

## 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	27/09/2018 17:43
Date Of Accident	27/09/2018 08:10
Exact Location Of Accident	PIE BEFORE EXIT 34 CORPORATION ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJB7411Y
<b>Insured/Policyholder</b>	
Name Of Registered Owner	NIRUBAMA MANIKANTAN
NRIC No	S2661228D
Email Address	NIRU_SAI@YAHOO.COM
Mobile Phone No	(LOCAL) +65-96664504
Alternative Phone No	OTHERS-90998099

### Vehicle Particulars

Manufacturer	TOYOTA
Model	VIOS J AUTO
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	AUTO & GENERAL INSURANCE (SINGAPORE) PTE. LIMITED.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	P10028040R00
Cover Note Number	18/11/2017 - 22/01/2019

### Driver

Name of Driver	NIRUBAMA MANIKANTAN
NRIC No	S2661228D
Date Of Birth	01/03/1965
Occupation	INDOOR
Date Of Driving Pass	01/11/1996
Driving Experience	21 YEARS AND 10 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-96664504
Fax Number	
Contact Number	OTHERS-90998099
Email Address	NIRU_SAI@YAHOO.COM

Address	BLK 796 YISHUN RING ROAD #03-3370
Postcode	760796
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	CHAIN 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?	YES
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

REFER TO THE ATTACHED SKETCH PLAN BY DRIVER.

#### Attachment(s)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHD9401B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	LAI POH CHUI
NRIC/Passport Number	S0122747E
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLU338Z
Vehicle Make/Model/Colour	

**Details Of Properties**

Vehicle Category	PRIVATE CAR
Name of Driver	ERIC ANG SONG LYE
NRIC/Passport Number	
Contact Number	97359098
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

**DETAILS OF OTHER VEHICLE PROPERTY 3**

Vehicle Registration Number	SKF7166Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	SOON YI YI
NRIC/Passport Number	
Contact Number	98294519
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

**DETAILS OF INJURED PERSON 1**

Name	NIRUBAMA MANIKANTAN
Approximate Age	
Injuries Sustain	REFER TO THE POLICE REPORT
Injured person in which vehicle?	SJB7411Y
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	
Address	
Postcode	

**SKETCH PLAN**

**IMPORTANT NOTICE**

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5. Any false reporting may be referred to the Police for investigation.
6. The 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 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)**

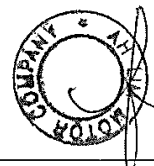
I understand, acknowledge, agree and consent that:

- (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:



