

# 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 .....	23/03/2023 09:56 (SGT)
Reported by .....	Actual Driver
Date of Accident .....	20/03/2023 20:20 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	ALONG PIE TOWARDS TUAS BEFORE JALAN BAHAR EXIT 36
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... YP4094Y

### INSURED/POLICYHOLDER

Is company? .....	Yes
Name Of Registered Owner .....	PRINCE'S LANDSCAPE PTE LTD
Company Reg No .....	1XXXXX496W
Email Address .....	angel@carway.com.sg
Mobile Phone No .....	(Phone) +65-67637000
Alternative Phone No .....	-

### VEHICLE PARTICULARS

Manufacturer .....	Isuzu
Model .....	NNR85UH4A
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 .....	2999

### INSURANCE COMPANY

Name of Insurance Company .....	EQ Insurance Company Ltd
Policy Number / Cover Note Number .....	DMCFHQ23-000002

### DRIVER

Name of Driver .....	SHATISH KUMAR S/O RAMACHANDREN
NRIC No .....	SXXXX593H
Date Of Birth .....	08/07/1983
Occupation .....	Outdoor

Date Of Driving Pass .....	24/01/2011
Driving experience .....	12 YEARS AND 2 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-84199626
Alt. Phone Number .....	-
Email Address .....	angel@carway.com.sg
Address .....	APT BLK 58 LENGKOK BAHRU
Address complement .....	# 07-523
Postcode .....	150058
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 .....	Collided into Parked Vehicle
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) .....	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

PLEASE REFER TO THE ATTACHED POLICE REPORT - T-20230320/2157

#### 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 .....	YQ933Y
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) .....	-

**IMPORTANT NOTICE**

**SKETCH PLAN**

1. Please fill in 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 issuance and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. Any reporting may be referred to the Traffic Police Department for investigation.
6. This report will be forwarded by the insurers to 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 issuance 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 any personal data/personal information set out in this [form] and any other personal information provided by me or possessed by any 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 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 the Insurers' lawyers/law firms, which may be sited outside of Singapore, for one or more of the above Purposes.



Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel (Name as in IR/CID card)

Sketch Plan Along PIE towards Tuas before Jalan Bahar GxH 36

A-YP 4094Y

B-YQ 933Y

please refer to the attached sketch



Describe the circumstances of the Accident

please Refer to the attached statement

Declaration  
We declare the foregoing particulars are true in every respect.

Policyholders Signature / Date & Time

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

Witnessed by Reporting Centre Personnel (Name as in NCC/ID card)

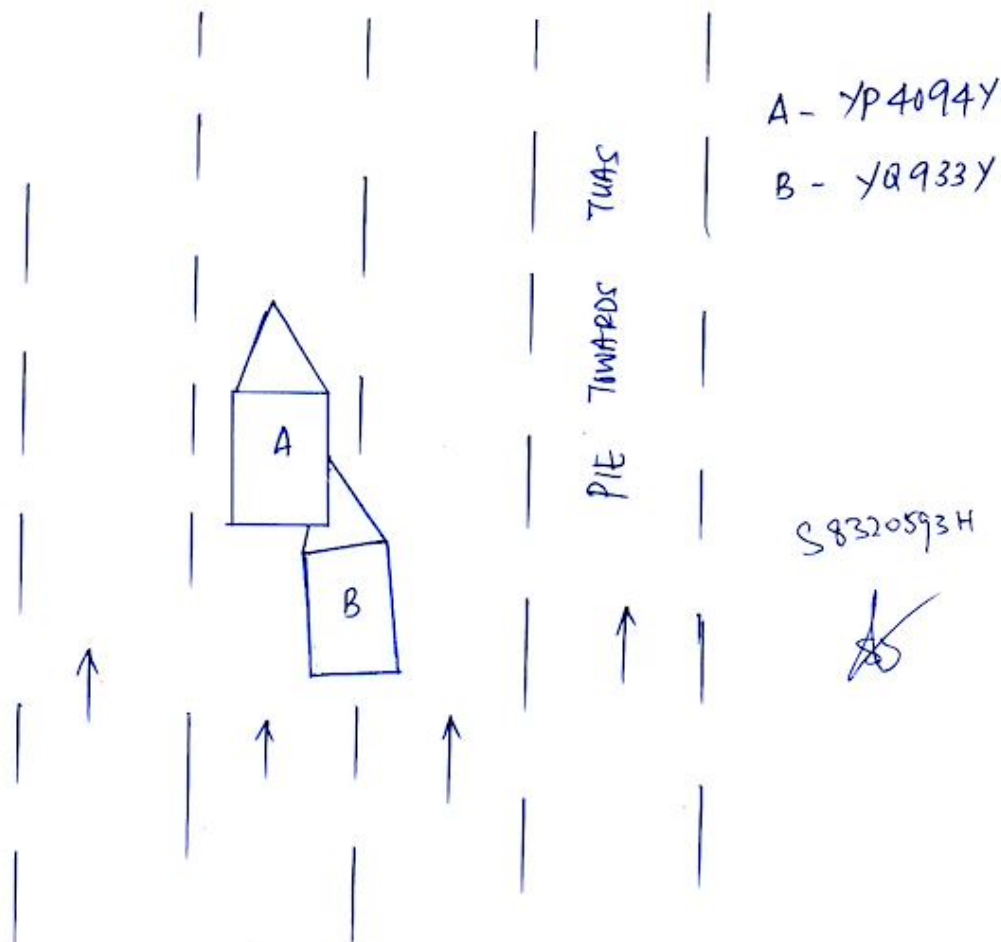
2022



Jalan Bahar Power Station - Jalan Bahar (831021)  
Map Directions

- Map
- Building Directory
- What's Nearby
- Get Tips
- Getting Here

Jalan Bahar Power Station - Jalan Bahar (831021) J



### Accident Statement

On 20/03/2023 at about 2020hrs, I was driving my vehicle (YP4094Y) along PIE toward Tuas before Jalan Bahar Exit 36. I was travelling toward tuas along lane 3. Suddenly, my vehicle felt weird and the engine stalled. I tried to start my engine again but it was unable to start.

I alighted from my vehicle to direct the traffic and put the <sup>safety</sup> cone a distance away from my vehicle in order to alight oncoming vehicle. Suddenly and without a warning, I notice a lorry (YQ933Y) was driving very fast. I managed to dodge away, and he collided onto my vehicle.

I contacted for ambulance assistance as I noticed that one of the passengers has injury on his left forehead. Shortly after, LTA, EMAS and ambulance came. I saw that someone was being conveyed to hospital. Traffic police arrived and asked some questions and handed over a case card to me and told me to lodge a police report.

The damage to my vehicle was the right tire, right wooden panel, license plate, safety bar and driver's door. The damage of the vehicle (YQ933Y) was the front bumper and the front headlamp.

I am making a claim against third party.



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Driver's Name: Shathish Kumar S/O Ramachandren  
I/C: S8320593H





**SINGAPORE  
POLICE FORCE**



T/20230320/2157

2 of 3

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

Report No. T/20230320/2157

**CONTINUATION OF REPORT**

**Brief Details.**

On 20/03/2023 at about 2020hrs, I was driving my vehicle YP4094Y (Yellow lorry) along PIE(Tuas) before Jalan Bahar exit. I was on the way to Tuas along lane 3. Suddenly, my vehicle felt weird and the engine stalled. I then tried to start my engine again, but it was unable to start.

I alighted from my vehicle to direct the traffic. Suddenly, I notice vehicle YQ933Y (White, lorry) was driving very fast. I managed to dodge away, and he collided onto my vehicle.

I then contact for ambulance assistance as I noticed that one of the passengers has injury on his left forehead. Shortly after, LTA, EMAS and ambulance came. I saw that someone was being conveyed to hospital. Traffic police arrived and asked some questions and handed over a case card to me and told me to lodge a police report.

The damages to my vehicle were the right tire, right wooden panel, license plate, safety bar and driver's door. The damages to vehicle YQ933Y were the front bumper and the front head light.

























