

## 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	26/03/2018 14:22
Date Of Accident	25/03/2018 13:45
Exact Location Of Accident	TESSENSOHN ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLB1743E
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### Insured/Policyholder

Name Of Registered Owner	JAYAKUMAR GANAPATHY
NRIC No	S2704938I
Email Address	JAY.GANAPATHY@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98388909
Alternative Phone No	Office-98388909

### Vehicle Particulars

Manufacturer	LEXUS
Model	ES300H-2.5 EXECUTIVE (A)
Exact Purpose for which vehicle was being used at time of accident	NORMAL USAGE
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100458285
Cover Note Number	

### Driver

Name of Driver	JAYAKUMAR GANAPATHY
NRIC No	S2704938I
Date Of Birth	31/05/1965
Occupation	INDOOR
Date Of Driving Pass	14/07/2003
Driving Experience	14 YEARS AND 8 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-98388909
Fax Number	
Contact Number	OFFICE-98388909
EEmail Address	JAY.GANAPATHY@GMAIL.COM
Address	329 RIVER VALLEY RD #17-02 YONG AN PARK
Postcode	238361
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	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?	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: : GEETA JAYAKUMAR Gender: : Female

#### 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 AS 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	SJK3481Z
Vehicle Make/Model/Colour	HYUNDAI
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LOH TSEE FOONG
NRIC/Passport Number	

Contact Number	93388584
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	SCRATCHES TO REAR DOOR
No. Of Passenger (Including Driver)	1

# Accident Sketch Plan

## SKETCH PLAN

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6. **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.

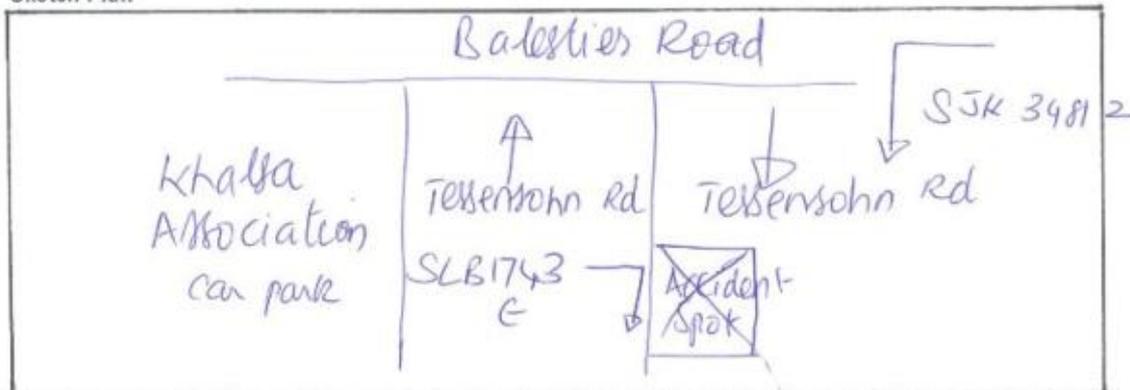
Layrum

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

### Sketch Plan



**Describe Circumstances of the Accident**

I was turning right from 2, Tessenlohn Road (Khalia Association) to the other side of Tessenlohn Road. I did look at both sides of the road and there were no cars. However, I looked to my left first & then right. SJK 34812 came in (ie turned left) from Badstien Road into Tessenlohn Road. I noticed the car (SJK 34812) just after I entered the Tessenlohn road (opposite side). But it was too late and I braked very hard. My car bumper hit the rear door (driver side) of SJK 34812.

There were scratches to both cars. In my car the scratches were to the bumper & for SJK 34812, scratches to the rear door.

There were no injuries since I was driving at a very low speed. There was no damage to any property.

I apologized to the driver of SJK 34812 since he had the right of way. However, I have to mention that the right turn from 2 Tessenlohn Road to the other side should not be allowed (this is a suggestion to LTA) since cars turn at a reasonably high speed from Badstien road into Tessenlohn Rd. And the driver turning right (especially when driving slowly) is unlikely to notice the cars coming into Tessenlohn Road from Badstien Rd until it is too late.

**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

**Accident Sketch Plan**



**MOTOR ACCIDENT INTERVIEW FORM**

NAME (DRIVER) : JAYAKUMAR GANAPATHY  
VEHICLE NUMBER : SLB 1743 E  
DATE/TIME OF ACCIDENT : 25 March, 1.45 PM  
PLACE OF ACCIDENT : Tessenlohn Road  
THIRD PARTY VEHICLE (IF ANY) : SJK 34812

\*\*\*\*\*

WHERE DID YOU START YOUR JOURNEY AND WHERE WAS THE INTENDED DESTINATION BEFORE THE ACCIDENT?

Started from car park of Khalsa Association, 2 Tessenlohn Road to 67, Tessenlohn Road.

DID YOU DRINK ANY ALCOHOLIC DRINKS BEFORE YOU DRIVE ON THE DAY OF THE ACCIDENT? IF YES, DID THE TRAFFIC POLICE CONDUCT ANY BREATHE-ANALYSER TEST ON YOU? IF YES, WHAT IS THE RESULT?

NO. Did not drink any ~~alcho~~ alcoholic drinks.

WHAT IS THE TYPE OF COLLISION AND THE EXTENSIVENESS OF THE DAMAGES TO ALL VEHICLES INVOLVED?

Minor scratches to both vehicles

WERE YOU OR YOUR PASSENGER/S INJURED? IF INJURED, WHICH HOSPITAL? WERE YOU TAKEN TO THE TRAFFIC POLICE FOR INVESTIGATION?

No injury to anyone.

Laypurn

Name: Jayakumar Ganapathy

I Affirmed The Above Information Is Given To My Best Knowledge.

AIG Asia Pacific Insurance Pte. Ltd.  
AIG Building 7B Shenton Way #07-16 Singapore 079120  
Tel: 6419 3000



HOTLINE TEL: (65) 6419 3000  
FAX: (65) 6415-3723

## CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT(CHAPTER 189)  
MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960  
ROAD TRANSPORT ACT, 1987 (MALAYSIA)  
MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1969 (MALAYSIA)

M.X.1

LEXUS AUTO PROTECTOR	<b>OWN DAMAGE EXCESS</b> S\$300.00 (1)
<b>CERTIFICATE NO.</b> 2100458285-01000	<b>WINDSCREEN EXCESS</b> S\$100.00 <small>(Windscreen excess is waived if the repair is done at Borneo Motor's Workshop.)</small>
	<b>SUM INSURED</b> Market Value
	<b>INSURING WITH COE/PARF</b> Yes
<b>1) VEHICLE REGISTRATION NO.</b>	SLB1743E
<b>2) NAME OF INSURED</b>	Jayakumar Ganapathy
<b>3) EFFECTIVE DATE OF THE COMMENCEMENT OF INSURANCE FOR THE PURPOSES OF THE ACT</b>	30 Mar 2017
<b>4) DATE OF EXPIRY OF INSURANCE</b>	29 Mar 2018
<b>5) PERSON OR CLASSES OF PERSONS ENTITLED TO DRIVE * SUBJECT TO AGE CONDITION :All Age Condition</b>	
<p>a) The Insured.</p> <p>b) Any other person who is driving on the Insured's order or with his permission. This policy will indemnify the insured or any authorised driver only if he/she meets the age conditions. A Young and/or Inexperienced Driver Excess ("YIDR") of S\$3,000.00, in addition to the Policy Excess, applies to You and any Authorised Driver (named or unnamed) if You are or the said Authorised Driver is below the age of 23 and/or has less than 2 years' driving experience.</p>	
<p>Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.</p>	
<b>6) LIMITATION AS TO USE *</b>	
<p>Use only for social, domestic and pleasure purposes and for the Insured's business. The Policy does not cover use for hire or rewards, tuition, driving test, racing, pitcramaking, reliability trial speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.</p>	
<p>APPROVED REPORTING CENTRES / LEXUS AUTHORISED REPAIRERS</p> <p>1. Borneo Motors (S) Pte Ltd - 2 Pandan Crescent (Tel: 6631 1388)</p> <p>APPROVED REPORTING CENTRES / AIG AUTHORISED REPAIRERS (FOR CLAIMS-RELATED REPAIRS)</p> <p>2. ComfortDelgro Engrg - 205 Braddell Rd (Tel: 63837118) 3. DPS Body &amp; Paint Workshop - 209 Pandan Gardens (Tel: 65684501)</p> <p>4. Ethoz - 30 Bukit Batok Cres (Tel: 66547777) 5. Glass-Fix - 52 Ubi Ave 3 (Tel: 62780887) - For windscreen only</p> <p>6. Kai Fook Sing Motor - 61 Defu Lane 12 (Tel: 67479560) 7. Lai Huat (Meng Kee) Motor - 21 Sin Ming Ind (Tel: 64538110)</p> <p>8. Mova Automotive - 1005 Bukit Merah Lane 3 (Tel: 62723892) 9. Progressive Automotive - 3022A Ubi Rd 1 (Tel: 67415336)</p> <p>10. SME Motor - 1 Kaki Bukit Ave 6 Blk D (Tel: 67476106)</p>	
<b>LOSS OF USE</b>	Loss of Use 15 Days (1800 - 2000cc) - Refer to policy wordings for details
<b>NAMED DRIVER</b>	NA
<b>HIRE PURCHASE COMPANY / EMPLOYER'S LOAN</b>	DBS BANK LTD
<p>* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.</p>	

I / We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Issued At Singapore 20 Feb 2017

AIG Asia Pacific Insurance Pte. Ltd.

030211-374  
INCHCAPE AUTO LEXUS - BSL050  
33 LENG KEE ROAD  
SINGAPORE 159102

AUTHORISED REPRESENTATIVE

ORIGINAL

8871AN

**REPUBLIC OF SINGAPORE DRIVING LICENCE**

Licence Number **S27049381**

Name  
**JAYAKUMAR GANAPATHY**

Born Date: **31 May 1965**  
Issue Date: **14 Jul 2003**

000652188F



**REPUBLIC OF SINGAPORE**  
IDENTITY CARD NO. **S27049381**

Name  
**JAYAKUMAR GANAPATHY**

Race  
**INDIAN**

Date of birth  
**31-05-1965**

Sex  
**M**

Country of birth  
**INDIA**

S27049381

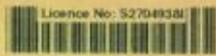



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

	PASS DATE
Class 2B Motorcycles not exceeding 200 cc	14 Jul 2003
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	14 Jul 2003

NP 426A

Licence No: S27049381



6617029

S27049381

6617029

DATE OF ISSUE  
**18-08-2010**

Address  
**BLK 329 RIVER VALLEY ROAD  
#17-02  
SINGAPORE 238361**





Accident Photo



Accident Photo



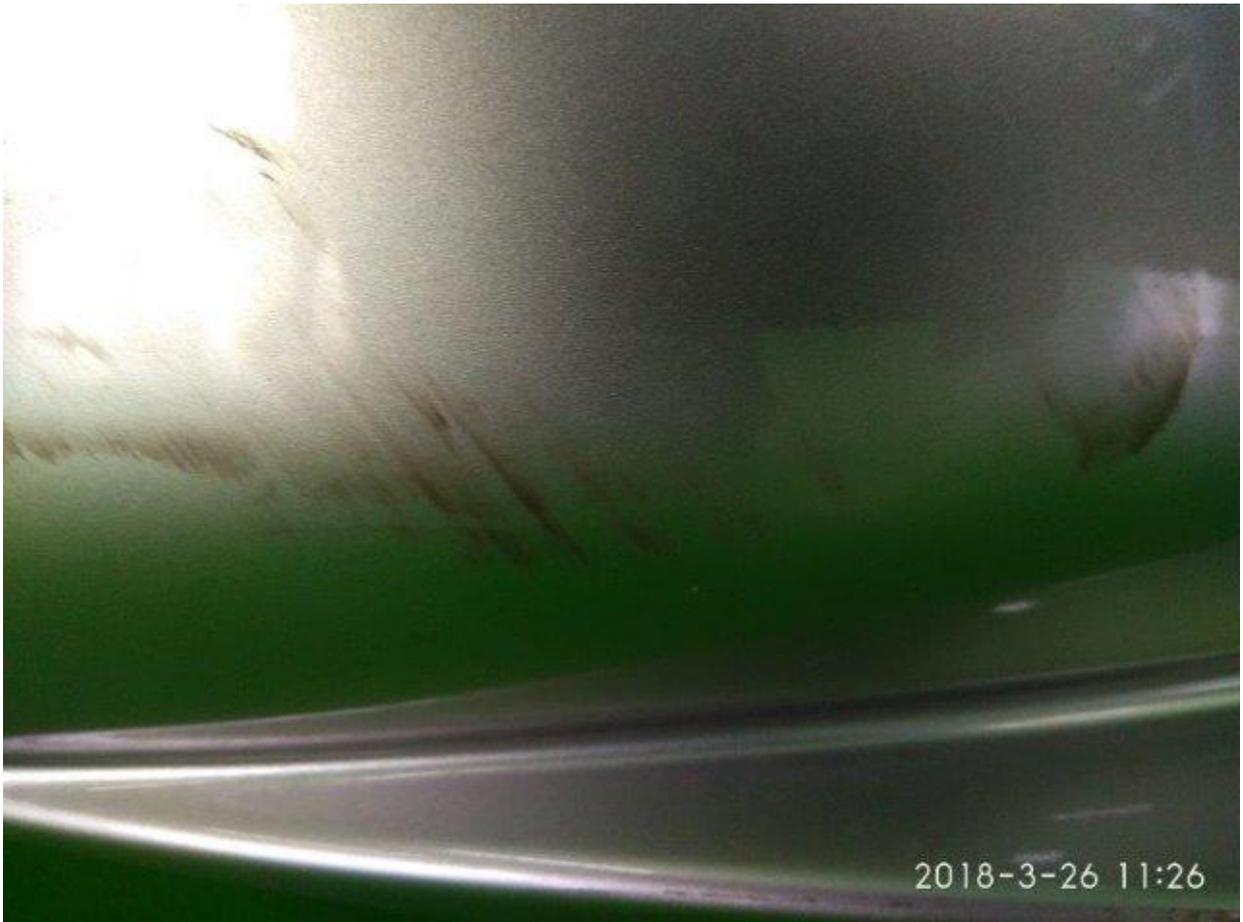
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Accident Photo



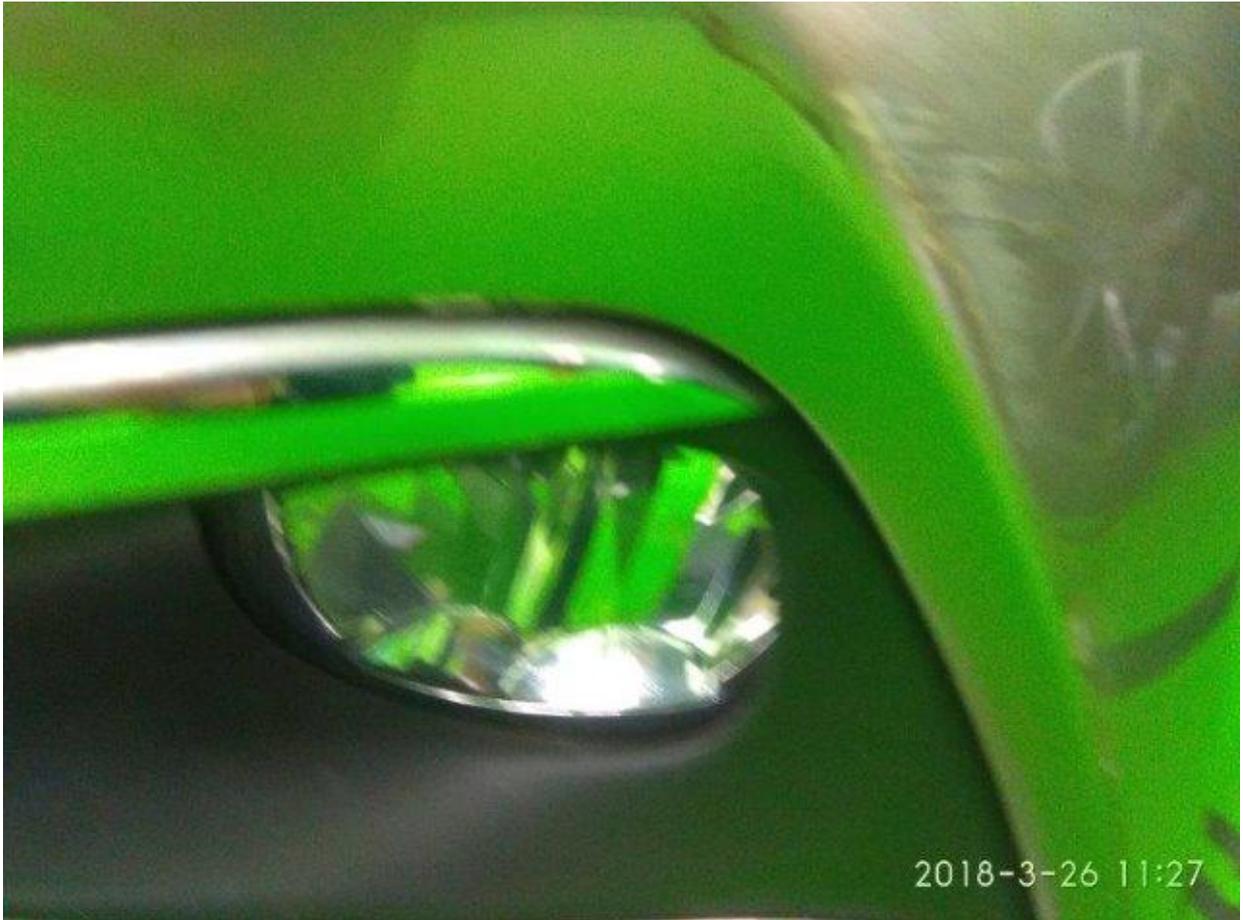
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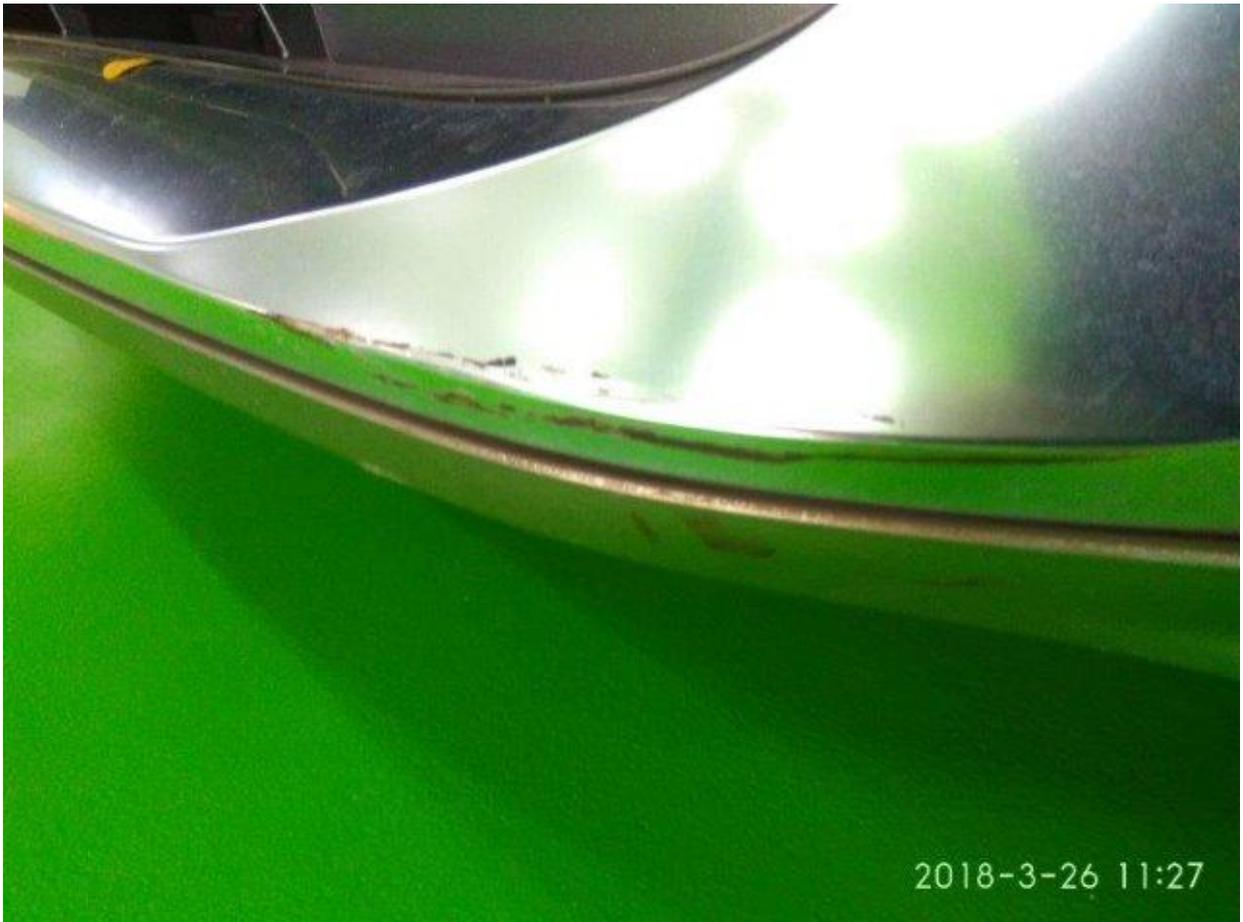
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