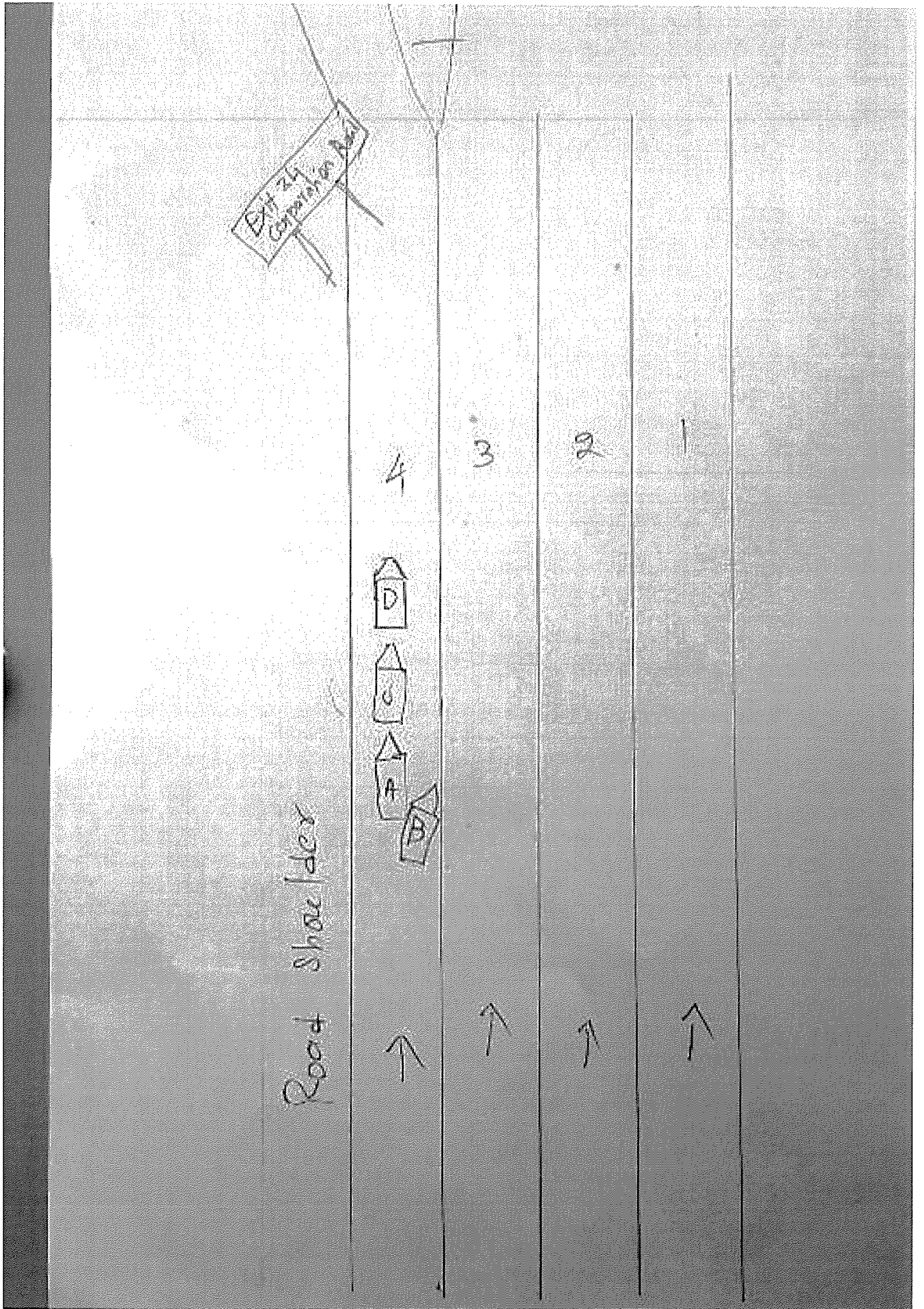
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

PIE before

### SKETCH PLAN

Refer to the attached list.

Refer to Police Report





**SINGAPORE  
POLICE FORCE**



T/20180928/7008

Police Station Of Origin:  
Traffic Police Division HQ  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

1 of 5

Report No. T/20180928/7008

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 28/09/2018 13:22		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: NIRUBAMA MANIKANTAN			Address: APT BLK 796 YISHUN RING ROAD #03-3370 SINGAPORE 760796		
ID Type / ID No.: NRIC NO / S2661228D			Contact No.: Home/Office: Mobile: 96664504		
Nationality: SINGAPORE CITIZEN			Email: niru_sai@yahoo.com		
Sex: Female	Age: 53	Date of Birth: 01/03/1965	Type of Informant: Driver		
Race: Indian			Language: English		Institution / School Name:
Occupation: Supply Chain Management Executive			Driving Licence Information: Class: 2B,3 Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 27/09/2018 08:10	Type of Location: Between exit 35 to 34 towards PIE Tuas:
Location:  PAN ISLAND EXPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 90 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Chain collusion				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
SHD9401B	Car	CHEVROLET		Red		0
SJB7411Y	Car	TOYOTA	VIOS+J+AU TO	White	Seriously Damaged	0
SKF7166Y	Car	VOLKSWAGON		Blue		0
SLU338Z	Car	MERCEDES BENZ	E200	Grey		1



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Report No. T/20180928/7008

**CONTINUATION OF REPORT**

<b>Details of Vehicle Insurance</b>				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJB7411Y	AUTO & GENERAL INSURANCE (SINGAPORE) PTE. LIMITED	P10028040R00	18/11/2017	22/01/2019

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	LAI POH CHUI		ID No.	S0122747E
Related Vehicle	SHD9401B (Car)		Contact No.	NIL
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
Driver				
Name	NIRUBAMA MANIKANTAN		ID No.	S2661228D
Related Vehicle	SJB7411Y (Car)		Contact No.	96664504
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL		Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	27/09/2018		Date Discharge	27/09/2018
No. of Days granted Medical Leave		03	Degree of Injury	Serious
Driver				
Name	Eric Ang Song Lye		ID No.	NIL
Related Vehicle	SLU338Z (Car)		Contact No.	97359098
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





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Report No. T/20180928/7008

**CONTINUATION OF REPORT**

Brief Details.

Brief: When my car was stationary, the taxi behind banged my car and hence,

- 1) there was an extensive damage to the rear right side of my car.
- 2) Rear right tyre got punctured also;
- 3) I am suffering from my body injury and neck pain. Rushed to Hospital.
- 4) The impact was extensive that my car moved forward and banged the another car in front.
- 5) At the accident scene, noted that front car moved a little further and hit another car. Hence, a collision of 4 cars.

Landmarks: Google Coordinates :1.359205, 103.712232  
Between PIE Exit 35 to 34 towards PIE Tuas (249, Jalan Boon Lay office). At the Lane 4  
Exactly under the LTA Traffic Information Display (TID)  
150 meters before the exit 34 Advance Directional Sign

The videos and pictures are enclosed.

Synopsis of the accident:

I was driving alone from my home to office on this familiarized route (for last one year plus) on 27/09/18 around 8.15 AM. The weather was clear and sunny. The traffic was moderate. I was driving in Lane 4 and preparing myself for the my exit 34. I stopped my car (SJB7411Y) (hereinafter called: Car A), due to stoppage of the cars ahead of me. (SLU338Z-Mercedes Benz- hereinafter called Car C).

A Red taxi (SHD9401B-hereinafter called Car B) was following my car A and was wobbling to the left extreme to the right of the lane, as though he was in a hurry. (as seen as per video footage). When my car came to a halt, this Taxi/Car B banged my car from behind at the right side of the car, as this taxi was seen partly in Lane 4 and Lane 3.

The impact was heavy and sudden that my car moved off to hit back of the Merz/car C in front. When I came out of my car, amidst my pain, I noticed Merz/Car C had also hit the another Car (SKF7166Y-Volkswagon-hereinafter called Car D).

Taxi (car B)driver admitted at the accident scene that it was his fault.

About the injury at the time of accident

- 1) Due to heavy impact, my chest hit the steering wheel.
- 2) My head hit the window.
- 3) Felt numbness in the left hand.
- 4) Felt stiffness and pain at my neck and shoulder.
- 5) Knee Joint: pain and scratches.
- 6) Heavy palpitation
- 7) Shivers on fingers.

My colleague, who was passing through this route, saw me in the accident spot and rendered a great help. She took me to Ng Teng Fong Hospital.



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T/20180928/7008

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Report No. T/20180928/7008

CONTINUATION OF REPORT



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T/20180928/7008

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Report No. T/20180928/7008

CONTINUATION OF REPORT

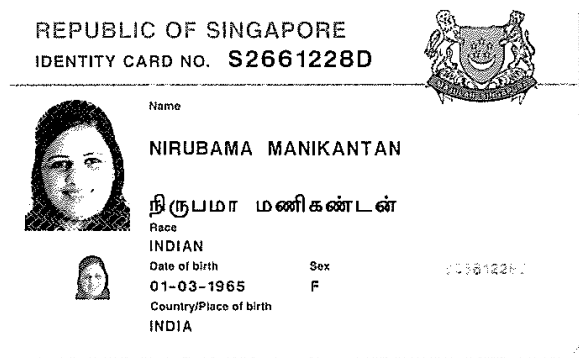
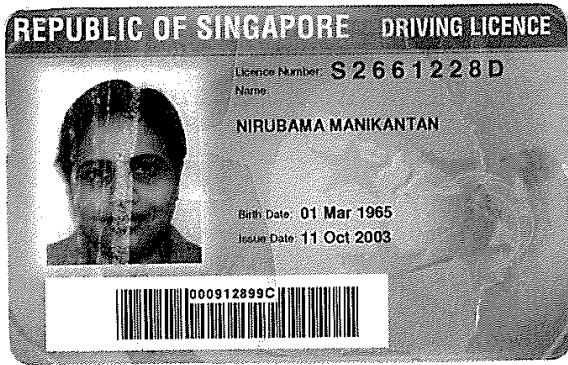
Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report: Not applicable
Signature Of Interpreter: Not applicable
Officer In Charge Of Case: TP / TPHQ / WONG SIEU LUI Contact No.: 65476151

Authentication Stamp  
NP168

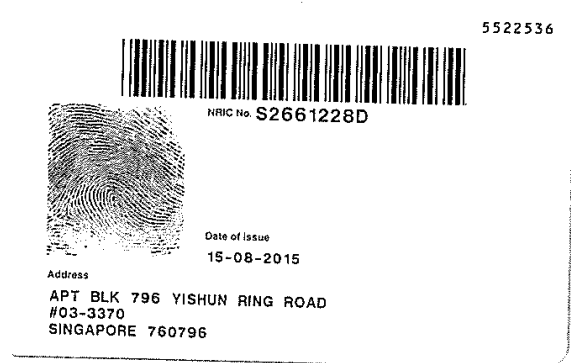
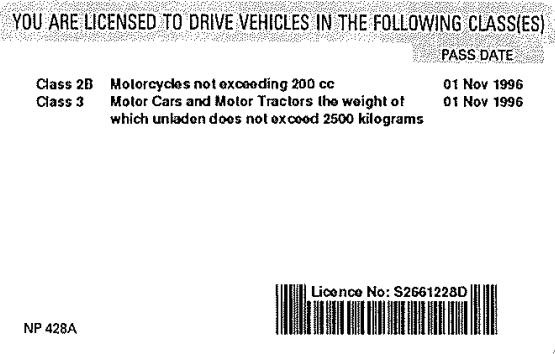
Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Date/Time: 28/09/2018 13:22
Classification Of Case:



Sp 2666 45'04 / 90298029

Email: niru\_sai@yahoo.com

srisudarshan@gmail.com



Dry

inj. to

Neck pain & whiplash

Car: No

Total: 1

**Budget  
Direct  
insurance**

## Certificate of Insurance

Comprehensive Car Policy  
Policy Number: P10028040R00

Motor Vehicles (Third-Party Risks And Compensation) Act (Chapter 189) (Republic of Singapore), Motor Vehicles (Third-Party Risks And Compensation) Rules, 1996 Edition (Republic of Singapore), Road Transport Act, 1987 (Malaysia), Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia) or any Amendment, Act or Acts passed in substitution thereof.

**Certificate Number P10028040R00 (Comprehensive / Named Driver Plan)**

1) Vehicle Registration Number	:	SJ87411Y
Chassis Number	:	-
2) Effective Date / Time of Commencement of Insurance for the Purpose of the Act	:	18/11/2017 (00:00)
3) Date / Time of Expiry of Insurance	:	22/01/2019 (23:59)
4) Excess (i) Policy	:	S\$ 600.00
(ii) Windscreen	:	S\$ 100.00
5) Policyholder	:	Nirubama Manikantan
6) Persons or Classes of Persons Entitled to Drive*		
Drivers named as a Main / Named Driver in this Certificate of Insurance only.		
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 any reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of accident or loss. Please refer to the Product Disclosure Document for full terms and conditions.		
Main Driver / Date of Birth	:	Nirubama Manikantan (01/03/1965)
Named Driver(s) / Date of Birth	:	None
7) Limitation as to use*		
Use only for social, domestic and pleasure purposes. The Policy does not cover use for hire or reward, tuition or driving tests, racing, pace-making, reliability trials, speed-testing or 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.		
* 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.		
8) Finance Company	:	Malayan Banking Berhad

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) or any Amendment, Act or Acts passed in substitution thereof.

Issued in Singapore on  
19/07/2018

**Auto & General Insurance (Singapore) Pte. Limited**  
Trading as Budget Direct Insurance



Simon Birch

Auto & General Insurance (Singapore) Pte. Limited (Co. Reg. No. 201626103G), trading as **Budget Direct Insurance**  
190 Clemenceau Avenue, #03-01, Singapore Shopping Centre, Singapore 239924 Tel: 6221 2111 budgetdirect.com.sg

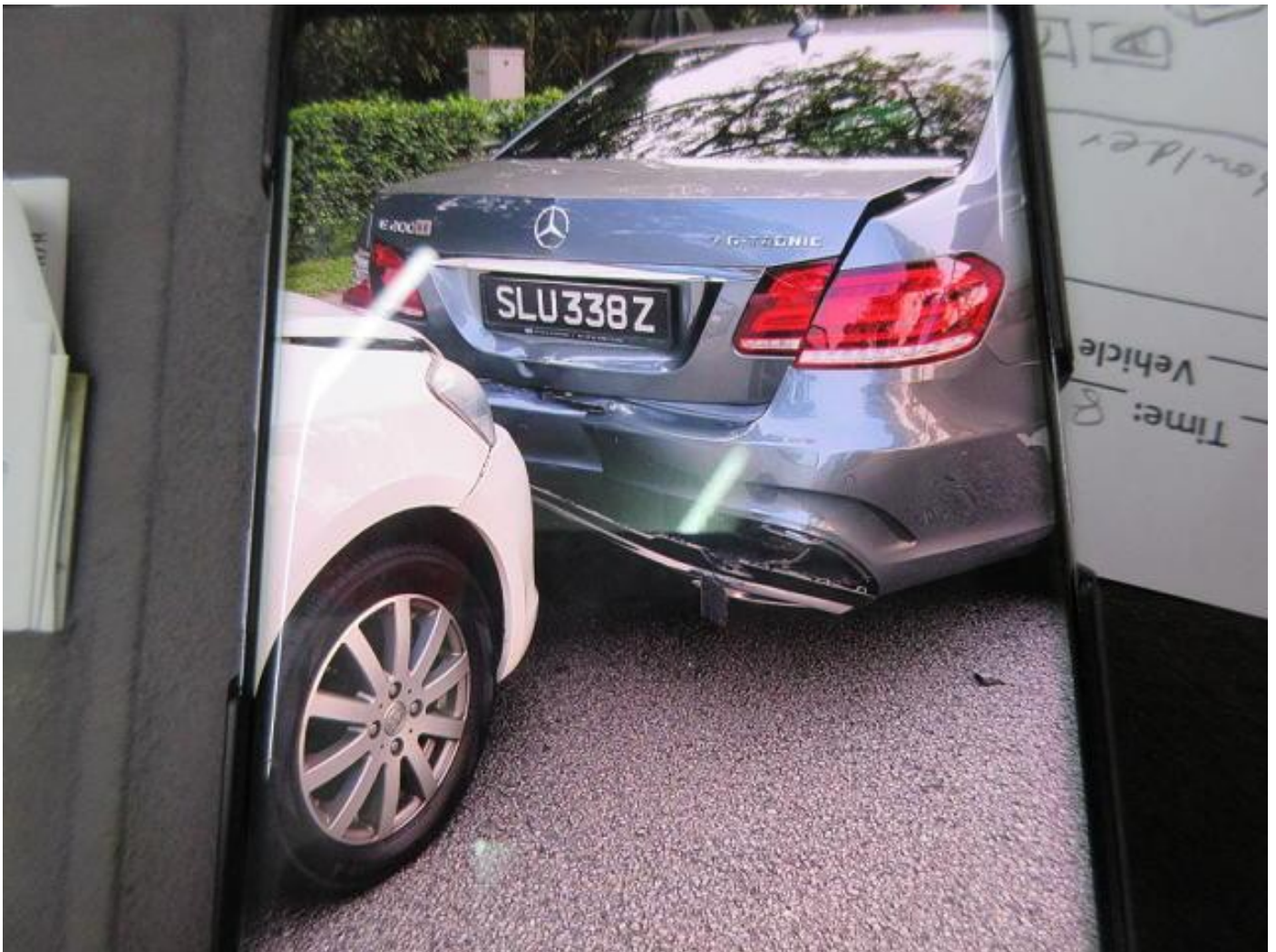
Accident Photo





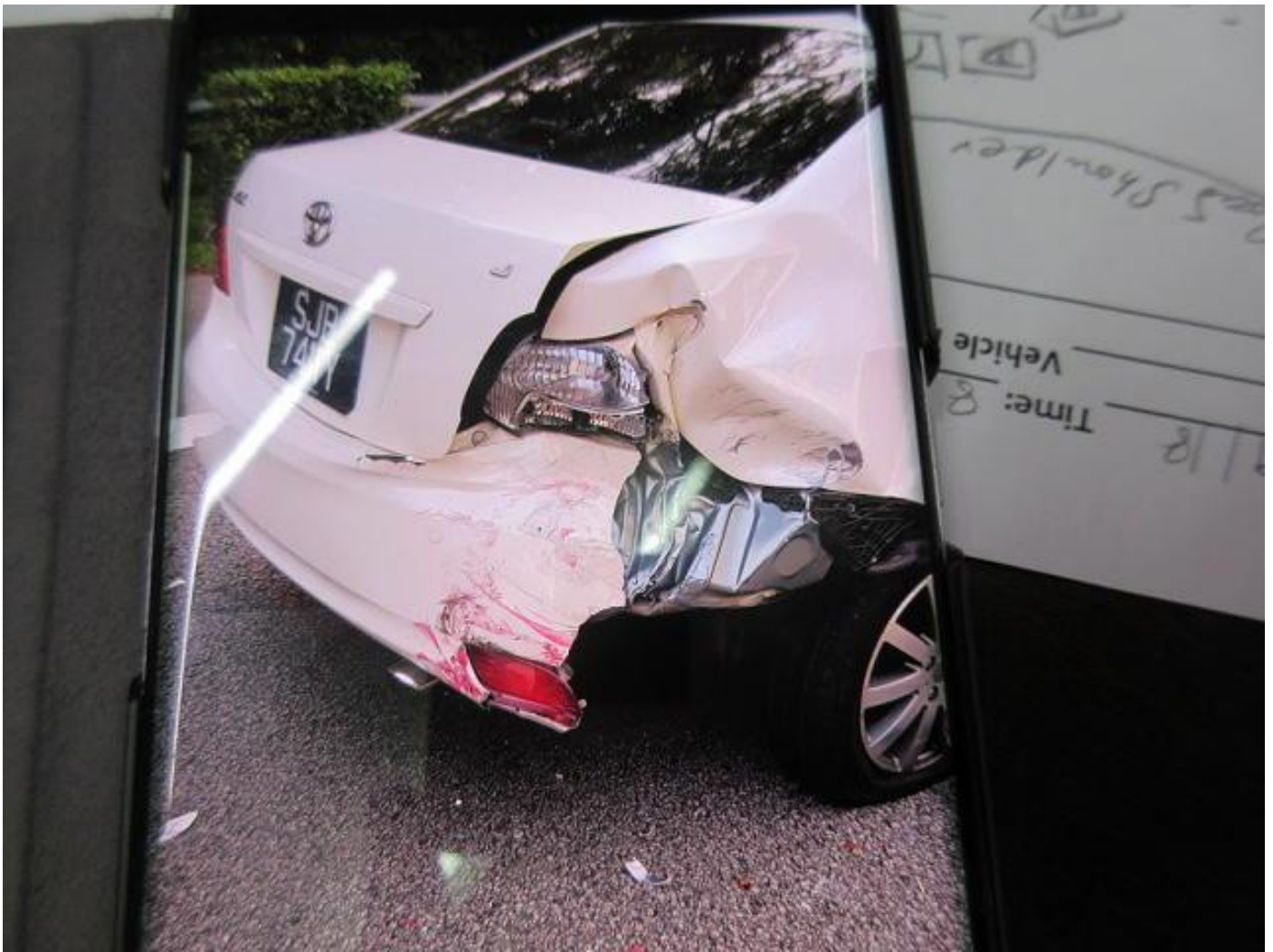


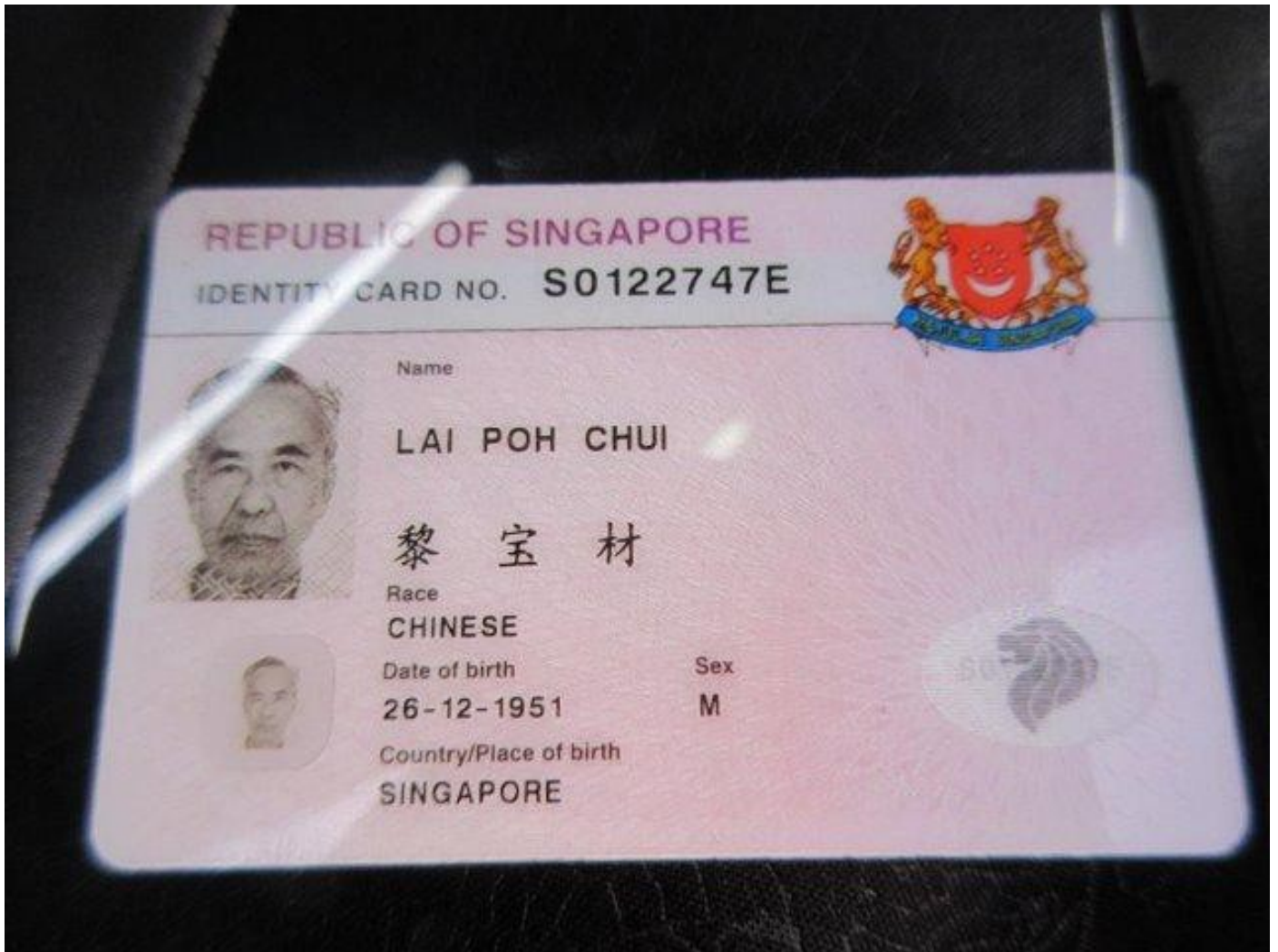
Accident Photo





Accident Photo



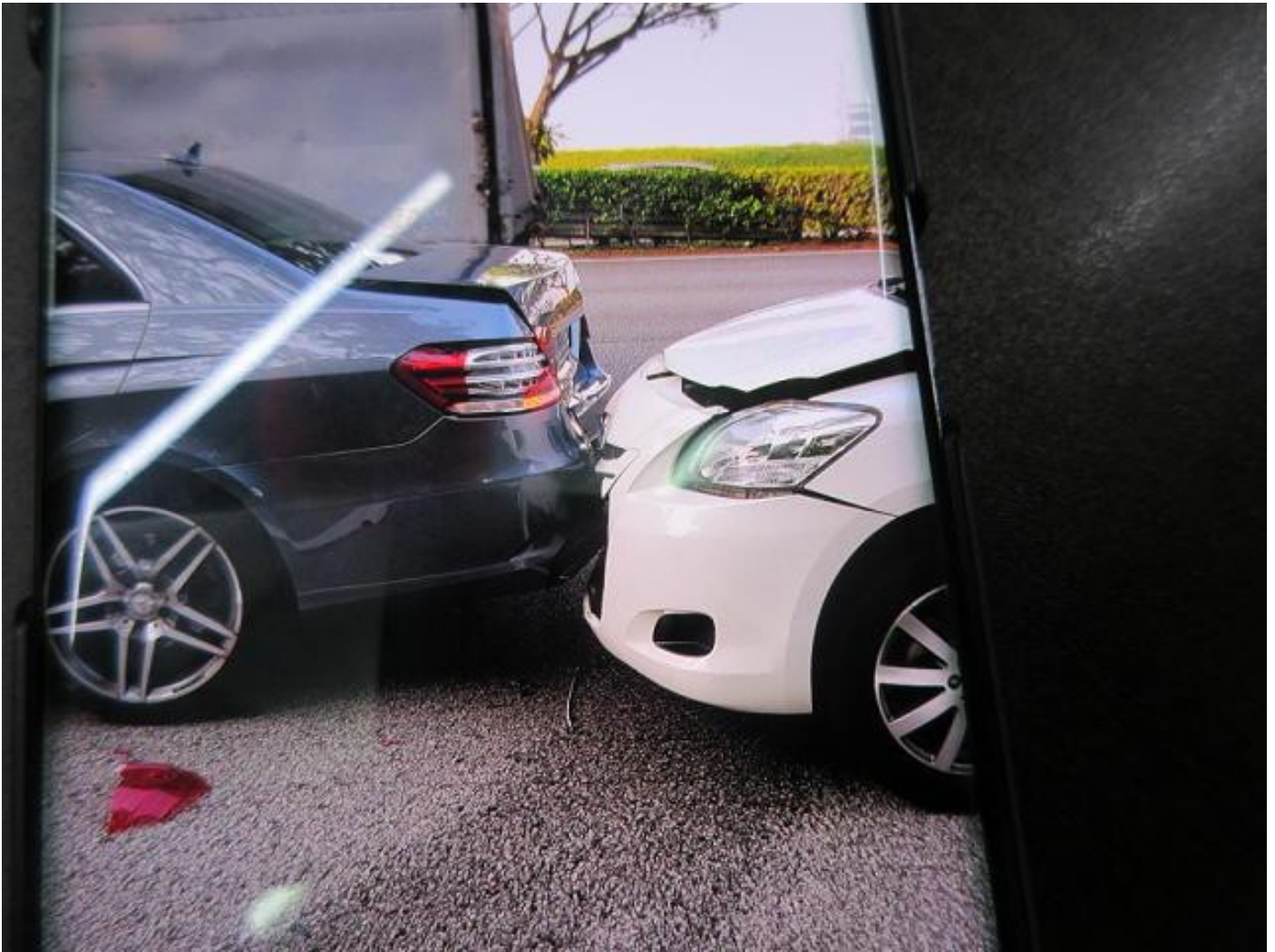


Accident Photo





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