

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	08/01/2018 11:51
Date Of Accident	06/01/2018 11:05
Exact Location Of Accident	CTE TOWARDS AYE@MOOLMIN FLYOVER
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGM4102L
Insured/Policyholder	
Name Of Registered Owner	MAHADEVAN NATARAJAN
NRIC No	S6880414J
Email Address	MAHADEVAN_NATARAJAN@YAHOO.COM
Mobile Phone No	(LOCAL) +65-96759178
Alternative Phone No	OFFICE-94389625

Vehicle Particulars

Manufacturer	TOYOTA
Model	CAMRY-2.5 (A)

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? YES

If No, Please state action to be taken

Vehicle Category	PRIVATE CAR
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Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	VPA/P1916561
Cover Note Number	

Driver

Name of Driver	MAHADEVAN NATARAJAN
NRIC No	S6880414J
Date Of Birth	25/06/1968
Occupation	INDOOR
Date Of Driving Pass	05/08/2006
Driving Experience	11 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96759178
Fax Number	
Contact Number	OFFICE-94389625
Email Address	MAHADEVAN_NATARAJAN@YAHOO.COM

Address	803 UPPER SERANGOON ROAD #04-08
Postcode	534163
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	3
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)	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

PLEASE REFER TO SKETCH PLAN.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC5665M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	TAN SENG KHIAM
NRIC/Passport Number	S6911662J
Contact Number	81131479
Address	BLK 9 LOR 7 TOA PAYOH #08-309
Postcode	310009
Insurance Company Name	
Nature Of Damage	FRONT BONNET
No. Of Passenger (Including Driver)	2

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SKA351B
Vehicle Make/Model/Colour	TOYOTA

Details Of Properties	REAR BUMPER
Vehicle Category	PRIVATE CAR
Name of Driver	LOK KOK LUNG
NRIC/Passport Number	S1656547D
Contact Number	96748939
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

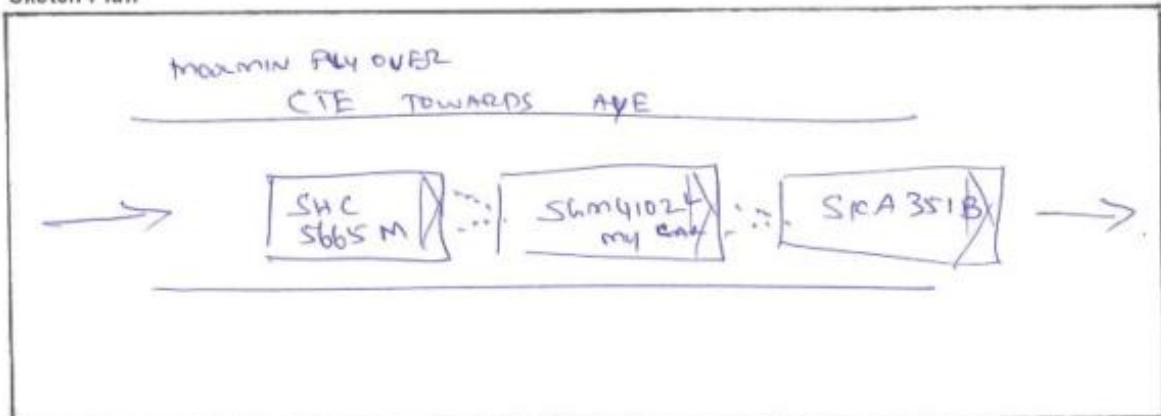
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**
I understand, 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.

N.M. 6/1/18
Policyholder's Signature / Date & Time

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

[Signature]
Witnessed by Reporting Centre Personnel

Sketch Plan



Accident Sketch Plan

Describe Circumstances of the Accident

I was driving in L/E towards A/E. A vehicle before me (SKA 351B) had to apply Sudden break. So I applied Sudden break and stopped. But the taxi behind me could not stop and hit my car from back (SHC 565M). So my car was damaged at the back and got pushed to hit the car in front of me (SKA 351B).

Declaration

We declare the foregoing particulars are true in every respect.

N. N.

Policyholder's Signature / Date & Time

6/1/18

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

Signature

Witnessed by Reporting Centre Personnel

AXA INSURANCE PTE LTD
8 Shenton Way, #24-01
AXA Tower, Singapore 068811
Customer Service Centre #01-01
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
NEW BUSINESS
Original

POLICY INFORMATION		Policy No. : VPA/F1916561
Source	: (01) 14888 INCH-AXA RM(EP)	
Insured	: MAHADEVAN NATARAJAN	
Address	: 228 SIMKEI ST 4 #10-220 SINGAPORE 520228	
Business/Profession	: OTHER OCCUPATION Carrying on or engaged in the business or profession last declared and no other for the purpose of this insurance.	
Period of Insurance	: From 01/06/2017 To 31/05/2019 (Both Dates Inclusive)	
Any subsequent period for which the Insured shall pay and the Company shall agree to accept a renewal premium.		
PREMIUM		
Premium After 30.00%	: SGD 1,192.23	
NCD		
GST 7.00%	: SGD 83.46	
Annual Premium	: SGD 1,275.69	
Total Payable	: SGD 2,551.37	
RISK DETAILS THE MOTOR VEHICLE		
Type Of Cover	: Comprehensive	
Regn No.	: SGM4102L	
Type Of Use	: Private Car	
Make/Model	: TOYOTA CAMRY 2.5	
Year of Manufacture	: 2016	Seating Capacity (excl. Driver) : 05
Body Type	: SALOON	Engine C.C. : 2494
Engine No.	: 2ARU322776	Chassis No. : MR053AK5004011009
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		
Basic Own Damage Excess	: SGD 500.00	
Named Drivers		
1 MAHADEVAN NATARAJAN		
MEMORANDA, CLAUSES, WARRANTIES & ENDORSEMENTS		
Subject to the Memoranda, Clauses, Warranties & Endorsements attached hereto:		
BTR		
BTR - The supplementary clauses forms parts of the Schedule :		
COMPREHENSIVE		

Nric And Driving Licence

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S6880414J



Name
MAHADEVAN NATARAJAN
மகாதேவன் நடராஜன்

Race
INDIAN

Date of birth
25-06-1968

Sex
M

Country of birth
INDIA

4217517

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S6880414J

Name
MAHADEVAN NATARAJAN

Birth Date: 25 Jun 1968

Issue Date: 05 Aug 2006



4217517



NRIC No: S6880414J



Date of issue
12-05-2008

603 UPPER SERANGOON ROAD #04-08
SINGAPORE 534163

NRIC No: S6880414J Date: 27/10/2010 No: 6645933


YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(S)

PASS DATE
05 Aug 2006

Class 3A Motor cars without clutch pedals (Auto) <= 3000kg
with <= 7 passengers, exclusive of the driver; and
other motor vehicles without clutch pedals <= 2500kg

NP 425A

Licence No: S6880414J



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Accident Photo



Accident Photo



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Accident Scene Photo



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