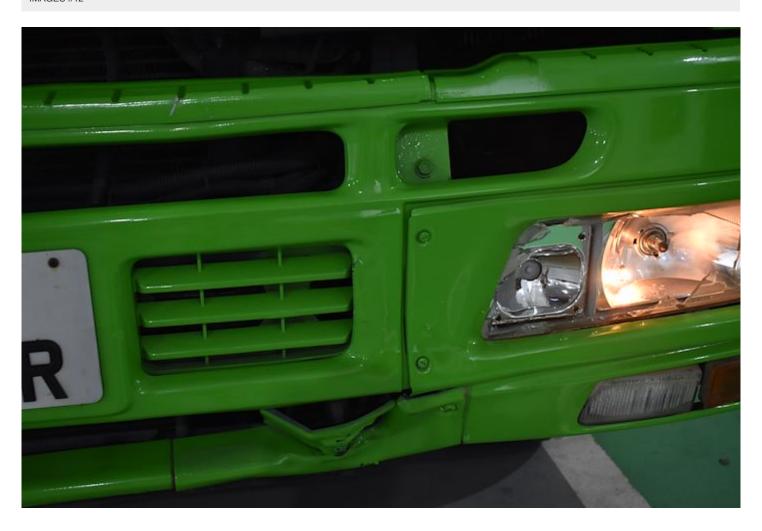


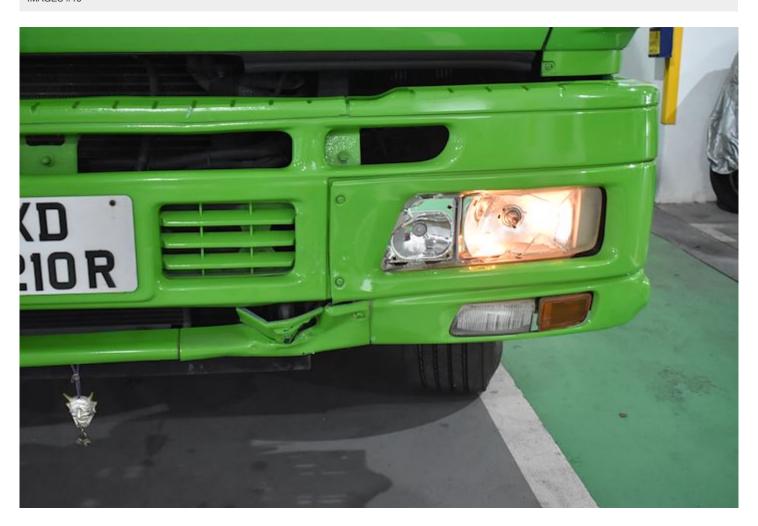


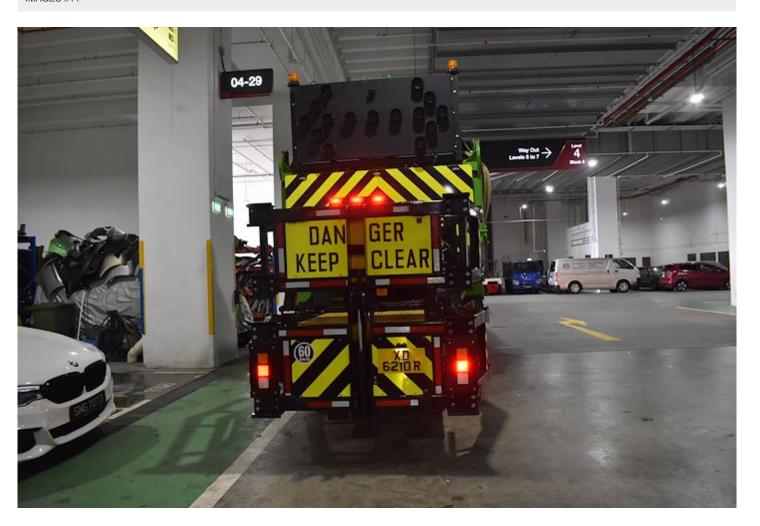


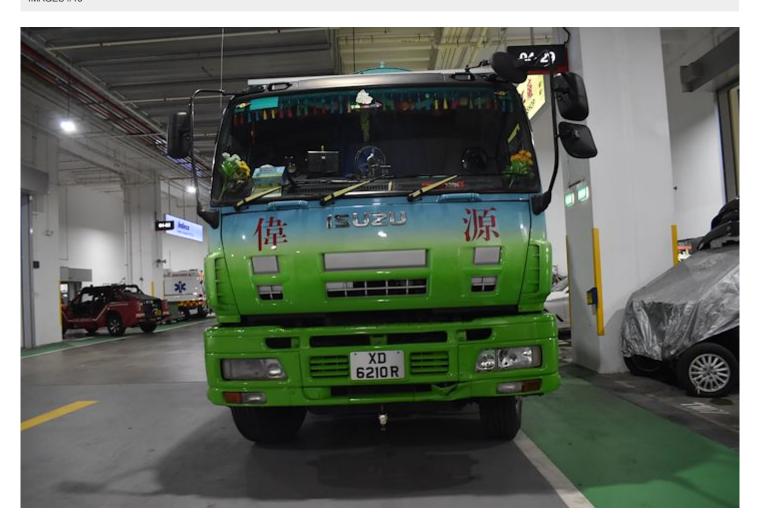
















02303 14/2004

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Report No. T/20230314/2084

1 of 3

Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482

Tel No: 1800-7929999

Police Station Of Origin:

REPORT OF	A	TRAFFIC	ACCIDENT

	ne Report M 23 20:52	lade:	Vide Report No.:	Station Diary No.: 115	
Informa	nt's Particu	ulars			
Name of Informant: SUNDARAPANDIAN KUMARESAN		Address: 677C JURONG WEST STREET 64 #09-287 EDELWEISS@JURONG SINGAPORE 643677			
ID Type / ID No.: FIN NO / G7290216K		Contact No.: Home/Office:	Mobile: 88009877		
Nationality: INDIAN		Email: marizkumaresan@gmail.com			
Sex: Male	Age: 41	Date of Birth: 05/03/1982	Type of Informant: Driver		
Race; Indian		Language:			
Occupation: Lorry driver		Driving Licence Information: Class: 2B,3,4 Date of Expiry: 01/01/2028			

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 13/03/2023 22:10	Type of Location: X-Junction
yyeather.		Road Surface:		
Traffic Flow: Traf		Dry Traffic Control: Traffic Light - Wo	rking	Traffic Volume: Moderate
Type of Collis	ion: ring Vehicles - Head 1			Anyone conveyed by ambulance:

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenge
SGL20X	Car	332-858			Slightly Damaged	1
XD6210R	Lorry				Slightly Damaged	0

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



T:20220214/2084

T/20230314/2084

2 of 3

Report No. T/20230314/2084

Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482

Tel No: 1800-7929999

CONTINUATION OF REPORT

Driver				3075134		
Name	TOH MING XUAN			ID No.		S8944305I
