

## 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	15/04/2023 11:38 (SGT)
Reported by	Actual Driver
Date of Accident	14/04/2023 06:20 (SGT)
Exact Location of Accident	Jln Terusan, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	XE3164E
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#### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	DYNA-LOG SINGAPORE PTE. LTD.
Company Reg No	2XXXXX311D
Email Address	calvinlim@dyna-log.com.sg
Mobile Phone No	(Phone) +65-96662345
Alternative Phone No	(Office) +65-67779315

#### VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Fuso
Variant	FP51SDR3VDEA
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?	Yes
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	11967

#### INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	SPCM1000000828

#### DRIVER

Name of Driver	LOW JOON JIANG, ADRIAN
NRIC No	SXXXX982Z
Date Of Birth	25/09/1992
Occupation	Outdoor



Date Of Driving Pass	27/06/2018
Driving experience	4 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91072387
Alt. Phone Number	-
Email Address	calvinlim@dyna-log.com.sg
Address	BLK 451A BUKIT BATOK WEST AVENUE 6 #12-703
Address complement	-
Postcode	651451
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	4
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	Jurong Neighbourhood Police Post
Police Station Phone No	(Phone) +65-18002659999
Alt. Police Station Phone No	(Fax) +65-62664987
Police Station Address	Bik 158 Yung Loh Road #01-58 Singapore 610158
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT T/20230414/2050 & BELOW STATEMENT.

ON 14/04/2023 @ ABT 0620HRS, I WAS DRIVING ALONG JLN TERUSAN ON MIDDLE LANE. I WAS INTEND TO CHANGE MY LANE TO LEFT SO I ON MY LEFT SIGNAL & CHECK TRAFFIC CLEARANCE. BEFORE I GOT CHANCE TO CHANGE MY LANE, SUDDENLY THE VEHICLE B (YP796G) APPLY HIS BRAKE & STOP THE VEHICLE. AS IT WAS TOO SUDDEN, I DO NOT HAVE ENOUGH TIME TO REACT, I THEN KNOCKED ONTO THE SAID VEHICLE AT REAR. AFTER THE ACCIDENT, I THEN CAME DOWN TO CHECK & REALISED THERE IS ANOTHER 2 VEHICLE WHICH IS IN FRONT OF VEHICLE B ALSO INVLOVED IN THIS ACCIDENT.

#### 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	YP796G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	NATARAJAN THANGADURAI
Passport No/FIN	GXXXX587R
Contact Number	(Phone) +65-82890422
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	YP2799K
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	DHOTI SINGH
Passport No/FIN	GXXXX132W
Contact Number	(Phone) +65-81329640
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 3**

Vehicle Registration Number	YP5783K
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	RAMAN BALASUBRAMANIAN
Passport No/FIN	GXXXX853X
Contact Number	(Phone) +65-88091608
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	UNKNOWN
Gender	-
Phone No	-



Address -  
 Address Complement -  
 Post Code -  
 Approximate Age Years Old -  
 Injuries Sustained -  
 Injured person in which vehicle? YP796G  
 Were seat belts worn? -  
 Was this injured conveyed to hospital by ambulance? Yes

INJURED 2

Name of injured person UNKNOWN  
 Gender -  
 Phone No -  
 Address -  
 Address Complement -  
 Post Code -  
 Approximate Age Years Old -  
 Injuries Sustained -  
 Injured person in which vehicle? YP796G  
 Were seat belts worn? -  
 Was this injured conveyed to hospital by ambulance? Yes

INJURED 3

Name of injured person UNKNOWN  
 Gender -  
 Phone No -  
 Address -  
 Address Complement -  
 Post Code -  
 Approximate Age Years Old -  
 Injuries Sustained -  
 Injured person in which vehicle? YP5783K  
 Were seat belts worn? -  
 Was this injured conveyed to hospital by ambulance? Yes

INJURED 4

Name of injured person UNKNOWN  
 Gender -  
 Phone No -  
 Address -  
 Address Complement -  
 Post Code -  
 Approximate Age Years Old -  
 Injuries Sustained -  
 Injured person in which vehicle? YP5783K  
 Were seat belts worn? -  
 Was this injured conveyed to hospital by ambulance? Yes

## SKETCH PLAN

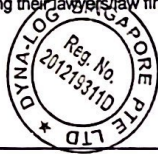
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#### 8. Consent under the Personal Data Protection Act (PDPA)

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

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

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

### Sketch Plan

Jln Temasek (near to Junction of Juncy Port Rd)

veh A: XE 3164 E  
veh B: 4P 796 G  
veh C: 4P 2799 K  
veh D: 4P 5783 K

vJun2022

1



Describe Circumstance of the Accident

Refer to police report no. T/20230414/2050 & below statement.

On 14/04/2023 @ 0620hrs, I was driving along Jln Temson on middle lane. I was intend to change my lane to left so I on my left signal & check traffic clearance. Before I got chance to change my lane, suddenly the vehicle B (YP7966) apply his brake & stop. the vehicle A as it was too sudden, I do not have enough time to react, I then knocked onto the said vehicle at rear. After the accident, I then came down to check & realized there is another 2 vehicle which is in front of vehicle B also involved in this accident.

