

## 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 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 ability.
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 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 Report	18/12/2017 10:34
Date Of Accident	17/12/2017 11:50
Exact Location Of Accident	MALAYSIA CUSTOM QUEUE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKN7795P
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MANE RAJENDRA NATHAJI
NRIC No	S7562523E
Email Address	RAJ.MANE@JOHN.CRANE.COM
Mobile Phone No	(LOCAL) +65-98244082
Alternative Phone No	OFFICE-98244082

### Vehicle Particulars

Manufacturer	CHEVROLET
Model	CAPTIVA-2.4 (A)
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
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	VPA/P1530724
Cover Note Number	

### Driver

Name of Driver	MANE RAJENDRA NATHAJI
NRIC No	S7562523E
Date Of Birth	08/11/1975
Occupation	INDOOR
Date Of Driving Pass	08/01/2005
Driving Experience	12 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98244082
Fax Number	
Contact Number	OFFICE-98244082
EEmail Address	RAJ.MANE@JOHN.CRANE.COM

Address

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OWNER

Vehicle Registration Number of Driver's Own Vehicle -

Insurance Company of Driver's Own Vehicle -

#### General Information of the Accident

Type Of Accident SIDE SWIPE

Weather Conditions CLEAR

Road Surface DRY

#### Other Information

Was any foreign vehicle involved in this accident? NO

Was any body injured in the Accident? NO

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance. NO

Number of Passengers (Including Driver) 1

#### Details of Police Action

Was the accident reported to the police? NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

#### Circumstances of Accident

SEE REPORT ATTACHED

#### Attachment(s)

Are accident photos available for attachment? YES

Was there any video captured by Car Camera? NO

Was there any audio recorded? NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SJX6442Z

Vehicle Make/Model/Colour BMW

Details Of Properties

Name of Driver

NRIC/Passport Number

Contact Number 91824589

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### Details of Witness

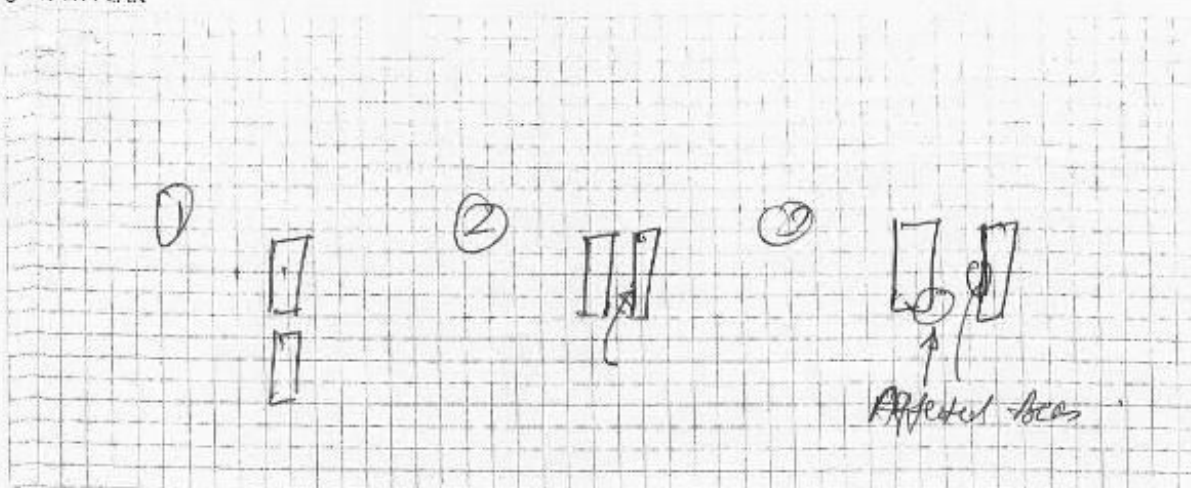
Name

Phone Number

Email Address

# Sketch Plan

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

- 1) Was driving towards Malaysia Immigration and both cars in the lane queuing up to the immigration.
- 2) As we approach the immigration counter I try to move forward my car from the right hand side of the car in front of me as he is not moving.
- 3) ~~While~~ In the act ~~the~~ my cars left hand side struck against the BMW right hand side of the bumper.

## DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature

Date & Time:

18/12/2018

Signature of Policyholder

9. Nam

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



## Sketch Plan #2

### SKETCH PLAN

#### IMPORTANT NOTICE

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7. By the lodgment 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time: 18/12/17

GIA/MC Sketch Plan Form V3

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



# INSURANCE CERT

AXA INSURANCE PTE LTD  
8 Shenton Way, #24-01  
AXA Tower, Singapore 068811  
Customer Service Centre #B1-01  
Tel:(65)63387288 Fax:(65)63382522  
Website:www.axa.com.sg  
GST Registration Number: 199903512M  
customer.service@axa.com.sg



Private Cars COMP  
POLICY SCHEDULE  
RENEWAL  
Duplicate

<b>POLICY INFORMATION</b>		Policy No. : VPA/P1530724	
Source	: (01) 04131 ALPINE CREDIT-CHEVROLET SCHEME		
Insured	: MANE RAJENDRA NATHAJI		
Address	: BLK 653C #05-458 JURONG WEST STREET 61 SINGAPORE 643653		
Business/Profession	: MANAGER Carrying on or engaged in the business or profession last declared and no other for the purpose of this insurance.		
Period of Insurance : From 17/07/2017 To 16/07/2018 (Both Dates Inclusive)			
Any subsequent period for which the Insured shall pay and the Company shall agree to accept a renewal premium.			
<b>PREMIUM</b>			
Premium After 50.00% : SGD 1,184.96			
NCD			
Prem W/Shop	Disc	: SGD 177.74	
15.00%			
NCD Protector	: SGD 80.58		
GST 7.00%	: SGD 76.15		
Annual Premium	: SGD 1,164.01		
Total Payable	: SGD 1,164.01		
<b>RISK DETAILS THE MOTOR VEHICLE</b>			
Type Of Cover	: Comprehensive		
Regn No.	: SKN7795P		
Type Of Use	: Private Car		
Make/Model	: CHEVROLET CAPTIVA 2.4A		
Year of Manufacture	: 2014	Seating Capacity (excl. Driver) : 06	
Body Type	: SPORTS UTILITY VEHICLE	Engine C.C. : 2384	
Engine No.	: LE9141300217	Chassis No. : KL1CA26UJEB041238	
Insured's Estimated Market Value	: Market Value At The Time Of Loss (including Accessories and Spare Parts)		
Limitations as to Use : As specified in Certificate of Insurance			
Hire Purchase	: MAYBANK		
<u>Extra Coverage(Premium Breakdown)</u>		<u>Limits (SGD)</u>	<u>Premium (SGD)</u>
NCD Protector			80.58
Basic Own Damage Excess		: SGD 1,000.00	
<u>Named Drivers</u>			
1 MANE RAJENDRA NATHAJI			
<b>ILLEGALITY CLAUSE</b>			
Under no circumstances shall this insurance policy be			

Accident Photo





Accident Photo



Accident Photo





**Accident Photo**

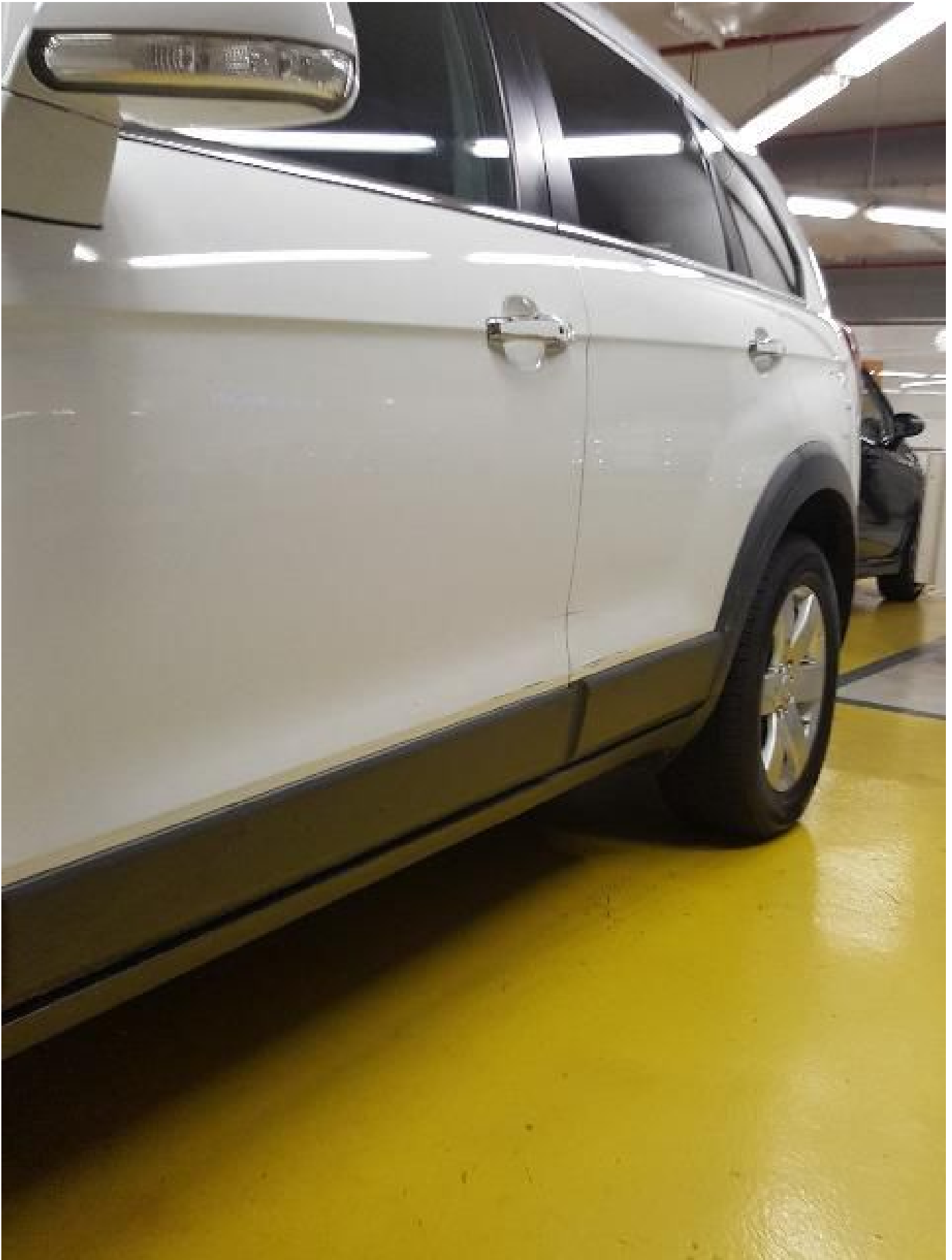




**Accident Photo**



Accident Photo

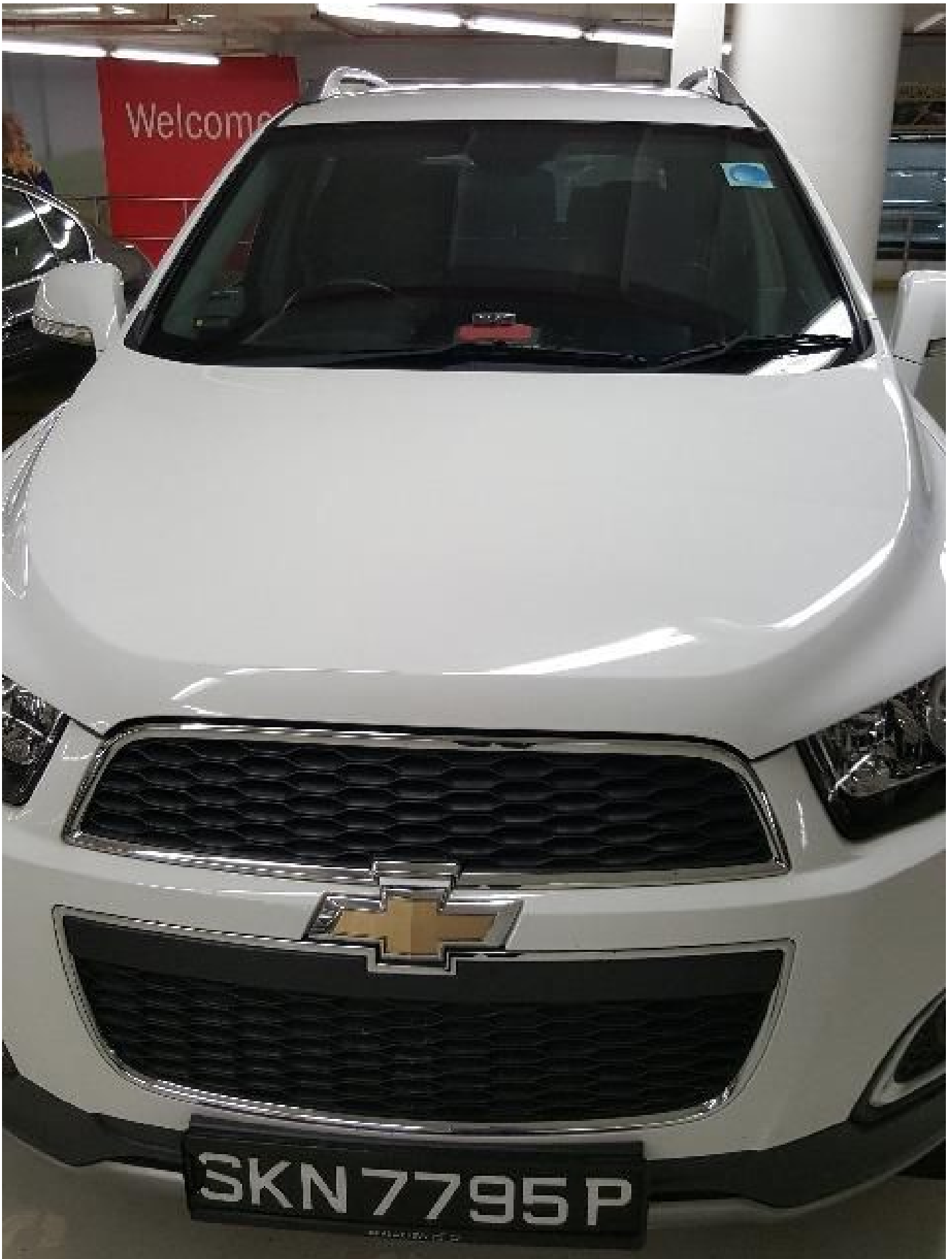


Accident Photo





Accident Photo



