

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 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	02/03/2018 17:25
Date Of Accident	01/03/2018 20:45
Exact Location Of Accident	BKE TWDS CITY AFTER MANDAI EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJG7686U
Insured/Policyholder	
Name Of Registered Owner	AVENGERS CAR RENTAL & MOTORING PTE. LTD.
Co Reg No	201735090Z
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-98329228

Vehicle Particulars

Manufacturer	TOYOTA
Model	VIOS E AUTO
Exact Purpose for which vehicle was being used at time of accident	WORK USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5096567346
Cover Note Number	-

Driver

Name of Driver	S THANALETCHIMI D/O V S MANIAM
NRIC No	S1849169I
Date Of Birth	18/11/1960
Occupation	OUTDOOR
Date Of Driving Pass	30/05/2013
Driving Experience	4 YEARS AND 9 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-82223309
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 454 FAJAR RD #15-602
Postcode	670454
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT BATOK NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 103 BUKIT BATOK CENTRAL , POSTCODE: 650103 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5639999 - FAX NO: 66655794
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

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	SGP7774L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

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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:

Attended

Driver's Signature
(if driver is not the policyholder)
Date & Time:

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

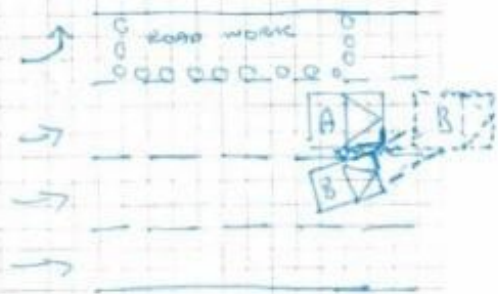
Accident Sketch Plan

SKETCH PLAN

BKE TOWARDS KJE / P12 BEFORE KJE EXIT

USMC2 A- SSG 76864

Vehicle B - SGF77746



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

AS per POLICE REPORT

REPORT NUMBER
T/20170302/2079

Vehicle A - SJG7686U

Vehicle B - SGP7774L

DECLARATION

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



Police Officer's Signature _____
Date & Time: _____

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

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

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180302/2079

1 of 3

Police Station Of Origin:
Bukit Batok NPP
103 Bukit Batok Central #01-00 SINGAPORE
650103
Tel No: 1800-5639999

Report No. T/20180302/2079

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 02/03/2018 14:25	Vide Report No.:	Station Diary No.: 27
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Informant's Particulars

Name of Informant: S THANALETCHIMI D/O V S MANIAM			Address: APT BLK 454 FAJAR ROAD #15-602 SINGAPORE 670454	
ID Type / ID No.: NRIC NO / S1849169I			Contact No.: Home/Office:	Mobile: 82223309
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Female	Age: 57	Date of Birth: 18/11/1960	Type of Informant: Driver	
Race: Indian			Language:	Institution / School Name:
Occupation: GRAB DRIVER			Driving Licence Information: Class:	Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 01/03/2018 20:45	Type of Location: Bend
Location: Along Road 1 BUKIT TIMAH EXPRESSWAY				
BKE towards City after Mandai Exit				
Weather: Clear	Road Surface: Dry		Road Speed Limit:	
Traffic Flow: Dual Carriage Way	Traffic Control: Not Controlled		Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGP7774L	Car					0
SJG7686U	Car	TOYOTA		Blue	Slightly Damaged	0

Details of Person Involved

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

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20180302/2079

2 of 3

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Bukit Batok NPP
103 Bukit Batok Central #01-00 SINGAPORE
650103
Tel No: 1800-5639999

Report No. T/20180302/2079

CONTINUATION OF REPORT

Driver				
Name	S THANALETCHIMI D/O V S MANIAM		ID No.	S1849169I
Related Vehicle	SJG7686U (Car)		Contact No.	82223309
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 01/03/2018, I was driving my blue Toyota, SJG7686U along BKE towards city, after Mandai Exit. There was some washing being done on the extreme left lane. I was on the lane just beside that. I did not make any change of lane, I was proceeding straight when suddenly, a car, side swipe the front of my vehicle. I honked at the vehicle however, the driver did not stop. I followed the vehicle and managed to capture the plate number as follow: SGP7774L, a black color car.

The driver had proceeded to exit towards Kranji. I did not follow the driver. Later on, I checked my vehicle and saw there are some scratches and dent on the front right side of the vehicle. I am not injured.

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20180302/2079

3 of 3

Police Station Of Origin:
Bukit Batok NPP
103 Bukit Batok Central #01-00 SINGAPORE
650103
Tel No: 1800-5639999

Report No. T/20180302/2079

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 MUHAMMAD AMIRUL HASIF BIN
MOHAMED YUNOS

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / HRT /
SI KALESWARI PALANI
Contact No.: 65476902



Authentication Stamp

SN 114

Signature Of Informant:

ethaniel

Date/Time:
02/03/2018 14:25

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

