





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.

 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 11/10/2022 14:48 (SGT) Reported by Date of Accident 10/10/2022 18:40 (SGT) Exact Location of Accident AYE, Singapore Additional Location Information Country/State of Loss Singapore **DETAILS OF OWN VEHICLE** Vehicle Registration Number SNE4283G INSURED/POLICYHOLDER Is company? Yes Name Of Registered Owner MOTORWAY CAR RENTALS PTE LTD VEHICLE PARTICULARS Manufacturer Ssangyong Stavic Variant Vehicle Category Private car Transmission Auto 2200 INSURANCE COMPANY Name of Insurance Company Liberty Insurance Pte Ltd Policy Number / Cover Note Number SD22V04503 /VPZ/R05

Name of Driver	VEERAN MADURAIMUTHU
Passport No/FIN	GXXXX122R
Address	23A MERANTI AVE #01-106
Address complement	-
Postcode	627450
Does Driver Own Other Vehicles?	No

GENERAL INFORMATION OF THE ACCIDENT

DRIVER

Type of Accident Chain Collision

Weather Conditions	Clear
OTHER INFORMATION	
Was any foreign vehicle involved in the accident? Was anybody injured in the Accident? Was any other vehicle or property damaged? Number of Passengers (Including Driver) Translator's name Translator's ID Translator's phone number Translator's email Original language used in the statement	No No Yes 1
CIRCUMSTANCES OF ACCIDENT	
REFER TO SKETCH PLAN	

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 SJL9262U
Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Private car
Name of Driver Insurance Company Name -

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SKP9465T
Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour Vehicle Category Private car
Name of Driver Insurance Company Name -

SKETCH PLAN

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 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.
- 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.
- 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 haurance 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' 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.

Policyholder's Signature / Date &

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

Witnessed by Reporting Centre Personnel

Sketch Plan

AYE (toll) and) to Champi.

1 FAD SDIED

2

3

A-SNE 428347 B-SJL 92620 C-SKP 94657

Describe Circumstances of the Accident
on collo 2022 of around 1840 Hrs. I was driving
my Company's routal car, V3 along AYE twords
the woodless was clear, the road Surface was
dry and the traffic way heavy at the pains of
time !
Japanes browke this belief , was a Con longth
Jamus broakoties volicle , was a con longth
behind 12. 1 copplied by breaker for could to
discovered that is held also his into in Exercise.
diccovered their is had also his into wi excer.
VI custained damages of the reary ance.
((or englained hart danages no one was
injurced at the Point of time and depay not
and any medical attention No traffic Police
Came to Scone my cardos not have any inter
Came to Scone my cardos not house any inter Camera. No Soverment property demages
Hyover-

Declaration

We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

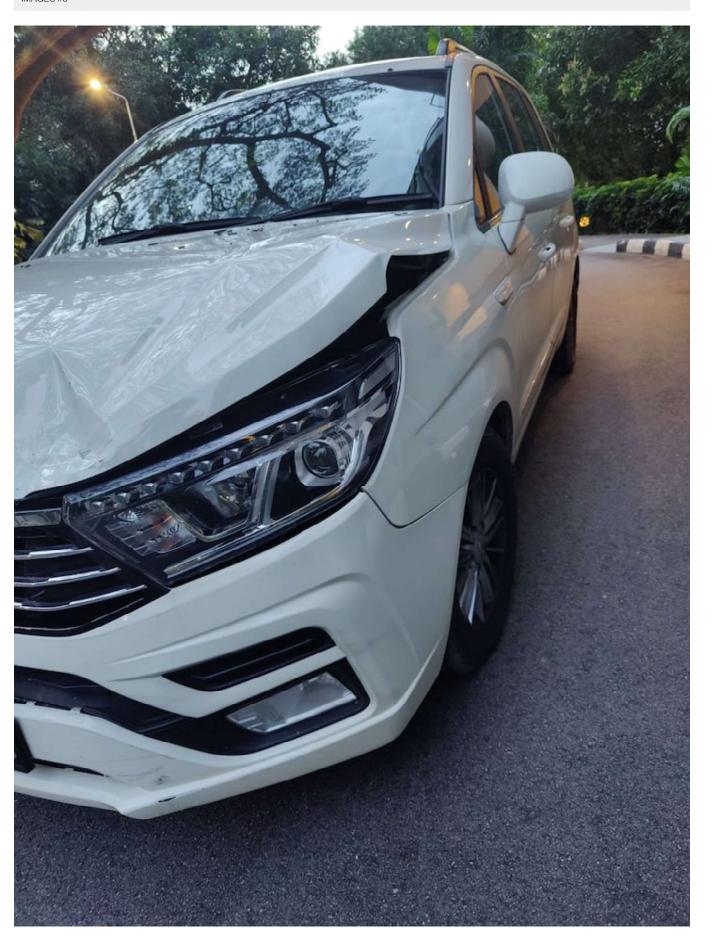
Driver's Signature (If driver is not the policyholder) / Date & Time



Witnessed by Reporting Centre Personnel

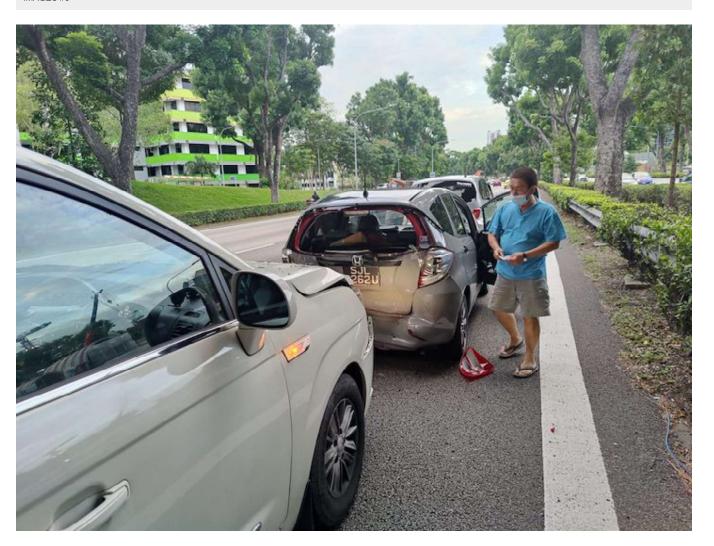








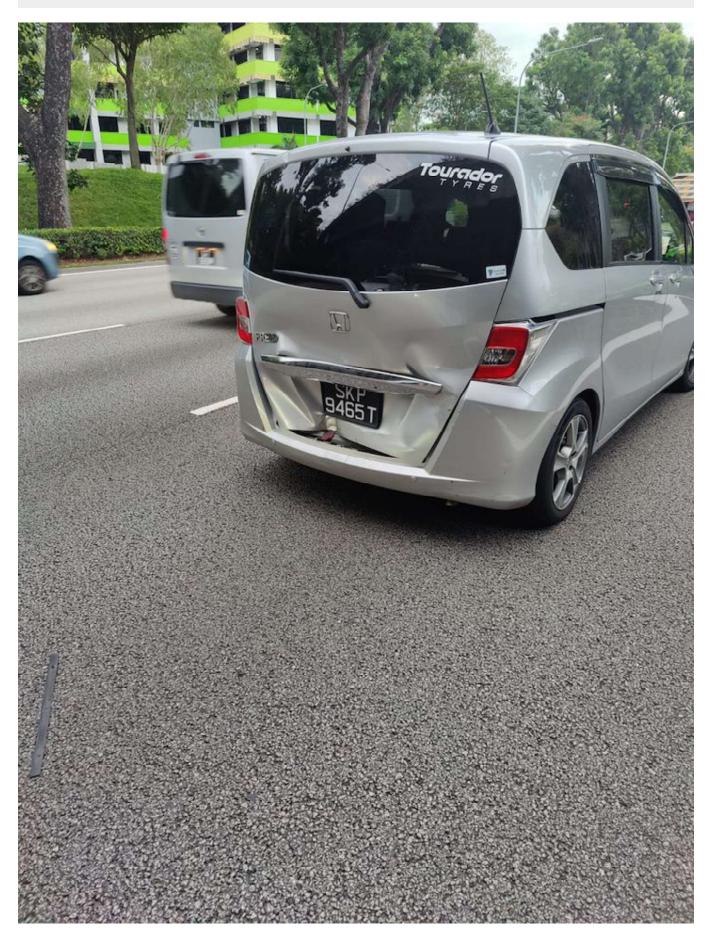
















Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE

Report No. T/20221011/2022

649482

Tel No: 1800-7929999

REPORT	OF A	TRAFFIC	ACCIDENT

Date/Time Report Made: 11/10/2022 11:10		Made:	Vide Report No.:	Station Diary No.: 62	
Informa	nt's Partici	ulars			
Name of Informant: VEERAN MADURAIMUTHU			Address: 23A MERANTI AVENUE #01-106 SINGAPORE 627450		
ID Type / ID No.: FIN NO / G8623122R		Contact No.: Home/Office:	Mobile: 84573277		
National INDIAN	ity:		Email:		
Sex: Male	Age:	Date of Birth: 16/04/1995	Type of Informant: Driver		
Race: Indian			Language:	Institution / School Name:	
Occupation: CONSTRUCTION WORKER		WORKER	Driving Licence Informatio Class: 2B,3	on: Date of Expiry:	

Type of Accident:	Othore		Date/Time of Accident: 10/10/2022 18:40	Type of Location Straight Road
Location: AYER RAJAH	H EXPRESSWAY			
		Road Surface:		Road Speed Limit:
Weather: Clear Traffic Flow: Dual Carriage		Road Surface: Dry Traffic Control: Not Controlled		Road Speed Limit: Traffic Volume: Heavy

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SJL9262U	Car				Slightly Damaged	0
SKP9465T	Car				Slightly Damaged	0
SNE4283G	Car				Slightly Damaged	1



T/20221011/2022

2 of 3 Report No. T/20221011/2022

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

CONTINUATION OF REPORT

Brief Details.

V1) SKP9465T (Sundaram Thiagarajan Suresh, S2657001H)

V2) SJL9262U (Kwek Ah Lam, S11017223B)

V3) SNE4283G

On 10/10/2022 at around 1840hrs, I was driving my company's rental car, V3 along AYE towards Changi on the first lane at around 50-60km/h. The weather was clear, the road surface was dry and the traffic was heavy at that point of time.

Suddenly, V2 which was in ahead of me jammed brake his vehicle. I was a car length behind V2. I applied my brakes but could not stop in time. My car subsequently hit onto V2's rear. I alighted from my car and discovered that V2 has also hit onto V1's rear.

V1 sustained damages to the rear area. V2 sustained front and rear damages while my car sustained front damages. No one was injured at that point of time and does not need any medical attention. No traffic police came to scene. My car does not have any in-car camera. No government property damage. The accident happened along AYE below Portsdown flyover.





Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482 Tel No: 1800-7929999 3 of 3 Report No. T/20221011/2022

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature of Officer Recording The Report: J / SGT 3 ISMADI BIN MUHAMAD	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 11/10/2022 11:10
Officer In Charge Of Case: TP / GIA / SI ANG YI TING, STEPHANIE Contact No.: 65476414	Classification Of Case:

NP168