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 17/04/2023 18:01 (SGT) Reported by **Actual Driver** Date of Accident 14/04/2023 13:55 (SGT) Exact Location of Accident PIE, Singapore Additional Location Information TOWARDS TAMPINES BEFORE PAYA LEBAR EXIT Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Toyota

Vehicle Registration Number PA1082L

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner **RACO COACH** Company Reg No 5XXXX228E Email Address racocoach@gmail.com Mobile Phone No (Phone) +65-81952136 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model Hiace 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 No - Claiming third party your vehicle? Vehicle Category Commercial vehicle Transmission Auto CC 2982

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Policy Number / Cover Note Number DMB1SNW00014212201

DRIVER

Name of Driver **DEVA DASS S/O GHANA SUNDRUM** NRIC No SXXXX821C Date Of Birth 18/12/1957 Occupation Outdoor

Date Of Driving Pass 20/01/1978 Driving experience 45 YEARS AND 3 MONTHS Gender Mobile Number (Phone) +65-96677737 Alt. Phone Number Email Address racocoach@gmail.com Address **BLK 853 TAMPINES STREET 83 #02-222** Address complement Postcode 520853 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 - Change/cross lane 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? Nο Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement PASSENGER 1 Name **UNKNOWN STUDENT** Gender PASSENGER 2 Name **UNKNOWN STUDENT** Gender Male PASSENGER 3 Name UNKNOWN STUDENT Gender Female DETAILS OF POLICE ACTION Was the accident reported to the police? Yes Police Station Name Traffic Police Police Station Phone No (Phone) +65-65470000 Alt. Police Station Phone No (Fax) +65-65474900 Police Station Address 10 Ubi Avenue 3 Singapore 408865 Was notice of intended Prosecution given? No If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT T/20230416/7024

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Yes

Reasons for not uploading a video of the accident WITH TRAFFIC POLICE

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number **SLH5887R** Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Private car Name of Driver LIM SONG HUA NRIC No SXXXX615Z Contact Number Address Address complement Postcode Insurance Company Name Income Insurance Limited Nature Of Damage Details of property damaged in accident No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised 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
- 5. Any false reporting may be referred to the Police for investigation.
- 6. The 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.
- 8. Consent under the Personal Data Protection Act (PDPA)

lunderstand, 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 (a) by insufer, my workshop and the General insurance Association of Singapore ("GIA") mayrare 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
- (i) 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

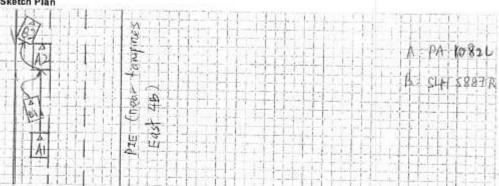
(c) my Personal Information may/can be disclosed by any of the insurers and/or GIA to their third party service providers or agents (including their providers), which may be siled outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date &

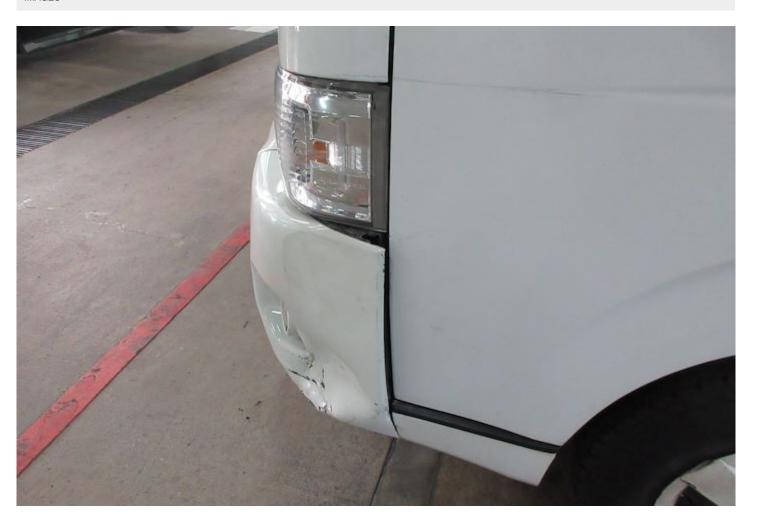
Driver's Signature (if driver is not the policyholder) / Date

