

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	11/01/2018 17:33
Date Of Accident	10/01/2018 23:55
Exact Location Of Accident	PIE EXIT TO BKE (L/P 1171S12)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJS1825L
Insured/Policyholder	
Name Of Registered Owner	BANERJEE PARAMESH
NRIC No	S2767763J
Email Address	PARAMESHB@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-97546814
Alternative Phone No	OFFICE-97546814

Vehicle Particulars

Manufacturer	HONDA
Model	CIVIC-1.8 VTI (A)
Exact Purpose for which vehicle was being used at time of accident	P/USED
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	VPA/P1407925
Cover Note Number	

Driver

Name of Driver	BANERJEE PARAMESH
NRIC No	S2767763J
Date Of Birth	21/02/1962
Occupation	INDOOR
Date Of Driving Pass	09/04/2010
Driving Experience	7 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97546814
Fax Number	
Contact Number	OFFICE-97546814
Email Address	PARAMESHB@HOTMAIL.COM

Address	73 CHOA CHU KANG LOOP #11-10
Postcode	S689674
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	COLLISION - HEAD TO REAR
Weather Conditions	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	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)	2
Passenger 1	NAME: : MRS.PARAMESH (WIFE)
	GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	CHOA CHU KANG NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 116 TECK WHYE LANE , POSTCODE: 680116 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7629999 - FAX NO: 67636615
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

NOT INQUIRY ME & MY WIFE

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	SJV3891R
Vehicle Make/Model/Colour	HONDA/CIVIC/WHITE
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	RAHIM
NRIC/Passport Number	S1675927I
Contact Number	
Address	
Postcode	

Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Vehicle No SJS1825L

SKETCH PLAN

Annex D

IMPORTANT NOTICE

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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:

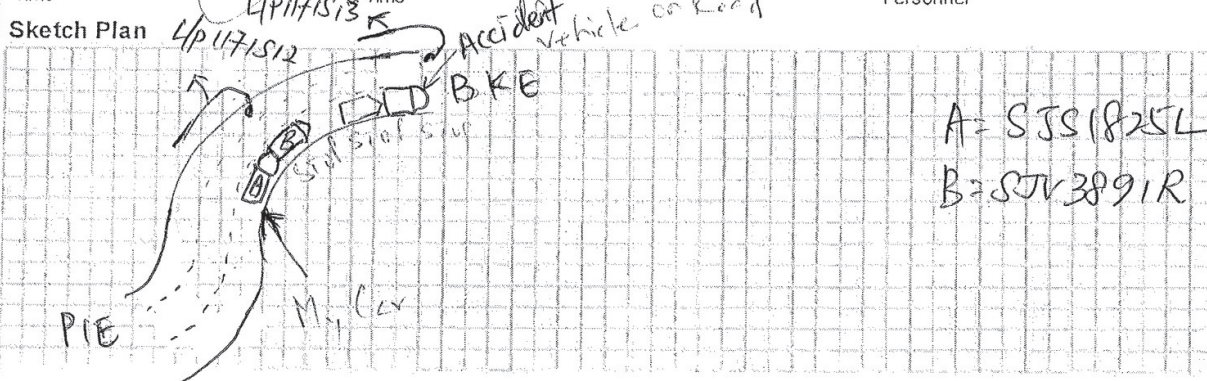
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
 - (ii) investigating the accident and/or my claims;
 - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;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

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

Witnessed by Reporting Centre Personnel

Sketch Plan



15:40pm Any
11 JAN 2018 ARY CHUA

A = SJS1825L
B = STV3891R

Please continue to Annex E

Vehicle No

STS 1825L

Annex E

Describe Circumstances of the Accident

On 10/01/2018, I had a collision of my car with another car on PIE → BKE exit, at 23-55 night. There has been raining whole day and road was wet. There was a accident vehicle already stranded on Right most lane on the slip road from PIE to BKE. The exit/slip road has a sharp bend. There were already two cars stationary on this bend, behind the accident vehicle. There was no warning sign on road. When I entered the PIE → BKE exit and started turning, all of a sudden found the stationary vehicle STV3891R car in front of me. I applied full break, and my vehicle has an ABS system which activated, but the stopping distance was not sufficient to avoid the collision. My car hit the rear bumper of the stationary car. There was damage to front of my car, and rear of the front car.

My self and driver of the STV3891R came out. There was another vehicle in front of STV3891R. The name of the driver of the STV3891R is Rahim. We exchanged phone number. There was no physical injury to him or to me. My wife was in my car. We departed after taking photos.

Next day (11/1/18) Mr. Rahim called me and informed that he has some pain and I should report to the Police. Police report was filed.

Refer to Police Report: T/20180111/2095

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

15:40pm ARY

11 JAN 2018 ARY CHUA



**SINGAPORE
POLICE FORCE**



T/20180111/2095

1 of 4

Police Station Of Origin:
Choa Chu Kang NPP
116 Teck Whye Lane #01-740 SINGAPORE
680116
Tel No: 1800-7629999

Report No. T/20180111/2095

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/01/2018 13:48	Vide Report No.:	Station Diary No.: 21
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Informant's Particulars

Name of Informant: BANERJEE PARAMESH			Address: 73 CHOA CHU KANG LOOP #11-10 SINGAPORE 689674		
ID Type / ID No.: NRIC NO / S2767763J			Contact No.: Home/Office: Mobile: 97546814		
Nationality: INDIAN			Email:		
Sex: Male	Age: 55	Date of Birth: 21/02/1962	Type of Informant: Driver		
Race: Indian			Language:		Institution / School Name:
Occupation: Company director			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 10/01/2018 23:55	Type of Location: Bend
Location: Along Road 1 Traveling Toward Road 2 PAN ISLAND EXPRESSWAY BUKIT TIMAH EXPRESSWAY PIE towards BKE Exit				
Weather: Drizzling		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJS1825L	Car				Slightly Damaged	1
SJV3891R	Car				Seriously Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
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T/20180111/2095

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680116
Tel No: 1800-7629999

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Report No. T/20180111/2095

CONTINUATION OF REPORT

Passenger			
Name	Prity Banerjee		ID No. NIL
Related Vehicle	SJS1825L (Car)		Contact No. 92435292
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	BANERJEE PARAMESH		ID No. S2767763J
Related Vehicle	SJS1825L (Car)		Contact No. 97546814
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	Rahim		ID No. NIL
Related Vehicle	SVJ3891R (Car)		Contact No. 96914303
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 the 10/01/2017 at about 2355hrs, I a collision with the vehicle SVJ3891R at the bend along PIE towards BKE Exit.. My vehicle SJS1825L from bumper had collided to the rear bumper of SVJ3891R. There was a major accident beforehand at the exit of BKE leading to heavy traffic jam. My accident occurred, as I unable to stop in time after spotting the vehicle SVJ3891R stationary waiting for the traffic to move. We both then came down to assess our vehicle, proceeded to exchange of numbers, and came to a agreement of settling the matter with individual insurance company At that period of time, no one was injure.

I would like to state that I am lodging the report as the owner of vehicle SVJ3891R texted me claiming that he had felt pain and will be visiting the doctor. My insurance company instructed me to lodge a police report. That is all.



**SINGAPORE
POLICE FORCE**



T/20180111/2095

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CONTINUATION OF REPORT