

[wer 1 Jan'05] MNA11813393

Preferred Wksp / INC Assign Wksp / QW: (

General Remarks: _____
 () Walk-In Customer: Customer's information strictly Confidential & Strictly NO refer of repairer.
 () Total Loss Case : to e-mail Insurer URGENTLY.
 Drive-In () / Towed-In () ; Invoice: YES () / NO () ; Towing Co: ()
 Remarks: _____ (INC hotline: 6788 6616)
 1) Apply for Towing: _____

Injury :

NA1806587

Claimant's Particulars :-		Invoice Preparation Checklist		Am't (\$) In Bill	Am't (\$) Add Bill
Driver/Owner:		1) AR : Accident Reporting (\$30);			
Contact No:		2) DA : Damage Assessment (\$100); INC (\$80)			
Damaged Portion:		3) TF : Towing Fee			
		4) FT : Follow-Through Survey \$40/\$45			
		5) FT : Follow-Through Survey (Resurvey) \$30			
		For claiming against INC Only (wef 10 Jan 2005)			
		6) TR : Re-inspection \$75			
		7) N1 : Idac DA + SMRT Survey \$160			
QC Checked by (Engr-In-Charge):		8) NTUC Additional Services:-			
		QN*			
		*N5: Courtesy Car / Tpt Allowance \$5			
		*N6: Repair Co-ordination \$10			
		*N7: Post Repair Inspection \$25			
		*N8: DV / Collect Excess Coordination \$5			
		TP (N11) : TP (N-in INC) against INC \$20			
		9) N12: Idac Mobile 30			
Auditors Comments :-		Invoice dated	Fee Charged		
at 1:		Invoice dated	Fee Charged		
at 2 / 3:					

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 liability.
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	15/10/2018 16:44
Date Of Accident	13/10/2018 20:30
Exact Location Of Accident	PIE (CHANGI) BEFORE EUNOS FLYOVER
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJU9102B
Insured/Policyholder	
Name Of Registered Owner	AMEY SANJAY TELANG
Passport No/FIN	G5103206W
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81385842
Alternative Phone No	OFFICE-81385842

Vehicle Particulars

Manufacturer	NISSAN
Model	SYLPHY 1.5L 4AT ABS D/AB 2WD 4DR
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	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	MT/00536170
Cover Note Number	

Driver

Name of Driver	AMEY SANJAY TELANG
Passport No/FIN	G5103206W
Date Of Birth	28/06/1984
Occupation	INDOOR
Date Of Driving Pass	18/08/2014
Driving Experience	4 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-81385842
Fax Number	
Contact Number	OFFICE-81385842
Email Address	NOEMAIL

Address	50 FLORA DRIVE #07-06 PARC OLYMPIA CONDO
Postcode	506868
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	3
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)	3
Passenger 1	NAME: : - GENDER: : FEMALE
Passenger 2	NAME: : - GENDER: : FEMALE

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 STATEMENT.

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	SLW3675U
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)

1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SDW1151Y

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)

3

Passenger 1

NAME: :

GENDER: :

Passenger 2

NAME: :

GENDER: :

SKETCH PLAN

IMPORTANT NOTICE

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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. 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:

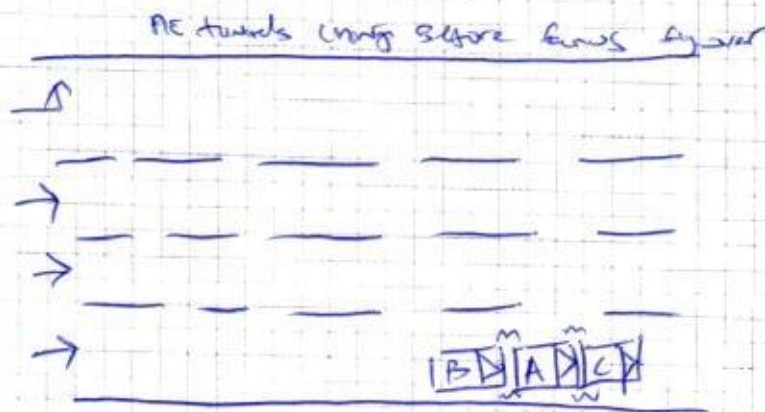
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving along PE towards Chang on the extreme right lane of a 4-lane, expressway. Somewhere before bus arrived, vehicles ahead of me slowed down and stopped. As such, I applied brake and stopped accordingly behind veh (C). Out of the sudden, veh (B) came from the rear and collided directly onto the rear portion of my vehicle. Upon the impact, my vehicle surged forward and collided onto veh (A).