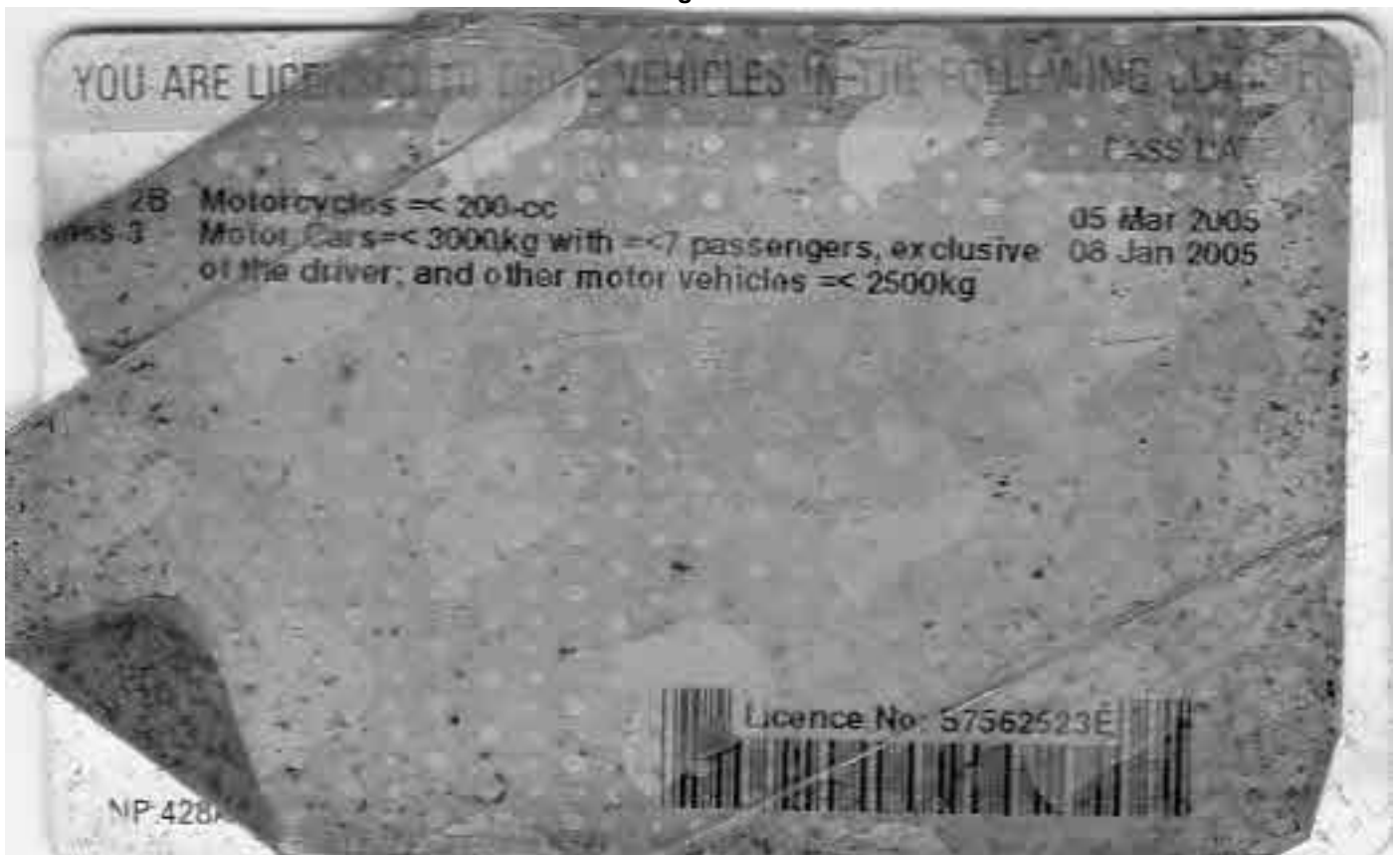
Accident Photo



Accident Photo



# Driving License



Identification Card

9421887



NRIC No. S7562523E



Nationality  
INDIAN

Date of issue  
17-10-2016

Address  
APT BLK 653C JURONG WEST STREET 61  
#05-458  
SINGAPORE 643653



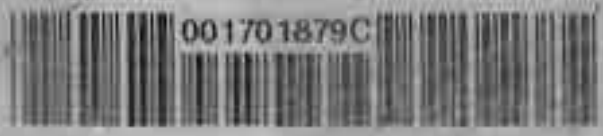


Driving License

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S7562523E  
Name: MANE RAJENDRA NATHAJI

Birth Date: 09 Nov 1975  
Issue Date: 24 Jan 2009

001701879C



Identification Card

