

## 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	25/05/2018 15:48
Date Of Accident	23/04/2018 11:15
Exact Location Of Accident	NO 56 VEERASAMY ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC5712K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TRANS-CAB SERVICES PTE LTD
Co Reg No	200303878K
Email Address	CLAIMS@TRANSCAB.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-62866666

### Vehicle Particulars

Manufacturer	RENAULT
Model	LATITUDE-2.0 L (A)
Exact Purpose for which vehicle was being used at time of accident	HIRE AND REWARD
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	TAXI

### Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	VPX/P1680520
Cover Note Number	

### Driver

Name of Driver	SHRIEE GOPIKRISHNAN
NRIC No	S2662058I
Date Of Birth	22/06/1966
Occupation	OUTDOOR
Date Of Driving Pass	31/03/2000
Driving Experience	18 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94890695
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 580 HOUGANG AVE 4 #03-614
Postcode	530580
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	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?	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)	0

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	ANG MO KIO NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 51 ANG MO KIO AVE 9 , <b>POSTCODE:</b> 569784 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-4849999 - <b>FAX NO:</b> 62181399
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE SEE ATTACH POLICE REPORT : F/20180515/7019

#### 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	GBE5360C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	GOODS VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

**SKETCH PLAN**

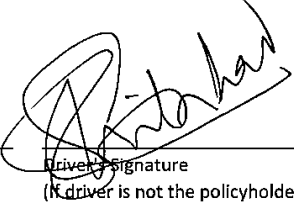
**IMPORTANT NOTICE**

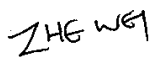
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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

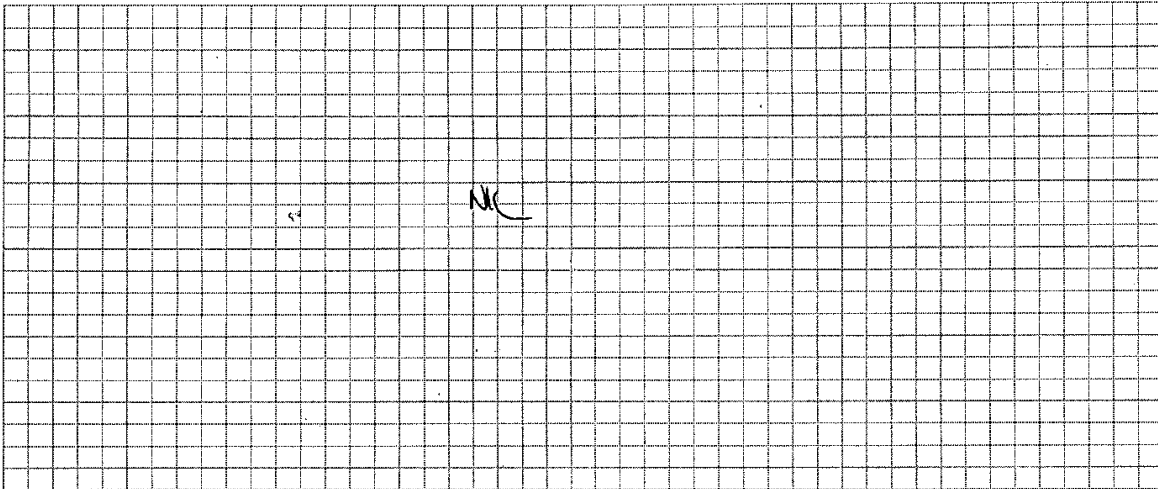
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:

  
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

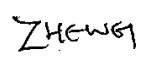
pls see attach police report

DECLARATION

I/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:

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



**SINGAPORE  
POLICE FORCE**



F/20180515/7019

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**POLICE REPORT (NP299)**

Report No. F/20180515/7019

Police Station Of Origin  
Ang Mo Kio Police Divisional HQ  
51 Ang Mo Kio Avenue 9 SINGAPORE  
569784  
Tel No:1800-2180000

Date/Time Report Made 15/05/2018 11:58	Vide Report No.	Station Diary No.
Name Of Informant SHRIEE GOPIKRISHNAN	Address APT BLK 580 HOUGANG AVENUE 4 #03-614 SINGAPORE 360021	
ID Type / ID No. NRIC NO / S2662058I	Contact No. Home/Office:	Mobile: 94890695
Nationality SINGAPORE CITIZEN	Email Address amitgik5@hotmail.com	
Occupation Taxi driver	Sex Male	Age 51
	Date of Birth 22/06/1966	Race Indian
Institution/School Name	Language English	
Date/Time Of Incident 23/04/2018 11:00 - 23/04/2018 11:30	Location Of Incident <del>APT BLK 580 HOUGANG AVENUE 4 #03-614</del> SINGAPORE 360021	

**Brief details.**

Dear officer,

No. 56 Leerasamy  
Road.  
Singapore  
51 Ang Mo Kio Ave 9  
Ang Mo Kio North

I, Shriee Gopikrishnan, bearing the IC No: S2662058I, taxi driver of the vehicle SHC 5712K, I did recieved a call from my company Transcab on the 10th of May 2018 at 17:40 pm to my shock that, there is a legal letter was received asking for the driver's particulars of an accident claim by counsel AC Syed &

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 15/05/2018 11:58
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp



**SINGAPORE  
POLICE FORCE**



F/20180515/7019

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20180515/7019

partners.

To my dismay was puzzled & shocked as there was no accident had happened on the said date 23rd of April 2018 around 11.15 am.

So far till date, I have not indulged in any accident, brushing, hit & run with any vehicle or did any one had confronted on the spot for any kind of negotiation as the complainant's claim against me.

No doubt, as per the GPS confirmation of my taxi company, I was there on Veerasamy road on the specified date for my early lunch, has I was happened to be there. Almost everyday my lunch is in a specific place 13, Veerasamy road & moreover, I am a prominent person almost well known there. I parked my vehicle at the parking lot No: 56 Veerasamy road around 11:05 to 11:11 as per the GPS tracking is right.

When I went into the restaurant, the dishes was not ready yet, hence I drove off to Syed Alwi road to run some errands and was back to Veerasamy road around 11:22 and have parked my vehicle until 12:15 in veerasamy road for my lunch. Meanwhile I assure & true to my knowledge, there was no accident involved with any vehicles on the road off veerasamy neither while it was been parked and removed from my parking space.

Probably the complainant would have noticed pre-existing damages in my vehicle, while I was at lunch would have come to an assumption in claim against my vehicle. The pre-existing damages was there much before I took the vehicle as my replacement. There is records & also pictures was taken by my

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Authentication Stamp



**SINGAPORE  
POLICE FORCE**



F/20180515/7019

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20180515/7019

Address	APT BLK 580 HOUGANG AVENUE 4 #03-614 SINGAPORE 360021	Mobile No	94890695
Is Informant A Victim?	Yes		
Person Name	SHRIEE GOPIKRISHNAN (Informant)		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 15/05/2018 11:58
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	





**SINGAPORE  
POLICE FORCE**



F/20180515/7019

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**POLICE REPORT (NP299)**

**CONTINUATION OF REPORT**

Report No. F/20180515/7019

company to check of any new accidental damages surfaced.

Well, as a taxi driver I am obligated my companies rules & regulations, that if any kind of accidents, confrontation, suspicious incident should have happened to be reported immediatly to avoid nonreporting access of 5K imposed on us. Hence, I suspect the complainant claim should be mistaken of identity or its an orgained fraudulent claim on concordet with the third party arrangements, as its very commonly happening in Singapore lately.

Well, based on my facts, true to my knowledge this report is lodged, my taxi co will forward the GPS routing of my vehicle from 11.00 am to 12.30 pm along with the claimant legal notice with my police report for the fair judgement.

Thanking you with regards,

Shriee Gopikrishnan.

Subjects Involved			
Victim			
Person Name	SHRIEE GOPIKRISHNAN		
ID Type	NRIC NO	ID No	S2662058I
Gender	Male	Age	51
Race	Indian	Language	English
Occupation	Taxi driver	Address Type	

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
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Authentication Stamp

Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo





RENAULT

VARIABLE 15AUC280313

2180 cc  
3600 rpm  
1 - 1  
2 - 10

1700  
L41  
TEND  
TL SING. COMP.  
VANS

CA74238  
SAR913 ECP XP  
SAR102 IMR913

Accident Photo



Accident Photo