A - SJL 9W2B

B - S2W 3L7S L

C - SDW 1151 y

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.:

Vehicle No.	SJH 9102B		Model / Make	NISSAN SYLPHY
Date of Accident	13/10/12			
Time of Accident	8.30 pm		HRS	
Location of Accident	PTE towards Changi before Eurostar			
Exact purpose use during accident	Pro club			
Name of Owner	Amey Sanjay Talyang			
Telephone No.	H/P: 81385842		Home :	85915348 Office :
NRIC	G5103206W			
Address	BLK 50, 07-06, Parc Olympica, Flora Drive, 506868			
Claim type	OD (THIRD PARTY) REPORTING ONLY			
Insurance Company	Direct Asia			
Type of Coverage	Comprehensive Third Party Third Party / Fire / Theft			
Policy No.	NT/0536170			
Name of Driver	As Above If No,			
NRIC				
Date of birth				
Occupation	Outdoor / Indoor			
Driving License Pass Date	18/8/14			
Gender	Male / Female			
Contact No.	H/P :		Home :	Office :
Address				
Driver have any own vehicle	No, If yes, Reg No.			
Relationship	Employee, If no, state			
Weather condition	Clear Raining Other			
Road Surface	Dry Wet Other			
Any Injuries	No, If Yes, Who?			
Name And Contact No.				
Name And Contact No.				
Police Report	No, If Yes, Where?			
Vehicle B No.	SLW 3675U		Any Passengers :	Nil
Name of Driver			Contact No. :	
Vehicle C No.	SDW 1151Y		Any Passengers :	02
Vehicle D No.			Any Passengers :	
Vehicle E no.			Any Passengers :	
Vehicle F No.			Any Passengers :	
Vehicle G No.			Any Passengers :	
Witness Name			Witness Contact :	
Accident Portion	Front & Rear			
Camera Recorder	Yes / No			
Email Address	ameyvnite@gmail.com			
HAVE YOU BEEN APPROACH BY UNKNOWN PERSON SOLICITING / OFFERING ACCIDENT CLAIMS ASSISTANCE?				
				Yes / No
PARTICULAR WORKSHOP	Garcia Auto			
CONTACT NO.	6842 0051 / 6744 0510			
CONTACT PERSON	Muthu			
FAX NO	6741 0510			
WORKSHOP EMAIL ADDRESS	sales@n51.com.sg			

EMPLOYMENT PASS
Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore

Employer:
BELL ID SINGAPORE PTE. LIMITED



Name:
AMEY SANJAY TELANG
Occupation:
TECHNICAL PROJECT MANAGER

FIN
G51D3206W

Date of Application:
30-03-2017
Date of Issue:
08-06-2017
Date of Expiry:
08-06-2019



L8 01 6660

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: **G5103206W**

Name:

AMEY SANJAY TELANG

Birth Date: **28 Jun 1984**

Issue Date: **11 Feb 2017**

Valid Till **17/08/2019**



002655581B

VISIT PASS
Immigration Regulations

Name:
AMEY SANJAY TELANG



Date of Birth: **28-06-1984** Sex: **M** Nationality: **INDIAN**
FIN: **G5103206W** Date of Issue: **08-06-2017** Date of Expiry: **08-06-2019**

MULTIPLE JOURNEY VISA ISSUED

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.



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

	EFFECTIVE DATE
Class 2B Motorcycles <= 200 cc	18 Aug 2014
Class 3 Motor cars with unladen weight <= 3000kg with <= 7 passengers, exclusive of driver; and other motor vehicles with unladen weight <= 2500kg	18 Aug 2014

NP 428A



Licence No: G5103206W

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act")
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore)
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

Certificate No.	: MT/00536170
Type of Coverage / Driver Plan	: Car Third-Party Only (Value Plan)
1) Vehicle Registration No.	: SJU9102B
Chassis No.	: JN1BAAG11Z0110426
2) Name of Policy Holder	: Amey Sanjay Telang
3) Effective Date / Time of Commencement of Insurance for the Purpose of the Act	: 21/09/2018 00:00
4) Date/Time of Expiry of Insurance	: 20/09/2019 23:59
5) Persons or Classes of Persons Entitled to Drive	
(a) Any person who is named on the policy who is driving on the Policyholder's permission.	
The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.	
6) Limitations as to use*	
Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business.	
*Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.	
Sum Insured	: Market Value
Own Damage Excess	: S\$ 0.00 (before any applicable GST)
Windscreen Excess	: Not Applicable (before any applicable GST)
Choice of workshop	: DirectAsia approved workshops
Finance company / Hire Purchase	:
Main driver	: Amey Sanjay Telang
Named driver	: None
Important Note: This policy is on a named driver basis. The Policyholder has to be named as the Main Driver or Named Driver to be covered. Any unnamed drivers will not be covered.	

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 the Road Transport Act, 1987 (Malaysia).

Issued on: 20/09/2018

Direct Asia Insurance (Singapore) Pte. Ltd.



Edip Okur
Chief Underwriting Officer