Related Vehicle	SGL20X (Car)			Conta	ct No.	96360508
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL	
Date Treatment	NIL Date I			harge	NIL	
No. of Days granted Medical Leave NIL D			Degree of	Injury	NIL	
Driver						
Name	SUNDARAPANDIAN KUMARESAN			ID No		G7290216K
Related Vehicle	XD6210R (Lorry)			Contact No.		88009877
Hospital/Clinic	NIL			Class Drivin Licen Expiry	g	Class: 2B,3,4 Date of Expiry: 01/01/2028
Date Treatment	NIL Date D			charge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree o	f Injury	NIL	

Brief Details.

On 13/3/2023 at 2210hrs, I was driving my company vehicle (XD6210R) along Sims Way. As I was at the cross junction, I noticed that were two cars ahead of me and the traffic light was in red. Subsequently, the traffic light turn green and I started to drive on. I am on the third lane and noticed that the second lane was empty thus I shifted my vehicle over. Suddenly, a car (SGL20X) in front of my vehicle and he shifted to my lane and jam brake abruptly. I also applied brake but was unable to stop in time thus I collied with the car. I stepped out of my vehicle and noticed that my vehicle sustained front left headlight lamp damage and the front bumper dent. The other party vehicle sustained dent at the rear car boot area. I exchanged particulars with the driver and we left the place as no one was injured. My company vehicle is installed with dash cam. I am unsure the cost of the repair.



T/20230314/2084

Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482 3 of 3 Report No. T/20230314/2084

649482 CONTINUATION OF REPORT Tel No: 1800-7929999

Signature Of Informant:
Date/Time: 14/03/2023 20:52
Classification Of Case: