

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 First Submission	26/08/2024 10:43 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	24/08/2024 18:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	Lavender Street Towards Serangoon Road
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBN865Z
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	Panambur Venkataraman Ghanesh
NRIC No	S7864601B
Email Address	ghanesh@gmail.com
Mobile Phone No	(Phone) +65-93836817
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	WW150
Variant	WW150
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Motorcycle
Transmission	Auto
CC	150
Vehicle Fuel	-
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	Direct Asia Insurance (Singapore) Pte Ltd
Policy Number / Cover Note Number	MC 00923673 02

DRIVER

Name of Driver	Panambur Venkataraman Ghanesh
NRIC No	S7864601B
Date Of Birth	26/01/1978
Occupation	Indoor
Driving Pass Date	19/12/2019
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	4 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93836817
Alt. Phone Number	-
Email Address	ghanesh@gmail.com
Address	13 Fernvale Lane #15-10
Address complement	-
Postcode	727496
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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	3
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
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	-

PASSENGER 1

Name	Venkatesan Uamaheswari
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

Report refer police 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 SJG3254J
Vehicle Manufacturer -
Vehicle Model -
Vehicle Variant -
Vehicle Colour -
Vehicle Category Private car
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) -

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SLD3241M
Vehicle Manufacturer -
Vehicle Model -
Vehicle Variant -
Vehicle Colour -
Vehicle Category Private car
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) -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person Panambur Venkataraman Ghanesh
Gender Male
Phone No -
Address 13 Fernvale Lane #15-10
Address Complement -
Post Code -
Approximate Age Years Old -
Injuries Sustained unnown
Injured person in which vehicle? -
Were seat belts worn? No
Was this injured conveyed to hospital by ambulance? No

INJURED 2

Name of injured person Venkatesan Uamaheswari
Gender Female
Phone No -
Address -
Address Complement -
Post Code -
Approximate Age Years Old -
Injuries Sustained unknown
Injured person in which vehicle? FBN865Z

Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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:

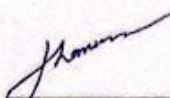
(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

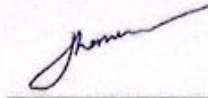
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
- (ii) investigating the accident and/or my claims;
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (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

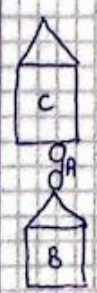
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.


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/ID card)

Sketch Plan

LAVENDER ST TOWARDS SERRAVALLO RD		
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A : FBN865Z

B : SJG3254J

C : SLD3241M

1

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/20240824/7057

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 4

Report No. T/20240824/7057

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/08/2024 15:00		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: PANAMBUR VENKATARAMAN GHANESH			Address: 13 FERNVALE LANE #15-10 SINGAPORE 797496		
ID Type / ID No.: NRIC NO / S7864601B			Contact No.: Home/Office: Mobile: 93836817		
Nationality: INDIAN			Email: GHANESH@GMAIL.COM		
Sex: Male	Age: 46	Date of Birth: 26/01/1978	Type of Informant: Rider		
Race: Indian			Language: English		
Occupation: IT PROFESSIONAL			Driving Licence Information: Class: 2B,3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 23/08/2024 13:30	Type of Location: Straight Road
Location: LAVENDER STREET				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
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 Passenger
FBN865Z	Motorcycle	HONDA	WW150 (PCX150)	White	Seriously Damaged	1
SJG3254J	Motor car				Slightly Damaged	0
SLD3241M	Motor car		VEZEL	Red	Slightly Damaged	1

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date



**SINGAPORE
POLICE FORCE**



T/20240824/7057

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20240824/7057

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
FBN865Z	DIRECT ASIA INSURANCE (SINGAPORE) PTE. LTD.	MC/00923673/03	12/07/2021	11/07/2025

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Pillion				
Name	VENKATESAN UMAMAHESWARI		ID No.	S8060751B
Related Vehicle	FBN865Z (Motorcycle)		Contact No.	93262717
Hospital/Clinic	24 HOUR WALK-IN CLINIC		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	24/08/2024		Date Discharge	24/08/2024
No. of Days granted Medical Leave (MC)		03	Degree of Injury	Slight
Rider				
Name	PANAMBUR VENKATARAMAN GHANESH		ID No.	S7864601B
Related Vehicle	FBN865Z (Motorcycle)		Contact No.	93836817
Hospital/Clinic	24 HOUR WALK-IN CLINIC		Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	24/08/2024		Date Discharge	24/08/2024
No. of Days granted Medical Leave (MC)		03	Degree of Injury	Slight

Brief Details.

ON THE STATED VENUE, DATE AND TIME, I, VEHICLE A, BEARING MOTOR PLATE: FBN865Z WAS ALREADY TRAVELLING STRAIGHT IN MY LANE ON LANE 2 COUNTING FROM THE RIGHT.

THE VEHICLE IN FRONT, SLD3241M BRAKE AND STOP. SO I ALSO BRAKE AND STOP

AFTER I AM STATIONARY FOR 4-5 SECONDS.

SUDDENLY, I FELT A STRONG IMPACT FROM THE REAR PORTION OF MY MOTORBIKE. THE IMPACT CAUSED ME TO PROPEL FORWARD AND BANG ONTO THE VEHICLE IN FRONT.

THE BEHIND VEHICLE CAR PLATE: SJG3254J

AFTER THE IMPACT, MY BIKE, MYSELF AND MY WIFE(PILLION), WE FALL TO THE GROUND AND LANDED ONTO THE LEFT SIDE OF OUR BODY.

I TOOK PHOTOS OF THE ACCIDENT SCENE. AND EXCHANGED PARTICULARS.



**SINGAPORE
POLICE FORCE**



T/20240824/7057

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20240824/7057

CONTINUATION OF REPORT

AFTER THE ACCIDENT, I AND MY WIFE, WE SUFFERED DISCOMFORT AND PAIN ON OUR BODY. SO WE WENT TO UNIHEALTH 24 CLINIC LOCATED AT TOA PAYOH TO CONSULT A DOCTOR.

WE RECEIVED 3 DAYS OF MC.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000



T/20240824/7057

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Report No. T/20240824/7057

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / AEIT /
LOW MENG FATT
Contact No.: 97577566

NP168

Signature Of Informant:
The identity of the person making this report has been
authenticated by Singpass. No signature is required.

Date/Time:
24/08/2024 15:00

Classification Of Case:



**SINGAPORE
POLICE FORCE**



T/20240828/7066

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20240828/7066

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/08/2024 12:51		Vide Report No.: T/20240824/7057		Station Diary No.:	
Informant's Particulars					
Name of Informant: PANAMBUR VENKATARAMAN GHANESH			Address: 13 FERNVALE LANE #15-10 SINGAPORE 797496		
ID Type / ID No.: NRIC NO / S7864601B			Contact No.: Home/Office: Mobile: 93836817		
Nationality: INDIAN			Email: GHANESH@GMAIL.COM		
Sex: Male	Age: 46	Date of Birth: 26/01/1978	Type of Informant: Rider		
Race: Indian			Language: English		
Occupation: Business consultant			Driving Licence Information: Class: 2B,3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 24/08/2024 13:20	Type of Location: Straight Road
Location: LAVENDER STREET				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
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 Passenger
FBN865Z	Motorcycle	HONDA	WW150 (PCX150)	White	Seriously Damaged	0
SJG3254J	Motor car	HONDA		Red	Slightly Damaged	0
SLD3241M	Motor car		Vezel		Slightly Damaged	1

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date



**SINGAPORE
POLICE FORCE**



T/20240828/7066

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20240828/7066

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
FBN865Z	DIRECT ASIA INSURANCE (SINGAPORE) PTE. LTD.	MC/00923673/03	12/07/2021	11/07/2025

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Pillion				
Name	VENKATESAN UMAMAHESWARI		ID No.	S8060751B
Related Vehicle	FBN865Z (Motorcycle)		Contact No.	93262717
Hospital/Clinic	24 HOUR WALK-IN CLINIC		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	24/08/2024		Date Discharge	24/08/2024
No. of Days granted Medical Leave (MC)		03	Degree of Injury	Slight
Rider				
Name	PANAMBUR VENKATARAMAN GHANESH		ID No.	S7864601B
Related Vehicle	FBN865Z (Motorcycle)		Contact No.	93836817
Hospital/Clinic	24 HOUR WALK-IN CLINIC		Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	24/08/2024		Date Discharge	24/08/2024
No. of Days granted Medical Leave (MC)		03	Degree of Injury	Slight

Brief Details.

REFER TO POLICE REPORT:
T/20240824/7057

I LIKE TO AMEND THE "DATE OF THE ACCIDENT"

THE CORRECT DATE AND TIME: 24/08/2024 13:17 HRS



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000



T/20240828/7066

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Report No. T/20240828/7066

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / AEIT /
PHNG KAR SOON
Contact No.: 65476439

NP168

Signature Of Informant:
The identity of the person making this report has been
authenticated by Singpass. No signature is required.

Date/Time:
28/08/2024 12:51

Classification Of Case:



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
 6 Raffles Quay #18-00 Singapore 048580
 Tel (65) 6224 0010 Fax (65) 6224 0030
 Operating Hours : Monday to Friday, 09:00 – 17:00
 UEN: S66550020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : S104248Q0001 Vehicle Registration No: FBN 865Z
 Name (as shown in NRIC) : PANAMBUR VENKATARAMAN GHANESH NRIC/FIN/Passport No : S7864601B
 (*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
 Address : 13 FERNVALE LANE #15-10 Singapore (797496)
 Contact (Tel) : _____ Mobile No. : 93836817
 Email Address : GHANESH@GMAIL.COM
 Date of Accident : 24.08.2024 Time of Accident : 1320hrs
 Place of Accident : LAVENDER STREET
 Insurance Company: DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

AMEND DATE OF ACCIDENT ON 24.08.2024

ATTACHED AMEND POLICE REPORT NO.: T/20240828/7066

Policyholder / Driver's Signature
 Date: 28.08.2024

Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:
 Date:



Contact us at
 Hotline: (65) 6665 5555
 E-mail: customerservice@directasia.com

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act")
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore)
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

Certificate No.	:	MC/00923673/03
Type of Coverage	:	Third-Party Only Cover
1) Vehicle Registration No.	:	FBN865Z
Chassis No.	:	RLHKF18A4JY202952
2) Name of Policy Holder	:	PANAMBUR VENKATARAMAN GHANESH
3) Effective Date of Commencement of Insurance for the Purpose of the Act	:	12/07/2024 00:00
4) Date of Expiry of Insurance	:	11/07/2025 23:59
5) Persons or Classes of Persons Entitled to Ride		
(a) A named rider who is riding on the Policyholder's permission. Provided that the person riding has a valid Motorcycle riding licence to ride in Singapore and is not under suspension or disqualification from riding.		
6) Limitations as to use*		
Use only for private purposes in accordance with the declared motorcycle usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business. *Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.		
Sum Insured	:	Market Value
Policy Excess	:	S\$ 0.00
Main rider	:	PANAMBUR VENKATARAMAN GHANESH
Important Note: The policy only covers the main rider and the following named rider who holds a valid motorcycle licence for at least 2 years.		
No named rider declared		
Finance Company / Hire Purchase	:	Nil

I/We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and the Road Transport Act, 1987 (Malaysia).

Issued on: 12/06/2024

Direct Asia Insurance (Singapore) Pte. Ltd.