

## 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	07/03/2018 17:50
Date Of Accident	07/03/2018 15:15
Exact Location Of Accident	JLN KUKOH ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGC74M
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### Insured/Policyholder

Name Of Registered Owner	RASAPPAN S/O KARUPPA GOUNDAR
NRIC No	S0139014G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98364611
Alternative Phone No	Office-98364611

### Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 (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?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	0100596843
Cover Note Number	

### Driver

Name of Driver	RASAPPAN S/O KARUPPA GOUNDAR
NRIC No	S0139014G
Date Of Birth	10/11/1943
Occupation	INDOOR
Date Of Driving Pass	03/07/1975
Driving Experience	42 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98364611
Fax Number	
Contact Number	OFFICE-98364611
EMail Address	NOEMAIL

Address	11A LORONG SARINA
Postcode	416674
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	
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	KIM SENG NEIGHBOURHOOD POLICE POST
Police Station Address	<b>ROAD:</b> 5 BEO CRESCENT , <b>POSTCODE:</b> 169981 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-2718999 - <b>FAX NO:</b> 63772527
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

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	SLJ8494K
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)	

## Sketch Plan

### SKETCH PLAN

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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.
- (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.

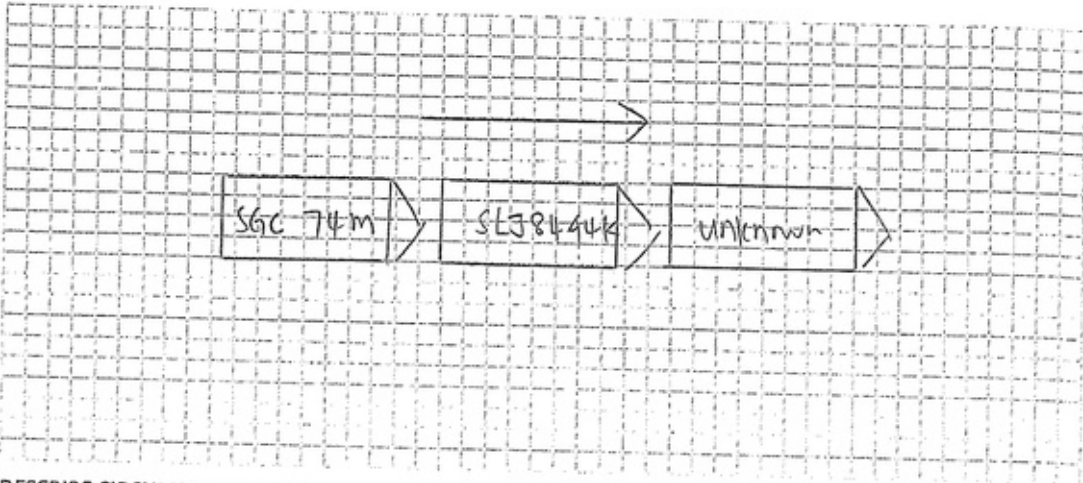


Policyholder's Signature  
Date & Time:

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

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

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

LICENSE PLATE: SGC 74M	ACCIDENT DATE & TIME: 7/3/18, 1515hrs
CONTACT NUMBER: 98364611	E-MAIL ADDRESS:
LOCATION: Jin Kuloh Road	
<p>When I was driving along Jin Kuloh Road,</p> <p>vehicle SLJ8494K in front brake suddenly, I</p> <p>could not stop in time and hit the rear of vehicle</p> <p>SLJ8494K. The vehicle (SLK8494K) then hit</p> <p>another vehicle in front but I do not know</p> <p>the vehicle number -</p>	
<p>NOTE: PLEASE NOTE THAT YOUR INSURER MAY HAVE 14 DAYS TIME FRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE CHECK YOUR POLICY FOR MORE INFORMATION</p>	
Please state:	
<input type="checkbox"/> Claim Own Policy	<input type="checkbox"/> Claim Third Party <input checked="" type="checkbox"/> Claim OD/TP at other workshop <input checked="" type="checkbox"/> Reporting Only

## DECLARATION

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

<p><i>rtkandpoo</i></p> <p>Policyholder's Signature</p> <p>Date &amp; Time:</p> <p>4.3.18</p> <p><small>G:\EIRAC SketchPlanForm_V3</small></p>	<p>Driver's Signature</p> <p>(If driver is not the policyholder)</p> <p>Date &amp; Time:</p>	<p>Reporting Centre Personnel's Signature</p> <p>Name:</p> <p>NRIC/FIN No.:</p>
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CONFIDENTIAL

Annex E

NOTICE OF REPORTING

This is to confirm that Rasappan S/O Karuppa Goundar, NRIC/FIN S0139014G, has reported to the Police a non-injury traffic accident which occurred at Jln Kukoh Road on 07/03/2018 at 1515hrs involving the following vehicles:

V1) SGC74M (Informant)  
V2) SLJ8494K

Facts:

On the abovementioned date at the abovementioned time, I was driving along Jln KuKoh Road on the left lane. The vehicle (SLJ8494K) in front of me suddenly braked and I could not react in time.

We both got off our vehicle and inspected the damages. My vehicle (SGC74M) is slightly damaged and the other party rear bumper suffered a dent. The vehicle (SLJ8494K) then hit another vehicle in front but I do not know the vehicle number. No one was injured, No Police and ambulance attended to the incident.

We agreed to settle payment using insurance. I am lodging this for record purposes.

2 If this accident was reported to the Police within 24 hours of its occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: Sgt T150394 Tay Kah Jun

Date: 07/03/2018 Time: 1656 hrs

S/D Ref: 29

KIM SENG NEIGHBOURHOOD POLICE POST  
5 BEO CRESCENT  
SINGAPORE 161004

Police Post/Unit: Kim Seng NPP / Tanglin Police Division

Original - to be issued to informant  
Duplicate - to be submitted to Traffic Police

**REPUBLIC OF SINGAPORE DRIVING LICENCE**


Expiry Number: **S0139014G**

Name: **RASAPPAN S/O KARUPPA GOUNDAR**

Birth Date: **10 Nov 1943**

Issue Date: **13 May 2003**

000481838C



**REPUBLIC OF SINGAPORE**

IDENTITY CARD NO. **S0139014G**



Name: **RASAPPAN S/O KARUPPA GOUNDAR**

க இராசப்பன்

Race: **INDIAN**

Date of Birth: **10-11-1943** Sex: **M**

Country of Birth: **INDIA**

S0139014G

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

Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms

PASS DATE: **03 Jul 1975**

Licence No: **S0139014G**

NP 428A

2387874

NRIC No: **S0139014G**

Blood Group: **O-** Date of Issue: **15-09-1994**

**11A LORONG SARINA SINGAPORE 416874**

NRIC No: **S0139014G** Date: **17/03/2015**





# CERTIFICATE OF INSURANCE

## PRIVATE AUTO THIRD PARTY FIRE AND THEFT PRIVATE VEHICLE

Name of Policyholder : Rasappan S/o Karuppa Goundar  
 Period of Insurance : 05 Jan 2018 To 04 Jan 2019  
 Engine No. : 3ZZ-4537836  
 Chassis No. : MR053ZEC10-7109468

Vehicle No. : SGC74M  
 Policy No. : 0100596843-12  
 Endorsement No. :  
 Issued Date : 01 Dec 2017

### ABOUT THE COVER

Make/Model : TOYOTA COROLLA ALTIS 1.6  
 Engine Capacity/Tonnage : 1,598.00 CC Sum Insured : Market Value  
 Driver Restriction : NA Off Peak Car : No  
 First Year of Registration : 2006  
 Insuring with COE/PARF : Yes

#### Person or Classes of Persons Entitled to Drive\* :

a) The Policyholder  
 b) Any other person who is driving on the Policyholder's order or with his/her permission.  
 This Policy will indemnify the Policyholder or any authorised driver only if he/she meets the specified age condition.

Age Condition : All Age Condition

#### Limitation as to use\* :

Use only for social, domestic and pleasure purposes and for the Policyholder's business. This Policy does not cover use for hire or reward, driving tuition, driving test, racing, pace-making, reliability trial or speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with Motor Trade.

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

### EXCESS

Section 1  
 Fire - \$0 Theft - \$0

Section 2  
 Property Damage - \$0

Windscreen : NA

#### Named Driver and Excess (where applicable)

Rasappan S/o Karuppa Goundar, Kumaran R, Vanyapuri Muthulatchimi

### APPROVED REPORTING CENTRES/AUTHORISED REPAIRERS (FOR CLAIMS RELATED REPAIRS)

Approved Reporting Centres/ AIG Authorised Repairers (For claims related repairs)  
 Any accident repairs to the Vehicle can be carried out at the repairer of Your choice (unless specifically excluded by Us).  
 For Approved Reporting Centres/AIG Authorised Repairers, please contact our 24-hour accident emergency hotline at +65 6338 6200. Alternatively, you may refer to AIG website [www.aig.com.sg](http://www.aig.com.sg) or AIG SG Mobile App. Simply search and download "AIG SG" from iTunes or Google Play.

### IMPORTANT NOTES


Hire Purchase Company/Employer's Loan: The Hongkong and Shanghai Banking Corporation Ltd

We hereby certify that the policy to which this Certificate of Insurance relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap. 189), Part IV of the Road Transport Act, 1987 (Malaysia) and Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia).

0030210000

AIG ASIA PACIFIC INSURANCE P.L.  
 78 SHENTON WAY #07-16 AIG BUILDING  
 SINGAPORE 079120

Underwritten by AIG Asia Pacific Insurance Pte. Ltd.

  
 AIG Asia Pacific Insurance Pte. Ltd.  
 AUTHORISED REPRESENTATIVE

SSCMFY

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AIG Asia Pacific Insurance Pte. Ltd.

Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