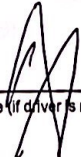
☐ Claim own policy  
☐ Claim third party  
☐ Claim OD / TP at other workshop  
☒ For record purpose  
 Policy No. SPCM1000000828  
 Insurer Allianz (C) Veh.No. XE3164E


I AM AWARE THAT MY INSURER MAY HAVE A 14 DAYS TIMEFRAME FOR ME TO SUBMIT MY OWN DAMAGE CLAIM UNDER MY POLICY. I WILL CHECK MY POLICY FOR MORE DETAILS.

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

  
 SNG AH TEE MOTOR & PANEL SVC PTE LTD  
 Witnessed by Reporting Centre Personnel  
 (Name as in NRIC/ID card)



**SINGAPORE  
POLICE FORCE**



T/20230414/2050

Police Station Of Origin:  
Jurong NPP  
158 Yung Loh Road #01-58 SINGAPORE  
610158  
Tel No: 1800-2659999

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Report No. T/20230414/2050

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 14/04/2023 13:53		Vide Report No.: D/20230414/0023		Station Diary No.: 16	
<b>Informant's Particulars</b>					
Name of Informant: LOW JOON JIANG, ADRIAN			Address: APT BLK 451A BUKIT BATOK WEST AVENUE 6 #12-703 SINGAPORE 651451		
ID Type / ID No.: NRIC NO / S9236982Z			Contact No.: Home/Office: Mobile: 91072387		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 30	Date of Birth: 25/09/1992	Type of Informant: Driver		
Race: Chinese			Language:		
Occupation: Trailer-truck driver			Driving Licence Information: Class: 3,4 Date of Expiry:		

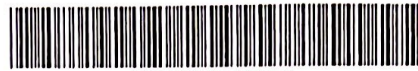
<b>General Information of the Accident</b>				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 14/04/2023 06:20	Type of Location: X-Junction
Location:  JALAN TERUSAN				
Weather: Clear		Road Surface: Dry		
Traffic Flow: Dual Carriage Way		Traffic Control:		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
XE3164E	TRAILER	MITSUBISHI		Orange	Seriously Damaged	0
YP2799K	Lorry	ISUZU		White	Seriously Damaged	0
YP5783K	Lorry	MITSUBISHI		White	Slightly Damaged	23
YP796G	Lorry	MITSUBISHI		White	Seriously Damaged	4





**SINGAPORE  
POLICE FORCE**



T/20230414/2050

Police Station Of Origin:  
Jurong NPP  
158 Yung Loh Road #01-58 SINGAPORE  
610158  
Tel No: 1800-2659999

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Report No. T/20230414/2050

**CONTINUATION OF REPORT**

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LOW JOON JIANG, ADRIAN	ID No.	S9236982Z
Related Vehicle	XE3164E (TRAILER)	Contact No.	91072387
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 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	DHOTI SINGH	ID No.	G7171132W
Related Vehicle	YP2799K (Lorry)	Contact No.	81329640
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
Driver			
Name	RAMAN BALASUBRAMANIAN	ID No.	G8025853X
Related Vehicle	YP5783K (Lorry)	Contact No.	88091608
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





**SINGAPORE  
POLICE FORCE**



T/20230414/2050

Police Station Of Origin:  
Jurong NPP  
158 Yung Loh Road #01-58 SINGAPORE  
610158  
Tel No: 1800-2659999

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Report No. T/20230414/2050

**CONTINUATION OF REPORT**

Driver			
Name	NATARAJAN THANGADURAI	ID No.	G2573587R
Related Vehicle	YP796G (Lorry)	Contact No.	82890422
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.**

On 14.04.2023 at about 0620hrs, I was driving my trailer; XE3164E along Jln Terusan heading to Jurong Port Road direction when I was involved in a chain accident with 3 other vehicles as follows;

- YP796G (vehicle I collided it's rear)
- YP 2799K (vehicle in-between above and below)
- YP5783K (the front most vehicle)

After the collision, all of the above 3 drivers refused to exchange particulars. However when the traffic police and ambulances arrived, they decided to change their minds and furnish their particulars. The driver of YP796G had bloodshot eyes and could not stand straight when he got out of his lorry.

Multiple people who were their passenger were injured and had to be conveyed to hospital by ambulance. I was advised to make a traffic accident report vide; D/20230414/0023.



**SINGAPORE  
POLICE FORCE**



T/20230414/2050

4 of 4

Police Station Of Origin:

Jurong NPP

158 Yung Loh Road #01-58 SINGAPORE

610158

Tel No: 1800-2659999

Report No. T/20230414/2050

**CONTINUATION OF REPORT**

Signature of Officer Recording The Report:

J/

SR STAFF SGT MOHAMMED  
AMIRULHAFIZ BIN RAMLAN

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

STAFF SGT NUR HAFIZAH BINTE NORIZAN

Contact No.: 96189347

Signature Of Informant:

Date/Time:

14/04/2023 13:53

Classification Of Case:

NP168