

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	03/04/2023 13:35 (SGT)
Reported by	Actual Driver
Date of Accident	02/04/2023 13:10 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ADMIRALTY ROAD WEST TOWARD WOODLANDS CENTRE ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBE1210D
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	HIGHWAY INTERNATIONAL PRIVATE LIMITED
Company Reg No	197501285M
Email Address	senthilkumar.selvam@highway.com.sg
Mobile Phone No	(Phone) +65-91513666
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Nv200
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 - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	1461

INSURANCE COMPANY

Name of Insurance Company	MSIG Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	B 400001893 MKF

DRIVER

Name of Driver	SELVAM SENTHILKUMAR
NRIC No	G8299191W
Date Of Birth	31/07/1988

Occupation	Outdoor
Date Of Driving Pass	03/06/2019
Driving experience	3 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90044337
Alt. Phone Number	-
Email Address	senthilkumar.selvam@highway.com.sg
Address	13 SUNGEI KADUT STREET 4
Address complement	-
Postcode	729064
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	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	Bukit Panjang North Neighbourhood Police Post
Police Station Address	Blk 27 Marsiling Drive Singapore 730027
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN/TP REPORT

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	YP1900R
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)	-

SKETCH PLAN

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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 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 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:

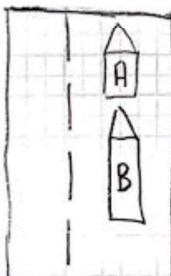
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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' 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.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel
(Name as in NRIC/AD card)

Sketch Plan



Admiralty Road west toward
Woodlands Centre Road

A0 GBE 12100
B0 4P1900R

Describe Circumstance of the Accident

Refer to TP 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

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



























 SINGAPORE POLICE FORCE		 T/20230402/2059		1 of 3			
Police Station Of Origin: Bukit Panjang North NPP 27 Marsiling Drive #01-237 SINGAPORE 730027 Tel No: 1800-3689999						Report No: T/20230402/2059	
REPORT OF A TRAFFIC ACCIDENT							
Date/Time Report Made: 02/04/2023 17:21				Vide Report No.:		Station Diary No.: 18	
Informant's Particulars							
Name of Informant: SELVAM SENTHILKUMAR				Address: APT BLK 206 MARSILING DRIVE #04-280 SINGAPORE 730206			
ID Type / ID No.: FIN NO / G8299191W				Contact No.: Home/Office:		Mobile: 90044337	
Nationality: INDIAN				Email:			
Sex: Male	Age: 34	Date of Birth: 31/07/1988		Type of Informant: Driver			
Race: Indian				Language: English			
Occupation: SUPERVISOR				Driving Licence Information: Class: 2B,3		Date of Expiry:	
General Information of the Accident							
Type of Accident:	Non-Injury Hit and Run		Drink Drive: No	Date/Time of Accident: 02/04/2023 13:10		Type of Location: Straight Road	
Location: ADMIRALTY ROAD WEST							
Weather: Clear		Road Surface: Dry					
Traffic Flow: One Way		Traffic Control: Traffic Light - Working				Traffic Volume: No Traffic	
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 Passeng	
GBE1210D	Van				Slightly Damaged	0	
YP1900R	Lorry					0	

 **SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Bukit Panjang North NPP
27 Marston Drive #01-237 SINGAPORE
730027
Tel No: 1800-3689999

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Report No. T/20230402/2059


CONTINUATION OF REPORT

Brief Details.


On 2/4/2023 at around 1310hrs, I was driving my company's van along Admiralty Road West towards Admiralty Road. I had stopped at the traffic light junction near Singapore Safety Driving Centre as the traffic light was red. While I was waiting, I felt a strong impact and heard a loud impact sound coming from the rear of my vehicle. When I exited the vehicle to check, I saw a white colored lorry driving off from behind my vehicle. I then managed to catch a glimpse of the driver who was believed to be a male Indian national aged around 27 years to 35 years old. From what I was able to see, I suspected that he was in a drunken state as his eyes were closed, and his head was facing down. I gestured to the driver to stop and come down however he ignored me.

I can recognize the driver if I were to see him again. I sustained pain on my left leg and my neck however I have yet to seek medical treatment. My vehicle's rear portion is badly dented and the two rear windscreens were smashed. That's all.

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02/2059

 **SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Bukit Panjang North NPP
27 Marsiling Drive #01-237 SINGAPORE
730027
Tel No: 1800-3689999


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Report No. T/20230402/2059

CONTINUATION OF REPORT

Signature of Officer Recording The Report: L / SR STAFF SGT ABDUL KHALID BIN ABD. HAMID 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 02/04/2023 17:21
Officer In Charge Of Case: TP / HRT / SR STAFF SGT NEO ZHI YUAN Contact No.: 65476079	Classification Of Case:

NP168