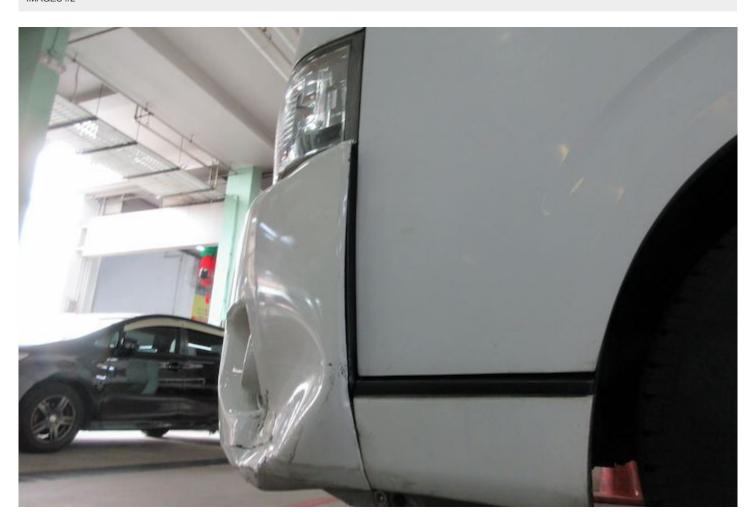
Witnessed by Reporting Centre

Sketch Plan



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Police Station Of Origin: Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

1 of 3 Report No. T/20230416/7024

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/04/2023 17:13		Made:	Vide Report No.:	Station Diary No.:			
Informa	nt's Partic	ulars					
Name of Informant: DEVA DASS S/O GNANA SUNDRUM			Address: 853 TAMPINES STREET 83 #02-222 SINGAPORE 520853				
ID Type / ID No.; NRIC NO / \$1252821C			Contact No.: Home/Office;	Mobile: 96677737			
National SINGAP	lity: ORE CITIZ	EN	Email: icemonkey1981@gmail.com				
Sex: Male	Age: 65	Date of Birth: 18/12/1957	Type of Informant: Driver				
Race: Indian	W ==		Language: English				
Occupat Bus driv			Driving Licence Information: Class:	Date of Expiry:			

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 14/04/2023 13:59	Type of Location Main road of PIE Tampines before Paya Lebar Exit
Location: TAMPINES S	TREET 92	1		
Weather:		Road Surface:		
Clear				
Traffic Flow: One Way		raffic Control: lot Controlled		Traffic Volume:

Details of Vehicle Involved								
Vehicle No.		Make	Model	Color	Condition	No of Passenge		
SLH5887R	Van Car	TOYOTA	Corolla Altis		0			





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20230416/7024

CONTINUATION OF REPORT

Details of Perso	n Involved	Chales III		BULL	and the		
Any Pedestrian I	nvolved: No			-	-		
No. of Pedestriar	ns Injured: NIL		Use of Pedestrian Crossing: NA				
Driver		and in				The state of the s	
Name	DEVA DASS S/O GNANA SUNDRUM			ID No		S1252821C	
Related Vehicle	SLH5887R:(Van) PA 1082L			Conta	ict No.	96677737	
Hospital/Clinic	NIL			Class Drivin Licen Expire	g ce &	Class: NIL Date of Expiry: NIL	
Date	NIL		Date		NIL		
No. of Days gran	ted Medical Leave	NIL	Degree o	of	NIL		

Brief Details

I am a school bus driver. On 14/04/2023 at about 1.50p,. I had picked up a group of school children from Aljunied and was proceeding towards Tampines via PIE. I was driving at Lane 2 at a maintained speed of 50KM/P. Just before Paya Lebar exit, a silver-colored Toyota Corolla Altis of vehicle number SLH 5887R was observed from Lane 3 and filtering into Lane 2. He filtered in at close range ahead of me and i slowed down, honked once at him to express my intent that he was filtering in dangerously and continued with my route. However, the driver was observed to be road hogging where he slowed down his vehicle and started to hold up moving traffic behind me. My other bus drivers behind me filtered into Lane 1, passed the abrupt driver and honked at him before proceeding away. The driver for no apparent reason began to drive with his hazard lights switched on and slowed down his vehicle even more. I attempted to overtake him on 2 occasions to avoid him, but I noticed that the driver began to intrude into my lane on both occasions and posed a hazard and threat to my school children and me. At one point, he was swerving his vehicle in a very dangerous manner on several occasions to slow me down. I honked at him several times to stay away. The driver than signaled me to move along the roadside just before Tampines exit 4B but I feared the safety of my school children and myself and refused to stop. His vehicle was stationary and I tried to avoid him by filtering to my right at Lane 4 and move away from him but again he intruded into my path and caused a collision where my van PA 1082L front lower bumper (passenger side) hit his driver's side rear lower bumper.

I stopped and parked my vehicle along the road shoulder and confronted the driver and to query of his intentions. The driver than called the traffic police. Traffic Police's highway patrol car arrived at scene, and I explained to the officers at scene on what happened and that I have video footages to show proof of the abrupt driver's errant road ethics. I was advised by the Police to lodge a report and make an insurance claim if need be.

I am hereby lodging a report to claim my damages in lieu of the driver's rash behavior and also would like the Police to view the footages produced to show proof of the driver's ill road mannerism,





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20230416/7024

CONTINUATION OF REPORT

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 16/04/2023 17:13
Officer In Charge Of Case: TP / TPHQ / YAN HUCHENG Contact No.: 65476006	Classification Of Case: