

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	01/08/2018 15:54
Date Of Accident	31/07/2018 11:15
Exact Location Of Accident	305 ALEXANDRA ROAD VISITOR'S CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGW4284S
Insured/Policyholder	
Name Of Registered Owner	NARAYANAN PRABHAKAR
NRIC No	S7075004Z
Email Address	VANPRABHS@YAHOO.COM
Mobile Phone No	(LOCAL) +65-94593820
Alternative Phone No	OTHERS-94593820

Vehicle Particulars

Manufacturer	HYUNDAI
Model	TRAJET
Exact Purpose for which vehicle was being used at time of accident	DRIVING TO WORK
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5101453208
Cover Note Number	

Driver

Name of Driver	RAGHAVAN VANDANA
NRIC No	S7276799C
Date Of Birth	24/09/1972
Occupation	INDOOR
Date Of Driving Pass	12/01/1998
Driving Experience	20 YEARS AND 6 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-94593820
Fax Number	
Contact Number	OTHERS-94593820
Email Address	VANPRABHS@YAHOO.COM

Address	BLK 123 MEYER ROAD #17-05
Postcode	437934
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
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?	YES
Foreign Vehicle Registration Number	ASNBRU1 (PRIVATE CAR)
Number of vehicles involved in the accident	2
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	QUEENSTOWN N.P.C
Police Station Address	ROAD: 3 QUEENSWAY #01-03 , POSTCODE: 149073 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4719999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN AND POLICE REPORT T/20180802/2152

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	ASNBRU1
Vehicle Make/Model/Colour	BMW 5 SERIES
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	EVE YAP
NRIC/Passport Number	
Contact Number	94577002
Address	
Postcode	
Insurance Company Name	

Nature Of Damage
No. Of Passenger (Including Driver)

Accident 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:

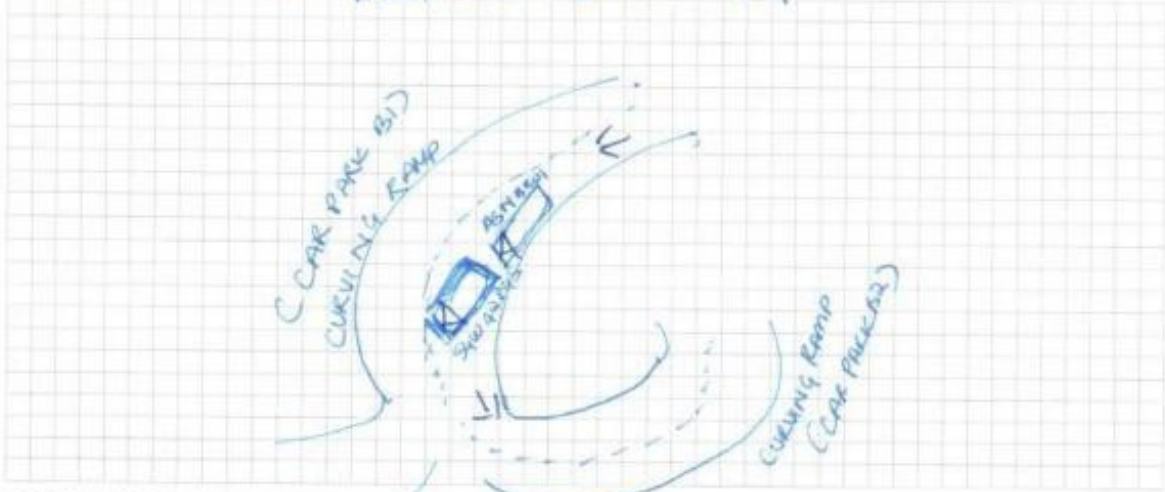

Driver's Signature
(If driver is not the policyholder)
Date & Time:


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

Accident Sketch Plan

SKETCH PLAN

305 ALEXANDRA ROAD MSCR



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

At 11:15am, I was driving into car park of 305, Alexandra Road. The Car park has 2 levels in basement with circular ramps. Entering into the car park on evening ramp, a car drove up the ramp to exit at slightly higher speed. Since my car is big + ramp is evening, I braked to allow the entry car to pass first.

When I braked, the car behind me, which was too close, bumped into the left back side back fender.

I bumped my head slightly on the seat head but was safe. I slowly drove down the ramp + parked in B1 to approach the driver + exchange details.

POLICE REPORT 7/20/18 0802/2152

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.:

GUARANTEE Sketch Plan Form V18

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180802/2152

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

1 of 3
Report No. T/20180802/2152

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 02/08/2018 19:38	Vide Report No.:	Station Diary No.: 106
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Informant's Particulars

Name of Informant: RAGHAVAN VANDANA		Address: APT BLK 123 MEYER ROAD #17-05 SINGAPORE 437934	
ID Type / ID No.: NRIC NO / S7276799C		Contact No.: Home/Office:	Mobile: 94593820
Nationality: INDIAN		Email:	
Sex: Female	Age: 45	Date of Birth: 24/09/1972	Type of Informant: Driver
Race: Indian	Language: English		Institution / School Name:
Occupation: CONSULTANT	Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 31/07/2018 11:15	Type of Location: Car Park
Location: Along Road 1 ALEXANDRA ROAD 305 Alexandra Road, Visitor's Car park				
Weather: Clear	Road Surface: Dry	Road Speed Limit:		
Traffic Flow: One Way	Traffic Control: Not Controlled	Traffic Volume: No Traffic		
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
ASNBRU1	Car				No Damage	1
SGW4284S	Car	HYUNDAI	TRAJET FL2.0	Black	Slightly Damaged	0

Details of Person Involved

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

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180802/2152

2 of 3

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

Report No. T/20180802/2152

CONTINUATION OF REPORT

Driver			
Name	RAGHAVAN VANDANA	ID No.	S7276799C
Related Vehicle	SGW4284S (Car)	Contact No.	94593820
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 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 above mentioned date, time and location. I was driving down a spiral ramp into the basement visitor's car park. When I was going down I had to stopped to allow the upcoming car to pass. Then I felt an impact from the rear. Another vehicle had hit the rear of my car. My car suffered a dent at the rear left bumper. The other party is a female Asian namely Eve (HP:94577002). We exchanged particulars and took pictures before leaving. The another car is a white BMW 530e.

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20180802/2152

3 of 3

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

Report No. T/20180802/2152

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 TIO JUN LONG

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / AEIT /
SI ANG YI TING, STEPHANIE
Contact No.: 65476414

SN 47

Authentication Stamp
NP168

Signature Of Informant:

Date/Time:
02/08/2018 19:38

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