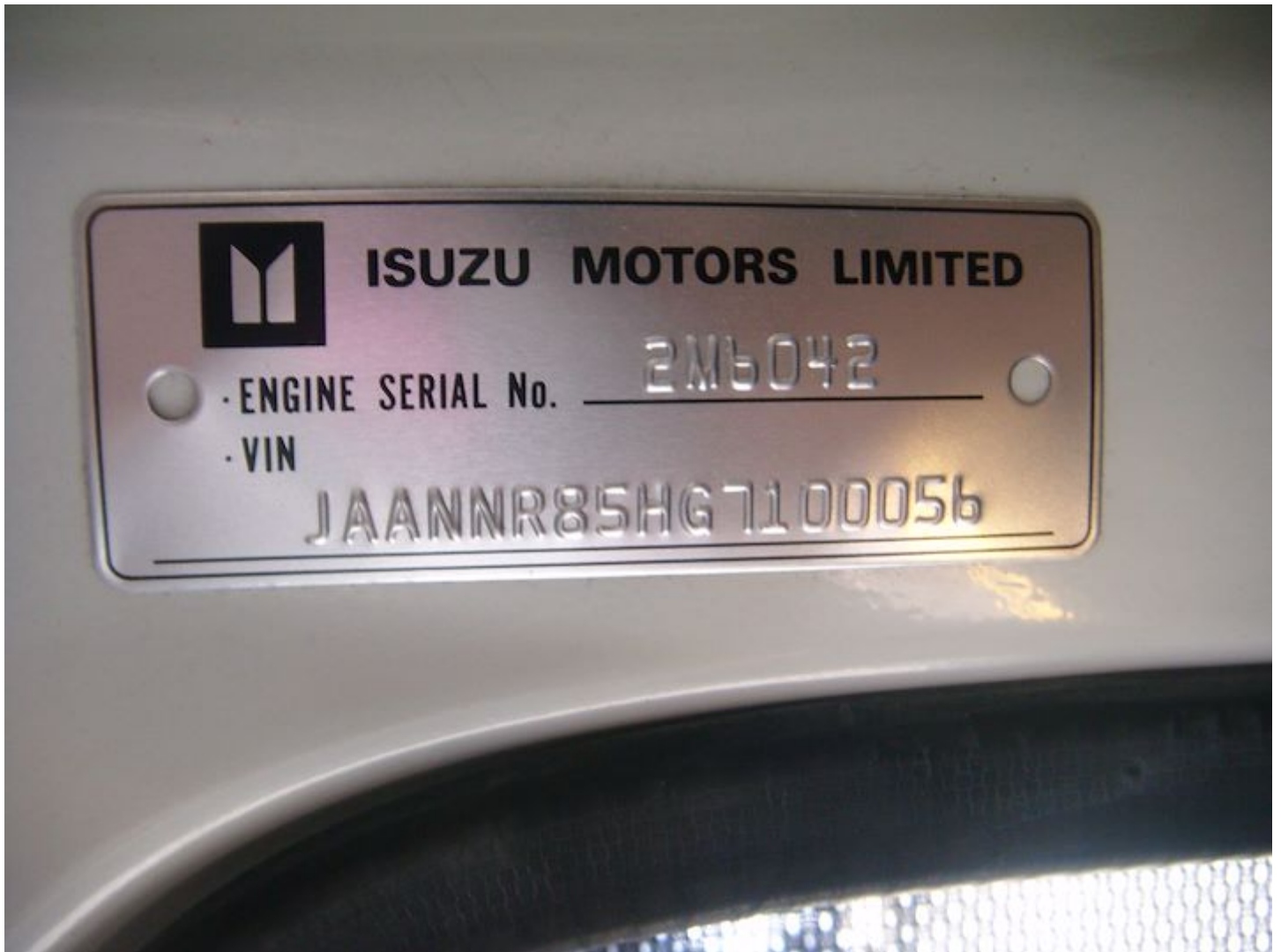





















**SINGAPORE  
POLICE FORCE**


T/20230320/2157

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

1 of 3

Report No. T/20230320/2157

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 20/03/2023 23:54		Vide Report No.: J/20230320/0121		Station Diary No.: 141	
<b>Informant's Particulars</b>					
Name of Informant: SHATHISH KUMAR S/O RAMACHANDREN			Address: APT BLK 58 LENGKOK BAHRU #07-523 SINGAPORE 150058		
ID Type / ID No.: NRIC NO / S8320593H			Contact No.: Home/Office: Mobile: 84199626		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 39	Date of Birth: 08/07/1983	Type of Informant: Driver		
Race: Indian			Language:		
Occupation: LANDSCAPING SUPERVISOR			Driving Licence Information: Class: 3 Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 20/03/2023 20:20	Type of Location: Straight Road
Location:  PAN-ISLAND EXPRESSWAY				
Weather: Cloudy		Road Surface: Wet		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: Yes

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
YP4094Y	Lorry				Seriously Damaged	0
YQ933Y	Lorry				Seriously Damaged	6





SINGAPORE  
POLICE FORCE



T/20230320/2157

2 of 3

Report No. T/20230320/2157

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

## CONTINUATION OF REPORT

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SINGAPORE  
POLICE FORCE

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



T/20230320/2157

3 of 3

Report No. T/20230320/2157

CONTINUATION OF REPORT

Signature of Officer Recording The Report:  
J /  
SGT 2 KOH KAI YAN

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / GIT /  
SGT 3 INTAN WULANDARI BUDDY SANTOSO  
Contact No.: 65476415

NP168

Signature Of Informant:

Date/Time:  
20/03/2023 23:54

Classification Of Case: