

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	25/04/2018 16:29
Date Of Accident	20/04/2018 21:00
Exact Location Of Accident	BLK 22A TEBAN GARDENS RD -MSCP LOT 34
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJU5324D
Insured/Policyholder	
Name Of Registered Owner	DAEVVI D/O THANABALU
NRIC No	S1342923E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93849271
Alternative Phone No	OTHERS-93849271

Vehicle Particulars

Manufacturer	KIA
Model	CERATO FORTE 1.6 AT SX ABS D/AB 2WD 4DR
Exact Purpose for which vehicle was being used at time of accident	PVT USE
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	LONPAC INSURANCE BHD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	Z16VP05012712
Cover Note Number	15/12/17-14/12/18

Driver

Name of Driver	SHAKTHEESHWARI D/O SILVARAJU
NRIC No	S8928965C
Date Of Birth	15/08/1989
Occupation	INDOOR
Date Of Driving Pass	20/02/2012
Driving Experience	6 YEARS AND 2 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-90607351
Fax Number	
Contact Number	
Email Address	SHAKTHEES@GMAIL.COM

Address	BLK 22 TEBAN GARDENS RD #26-141
Postcode	600022
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	NO 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	AYER RAJAH NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 43 TEBAN GARDENS ROAD , POSTCODE: 600043 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5659999 - FAX NO: 66655790
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER 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	SLR3817D
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

VEHICLE NO.: SJW 5324D
INSURER : LONPAC
DATE & TIME: 20/04/18 21-00 HRS

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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.

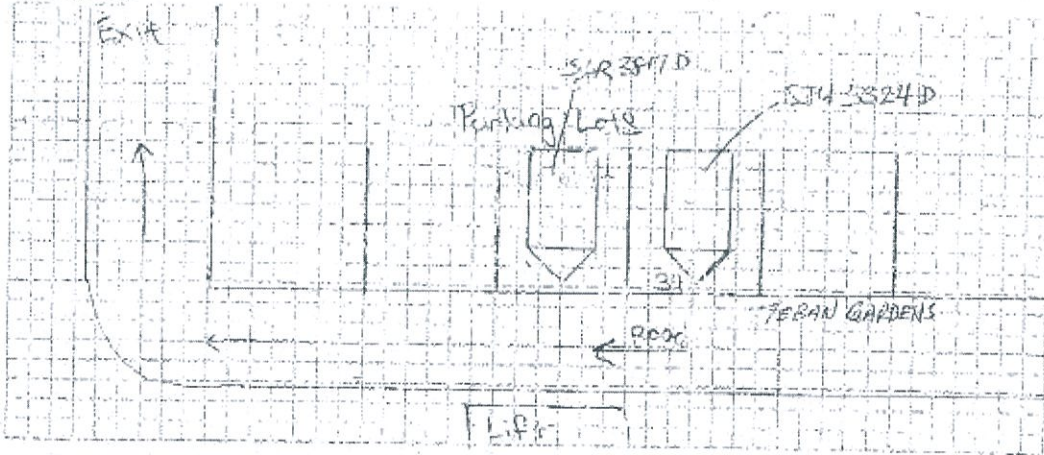
Policyholder's Signature
Date & Time:

25/4/18
Driver's Signature
(If driver is not the policyholder)
Date & Time:

25-4-18
Reporting Centre Personnel's Signature
Name: Sheela
NIC/FIN No.:

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ATTACHED TO POLICE REPORT

Note : Please note that your insurer may have 14days Time Frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check with your policy for more information

DECLARATION

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

Policyholder's Signature
Date & Time:

Emir 25/4/18
Driver's Signature
(if driver is not the policyholder)
Date & Time:

ell 25-4-18
Reporting Centre Personnel's Signature
Name: *Bladen*
NRIC/FIN No.:

Claim Type: ☐ Claim Own Policy ☐ Claim Third Party ☒ Reporting Only
☐ Claim OD/TP at other workshop ()

Sketch Plan #3



**SINGAPORE
POLICE FORCE**



T/20180423/2192

Police Station Of Origin:
Ayer Rajah NPP
43 Teban Gardens Road #01-38
SINGAPORE 600043
Tel No: 1800-6659999

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Report No. T/20180423/2192

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 23/04/2018 20:57		Video Report No.:		Station Diary No.: 50	
Name of Informant: SHAKTHEESHWAR S/O SILVARAJU		Address: APT BLK 22 TEBAN GARDENS ROAD #26-141 SINGAPORE 600022			
ID Type/ID No.: NRIC NO / S8826935C		Contact No.:		Mobile: 90607351	
Nationality: SINGAPORE CITIZEN		Email:			
Sex: Female	Age: 28	Date of Birth: 15/08/1989	Type of Informant: Driver		
Race: Indian		Language: English		Institution / School Name:	
Occupation: RESEARCH ASSISTANT		Driving Licence Information: Class: 3A		Date of Expiry:	

Type of Accident:	Non Injury Others	Drink Drive: No	Date/Time of Accident: 20/04/2018 21:00	Type of Location: Car Park
Location: Along Road 1 TEBAN GARDENS ROAD				
Blk 22A Teban Gardens Road Multi-storey carpark Lot 34				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume: No Traffic	
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

SJU5324D	Car	KIA	CERATO	Multi-Colored	Slightly Damaged	0
SLR3817D	Car	VOLKSWAGEN	SCIROCCO	Grey		0

SJU5324D	LONPAC INSURANCE BHD.					
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Sketch Plan #4



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Ayer Rajah NPP
43 Teban Gardens Road #01 363
SINGAPORE 600043
Tel No: 1800-5659999



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Report No. T/20180423/2102

CONTINUATION OF REPORT

Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Name	SHAKTHEESHWARI D/O SILVARAJU	ID No.	S8928965C
Related Vehicle	SJU5324D (Car)	Contact No.	90607351
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3A Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Name	AMOS	ID No.	NIL
Related Vehicle	SLR3817D (Car)	Contact No.	90483834
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 20 April 2018 at about 2100hrs, I had went to retrieve my vehicle, one silver blue in colour Kia Cerato Forte car bearing registration plate number SJU5324D at the multi-storey carpark of Blk 22A Teban Gardens Road, at lot number 34. My vehicle was parked at level 1 by my father initially. I then wanted to go out to Jurong West. I then wanted to exit the carpark towards Teban Gardens Road exit.

Subsequently, my dog which was sitting on the rear passenger seat was barking inside the car and I have no idea what was happening. There was one particular guy who was seen honking his vehicle on me as he wanted to take over my lot, assuming that I am about to exit the carpark with my car.

On the 23 April 2018 at about 1800hrs, my dad had finished his work and he drove his car back to our carpark located at Blk 22A Teban Gardens Road, on the level 1 area. A guy by the name of Amos, hp: 90483834 approached me and informed that our vehicle had hit onto his car which was in stationary position at the car park lot on the 20 April 2018 at about 2100hrs, and advised him to lodge a Police report. I wish to state that I was the one who drove the vehicle on that day and not my father.

I wish to state that I have no idea that I had hit onto his vehicle, however there are scratches on my front right side of my vehicle. I am unsure of the repair cost, and nobody was injured at that point of time as well. I wish to state that this is the first time such incident had happened to me. I have a video camera recording device installed in my vehicle, but it was not switched on when the accident happened.

Sketch Plan #5



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Ayer Rajah NPP
43 Teban Gardens Road #01-388
SINGAPORE 600043
Tel No: 1800-5859999



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Report No. T/20180423/2192

CONTINUATION OF REPORT

Sketch Plan #6



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Ayer Rajah NPP
43 Teban Gardens Road #01-388
SINGAPORE 600043
Tel No: 1800-5659399



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Report No. T/20180423/2192

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:
D/
Sgt 2 KOAK CHAN SIONG WILLIAM

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIA /
Staff Sgt TANG SIEW PING
Contact No : 65476430

Authentication Stamp

511-35

SIGNATURE

Signature Of Informant:

Date/Time:
23/04/2018 20:57

Classification Of Case:

Accident Photo



Accident Photo



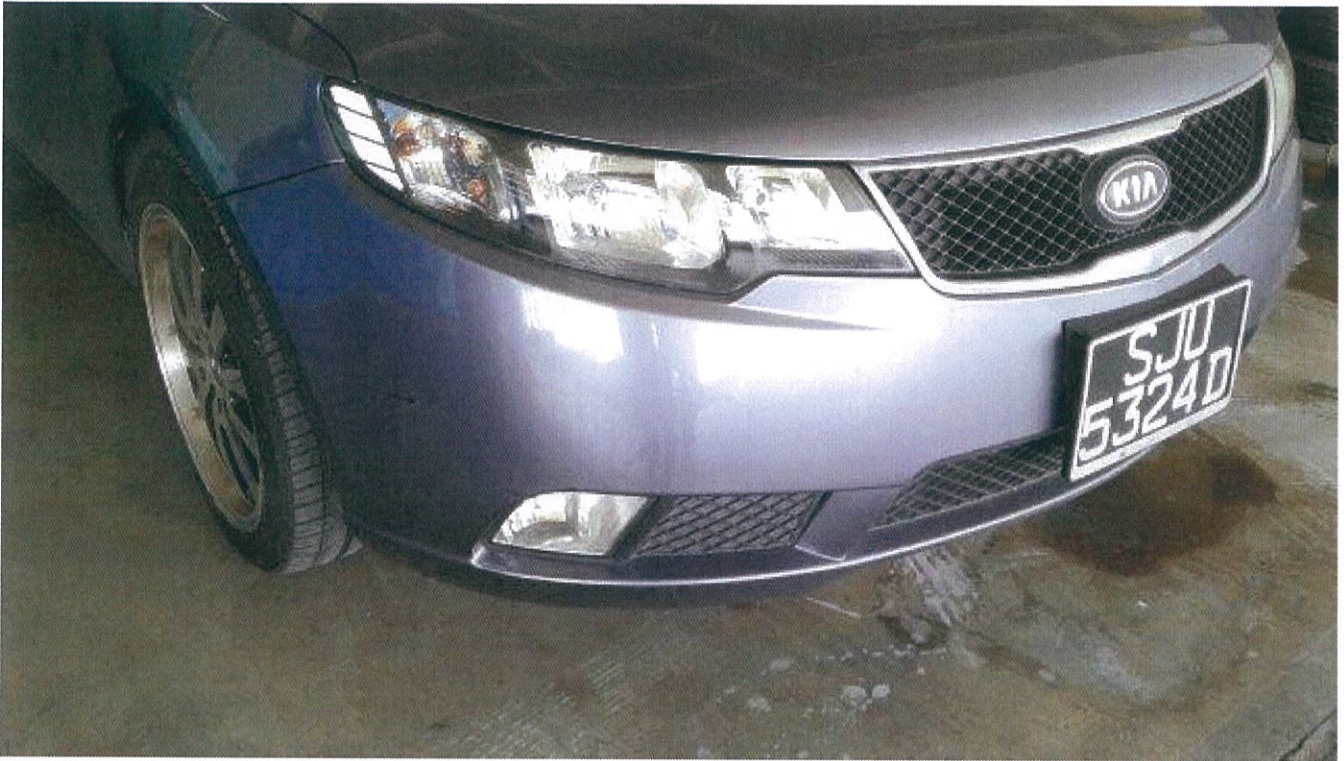
Accident Photo



Accident Photo



Accident Photo



Accident Photo

