SN09235Q0001 / National Assessment Centre Services [408933] ENTRY DATE & TIME: 29/05/2023 17:32 (SGT) SUBMITTED BY: NIVITHA VERSION: 1 (29/05/2023 17:32 (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.

- 4. The issue and acceptance of this is form by instrained 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 29/05/2023 17:32 (SGT) Reported by **Actual Driver** Date of Accident 22/05/2023 11:28 (SGT) Exact Location of Accident Singapore Additional Location Information 80 AIRPORT BOULEVARD CHANGI AIRPORT Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Private use

No - Claiming third party

Vehicle Registration Number PC3146M

INSURED/POLICYHOLDER

Is company? Yes Name Of Registered Owner SIANGHOCK HOLDING PTE LTD Company Reg No 1XXXXX681M Email Address car.rental@sianghock.com.sg Mobile Phone No (Phone) +65-98792002 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Nissan Model Nv350 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?

Vehicle Category Commercial vehicle Transmission Auto CC 2488

INSURANCE COMPANY

Name of Insurance Company MS First Capital Insurance Ltd Policy Number / Cover Note Number D-23100894MFBP/2

DRIVER

Name of Driver NAVINDAR SINGH GURMUKH SINGH Passport No/FIN GXXXX707W Date Of Birth 19/04/1991 Occupation Outdoor

Date Of Driving Pass 07/01/2015 Driving experience 8 YEARS AND 4 MONTHS Gender Mobile Number (Phone) +65-94577417 Alt. Phone Number Email Address car.rental@sianghock.com.sg Address BLK 643 PASIR RIS DRIVE 10 Address complement # 09-32 Postcode 510643 Is the driver the policyholder? If No, Relationship of the Driver with the Insured RENTAL-LEASING Does Driver Own Other Vehicles? 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 DETAILS OF POLICE ACTION Was the accident reported to the police? Yes Police Station Name Pasir Ris Neighbourhood Police Centre Police Station Phone No (Phone) +65-18005852999 Alt. Police Station Phone No (Fax) +65-65855261 Police Station Address 1 Pasir Ris Drive 4 #01-01 Singapore 519457 Was notice of intended Prosecution given? If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO THE ATTACHED POLICE REPORT - G/20230524/2125 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 WC9984M

Vehicle Manufacturer
Vehicle Model
Vehicle Variant

Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	LI SHIFU
Passport No/FIN	SXXX9535
Contact Number	-
Address	_
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	_

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SKETCH PLAN

IMPORTANT NOTICE

- 1 Please report correctly the details of the accident to speed up the claims process
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver
- 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.
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- 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 capies 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 and/or process my personal deta/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.

Procy holder - Sanatu

Policyholder's Signature / Date &

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

Witnessed by Reporting Centre Personnel

Sketch Plan

80 AIRPORT BOULEURED CHONG AIRPOT

A-PC 3146M -B-WC9984M

e Circumstances of the Accid	
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lare the foregoing particulars are true	in every respect.
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Report No. G/20230524/2125

POLICE REPORT (NP299)

Police Station Of Origin Pasir Ris N.P.C 1 Pasir Ris Drive 4 #01-01 SINGAPORE Tel No: 1800-5852999

Date/Time Report Made 24/05/2023 23:31	Vide Report No. P/20230522/0038			Station Diary No. 85	
Name Of Informant NAVINDAR SINGH GURMUKH SINGH	Address APT BLK 643 PASIR RIS DRIVE 10 #09-32 SINGAPORE 510643				
ID Type / ID No. FIN NO / G6736707W	Contact No. Home/Office		Mobile 94577417		
Nationality MALAYSIAN	Email Address				
Occupation CERTIS CISCO	Sex Male	Age 32	Date of Birth 19/04/1991	Race Punjabi	
Institution/School Name	Language				
Date/Time Of Incident 22/05/2023 11:30 - 22/05/2023 11:40	Location Of Incident 80 AIRPORT BOULEVARD CHANGI AIRPORT TERMINAL 1 BLDG* SINGAPORE 819642 West Tunnel Near Aircraft Bay C23				

Brief details.

On 22/05/2023 at 1128 hrs, while SGT 46918 NAVINDAR SINGH (DRIVER) and SGT 110201 LIM BOON PENG (GUARDSMAN) on duty as perimeter patrol sector 3 and was driving vehicle (plate number: PC3146M) toward west underpass, a SATS tractor (plate number: WC9984M) hit the rear part of the vehicle at west tunnel (From West satellite fire station to Stand C23 bay) and cause damage to the rear vehicle (dented). No one was injured during this incident. CAG AMC was informed and acknowledge

Signature Of Officer Recording The Report:

G / SR STAFF SGT KHAIRIL IDZWAN BIN ZAKARIA

Signature Of Informant:

Signature Of Interpreter: Not applicable

Officer In-Charge Of Case. G / Bedok Police Divisional Investigation Branch / INSP (1) BENEDICT NEO WEI JUN Contact No.: 62447200

Date/Time: 24/05/2023 23:31

Classification Of Case:

https://mail.google.com/mail/ui/0/#search/PC3146M/WhctKKXwxsVXGWLwRFNQmSHPgxHvpfrpMDBmfRKrmdnsrfWPnQmZkzSCkNstmMPVJV...

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20230524/2125

by CAG AMC Andra at 1136 hrs. APD OPS was informed and acknowledge by APD SSS Rizal at 1140 hrs. CIOC was informed and acknowledge by WSGT Ayu at 1146 hrs.

AMC Mario and APD Insp Abdullah arrived at the scene 1203 hrs. AMC Mario ask perimeter patrol sector 3 proceed to AMC office for interview at 1211 hrs. After AMC Johnson take down the statement at 1320 hrs, he release officers and inform that they can resume duty.

Particulars of the SATS tractor driver:

Name: LI SHIFU

Airport pass number: \$2729535

Company: SATS

Expiry Date: 27th March 2024 Area Code: 1/2A C Code Plate Number: WC9984M

Subjects Involved

Victim

Person Name NAVINDAR SINGH GURMUKH SINGH (Informant)

Signature Of Officer Recording The Report:

G / SR STAFF SGT KHAIRIL IDZWAN BIN ZAKARIA

KM

Signature Of Interpreter: Not applicable

Officer In-Charge Of Case: G / Bedok Police Divisional Investigation Branch / INSP (1) BENEDICT NEO WEI JUN Contact No.: 62447200 Signature Of Informant:

(Enin

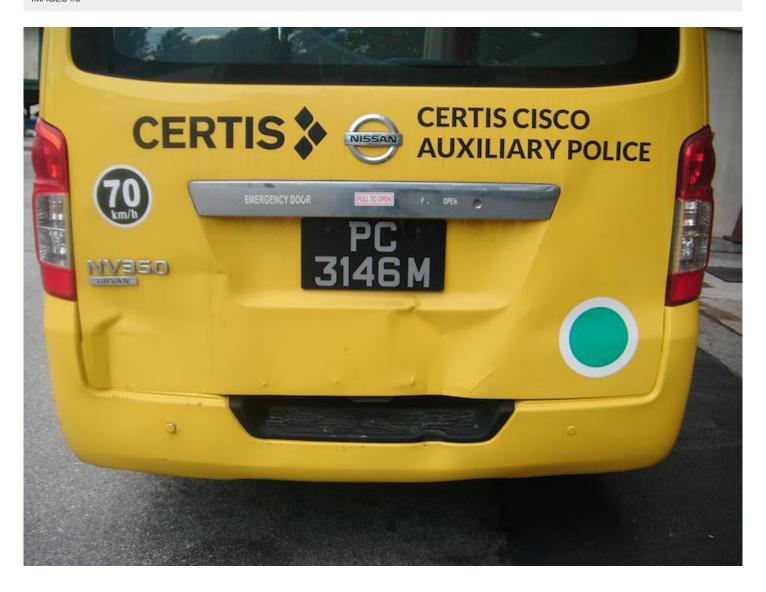
Date/Time: 24/05/2023 23:31

Classification Of Case:

https://mail.google.com/mail/u/0/#search/PC3146M/WhctKKXwxsVXGWLwRFNQmSHPgxHvpfrpMDBmfRKrmdnsrtWPnQmZkzSCkNstmMPVJV... 1/1





















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POLICE FORCE

POLICE REPORT (NP299)

Police Station Of Origin Pasir Ris N.P.C 1 Pasir Ris Drive 4 #01-01 SINGAPORE Tel No: 1800-5852999



Report No. G/20230524/2125

Date/Time Report Made 24/05/2023 23:31	Vide Report No. P/20230522/0038			Station Diary No. 85	
Name Of Informant NAVINDAR SINGH GURMUKH SINGH	Address APT BLK 643 PASIR RIS DRIVE 10 #09-32 SINGAPORE 510643				
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Occupation CERTIS CISCO	Sex Male	Age 32	Date of Birth 19/04/1991	Race Punjabi	
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G / SR STAFF SGT KHAIRIL IDZWAN BIN ZAKARIA

Signature Of Informant:

Signature Of Interpreter: Not applicable

Officer In-Charge Of Case: G / Bedok Police Divisional Investigation Branch / INSP (1) BENEDICT NEO WEI JUN Contact No.: 62447200

Date/Time: 24/05/2023 23:31

Classification Of Case:

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Victim

Person Name

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Signature Of Officer Recording The Report:

G / SR STAFF SGT KHAIRIL IDZWAN BIN ZAKARIA

Signature Of Interpreter: Not applicable

Officer In-Charge Of Case: G / Bedok Police Divisional Investigation Branch / INSP (1) BENEDICT NEO WEI JUN Contact No.: 62447200

Signature Of Informant:

Date/Time: 24/05/2023 23:31

Classification Of Case:

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