

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	05/09/2018 16:10
Date Of Accident	04/09/2018 22:05
Exact Location Of Accident	CTE EXPRESS WAY BEFORE ANG MO KIO AVE 3 EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJL6379L
Insured/Policyholder	
Name Of Registered Owner	PANCHATCHARAM RAMU
NRIC No	S6978055E
Email Address	VPCHARAMRAMU@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-91071354
Alternative Phone No	OFFICE-62935521

Vehicle Particulars

Manufacturer	NISSAN
Model	TEANA-2.0 CVT (A)
Exact Purpose for which vehicle was being used at time of accident	PTE USED
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
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	5072052286-03
Cover Note Number	

Driver

Name of Driver	PANCHATCHARAM RAMU
NRIC No	S6978055E
Date Of Birth	04/05/1969
Occupation	INDOOR
Date Of Driving Pass	12/07/1995
Driving Experience	23 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	+65-91071354
Fax Number	
Contact Number	OFFICE-62935521
E Mail Address	VPCHARAMRAMU@YAHOO.COM.SG

Address	BLK 440B FERNSVALE LINK #09-169
Postcode	792440
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)	1

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 TO SKETCH PLAN

Attachment(s)

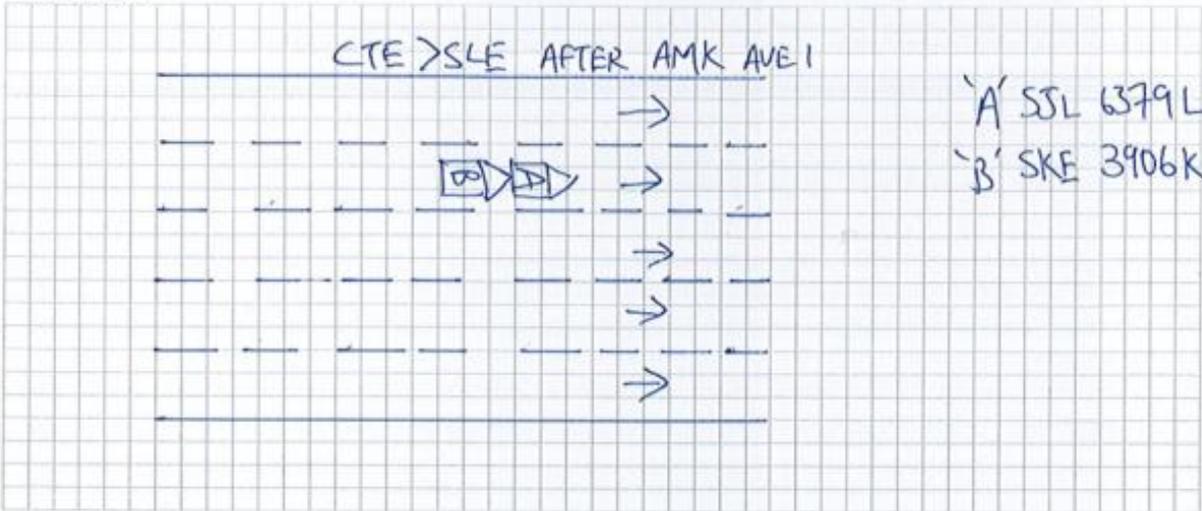
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKE3906K
Vehicle Make/Model/Colour	CITRON 1.6
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAN TAI CHIEW
NRIC/Passport Number	S0068982C
Contact Number	
Address	
Postcode	
Insurance Company Name	AXA INSURANCE PTE LTD
Nature Of Damage	FRONT PORTION
No. Of Passenger (Including Driver)	

Sketch Plan

SKETCH PLAN

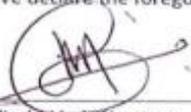


DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date and time I vehicle 'A' was travelling on the stated venue. The traffic was moving slowly, suddenly, I felt an impact on my rear. Then I realised vehicle 'B' had collided to my rear, causing damage to it.

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:

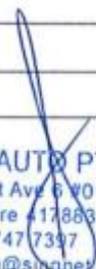
LEE SHENG AUTO PTE LTD

1, Kaki Bukit Ave 6 #01-60

Singapore 417883

Tel: 6747 7397

Email: leesheng@singnet.com.sg


 Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Sketch Plan #2

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:

LEE SHENG AUTO PTE LTD

1, Kaki Bukit Ave 6 #01-60

Singapore 417883

Tel: 6747 7337

Email: leesheng@singnet.com.sg

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Driving License

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

Class	Vehicle Description	Effective Date
Class 2B	Motorcycles <= 200 cc	12 Jul 1995
Class 3	Motor Cars <= 3000kg with <=7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg	12 Jul 1995

NP 426A

Licence No: S6978055E

REPUBLIC OF SINGAPORE DRIVING LICENCE

NRIC No: S6978055E

Name: PANCHATCHARAM RAMU

Birth Date: 04 May 1969

Issue Date: 18 Nov 2015

002493376F

4104853

NRIC No: S6978055E

Date of issue: 03-01-2006

APT. BLK 440B FERRAVALE LINK #09-169
SINGAPORE 792440

NRIC No: S6978055E Date: 20/08/2015

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S6978055E

Name: PANCHATCHARAM RAMU

LI பிச்சா முத்து

Race: INDIAN

Date of birth: 04-05-1969 Sex: M

Country of birth: INDIA

Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 - 17:00
UEN: S66550020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : ML5M14115229 Vehicle Registration No: SJL6379L
Name(as shown in NRIC) : Panchatcharam Kanna NRIC/FIN/Passport No : S6978055F

(*Vehicle Driver / Vehicle Owner) (* Please delete as appropriate

Address : blk 440b Ferrale link Singapore 209-109 792440

Contact (Tel) : 91071354 Mobile No. : _____

Email Address : _____

Date of Accident : 4/9/18 Time of Accident : 22:05 pm

Place of Accident : CTE Express Way Befae A.N.K. Au 3 Exit

Insurance Company : N.T.U.C Insurance

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

I wish to inform that
Other vehicle NO is SKE 3906K.

Policyholder / Driver's Signature
Date:

LEE SHENG AUTO PTE LTD
1, Kaki Bukit Ave 6 #01-60
Singapore 417863
Tel: 67477397
Email: leesheng@singnet.com.sg
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:
Date: