

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	12/11/2018 17:51
Date Of Accident	10/11/2018 14:35
Exact Location Of Accident	30 SENG POH ROAD TIONG BAHRU MARKET CARPARK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLW565Z
Insured/Policyholder	
Name Of Registered Owner	C & P RENT-A-CAR (PTE) LTD
Co Reg No	197900477H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-67366666

Vehicle Particulars

Manufacturer	MAZDA
Model	3-1.5 SEDAN EU6 (A)

Exact Purpose for which vehicle was being used at time of accident

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	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	SD18V01359/VPZ/R05
Cover Note Number	

Driver

Name of Driver	RAJVIND JUDE DHALIWAL
NRIC No	S8704171I
Date Of Birth	17/02/1987
Occupation	INDOOR
Date Of Driving Pass	28/10/2008
Driving Experience	10 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96389880
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 869A TAMOINES AVENUE 8 #15-508 SINGAPORE
Postcode	521869
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	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
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)	4
Passenger 1	NAME: : DANKER MELISA LEE GENDER: : FEMALE
Passenger 2	NAME: : CHAN OI HOE GENDER: : FEMALE
Passenger 3	NAME: : TAN OI MAY 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 ATTACHED 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	SJZ8021G
Vehicle Make/Model/Colour	VOLVO / NIL / NIL
Details Of Properties	RIGHT SIDE REAR PORTION
Vehicle Category	PRIVATE CAR
Name of Driver	LEE SOON GUAN
NRIC/Passport Number	S1365387I
Contact Number	91839305

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

2

Passenger 1

NAME: ; NIL

GENDER: ;

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 insurers 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.



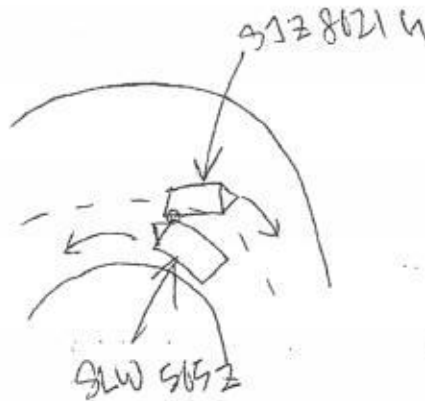
Policyholder's Signature
Date & Time

✓ RMD

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

COMFORTDELGRO ENGINEERING PTE LTD
EXTERNAL BUSINESS DIV. SINGAPORE BRANCH
NAME & SIGNATURE: *[Signature]* DATE: 12/4/18
DESIGNATION: *[Signature]*
Reporting Centre Personnel Signature
Name: **WONG CHIEE YUEI**
NRIC / Fin No: **67218099A**

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I had an accident with another car while exiting the carpark, an oncoming car hit into me. It was a Volvo number plate SJZ 8021 H, drove by Lee San Guan K number SLW 5052.

As I was exiting the carpark going down, as it is a spiral carpark so you have to go round downwards. A car was approaching upwards at a very fast speed, as I was at the utmost left of the carpark, I could not move any more out of the way if not I would hit the wall. So I slowed down to a stop and the incoming car who was out of his lane, tried to swerve out of the way, his front moved out but he couldn't completely avoid my car and his rear right side hit into the front left side of my car. Caused damage to my front light and body.

IMPORTANT NOTE

Under General Condition - Conduct of Claim of the Motor Policy, you have to decide within 21 days of occurrence or discovery of damage whether or not to claim under the policy. Please check your policy for more information.

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

COMFORTDELGRO ENGINEERING PTE LTD
EXTERNAL BUSINESS DEVELOPMENT BRANCH
NAME & SIGNATURE: *[Signature]*
DESIGNATION: *[Signature]*

Reporting Centre Personnel's Signature
Name: *[Signature]*
IPSC / Pin No: *67218099*



**SINGAPORE
POLICE FORCE**



A/20181110/7023

1 of 3

POLICE REPORT (NP299)

Police Station Of Origin
Central Division HQ
A 391 New Bridge Road #03-112 Police
Cantonment Complex SINGAPORE 088762
Tel No:1800-2240000

Report No. A/20181110/7023

Date/Time Report Made 10/11/2018 18:50	Vide Report No.	Station Diary No.
Name Of Informant RAJVIND JUDE DHALIWAL	Address APT BLK 869A TAMPINES AVENUE 8 #15-508 SINGAPORE 521869	
ID Type / ID No. NRIC NO / S87041711	Contact No. Home/Office: Mobile: 98505791	
Nationality SINGAPORE CITIZEN	Email Address raj_rooge@hotmail.com	
Occupation Business development manager	Sex Male	Age 31
Institution/School Name	Date of Birth 17/02/1987	Race Sikh
Date/Time Of Incident 10/11/2018 14:30 - 10/11/2018 14:35	Location Of Incident 30 SENG POH ROAD TIONG BAHRU MARKET SINGAPORE 168898	

Brief details.

I had an accident with another car while exiting the carpark, an on coming car hit into me. It was a Volvo number plate SJZ8021G, drove by Lee Soon Guan IC number S13653871.

As I was exiting the carpark going down, it is a spiral car park so you have to go round downwards. A car was approaching upwards at a very fast speed, as I was at the utmost left of the carpark, i could not move any more out of the way if not I would have hit the wall. So I slowed down to a stop and the

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: 10/11/2018 18:50
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp



**SINGAPORE
POLICE FORCE**



A/20181110/7023

2 of 3

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. A/20181110/7023

incoming car who was out of his lane, tried to swerve out of the way, his front moved out but he couldn't completely avoid my car and his rear left side hit into the front of my left side and caused damage to my front light and body.

We exchanged info and I told him that he was speeding up really fast in such a tight area and caused this accident, he didn't want to comment and I said as this is my company's car I will have to file a report and claim insurance from him through the company we rent our vehicle from.

Subjects Involved			
Suspect			
Person Name	Lee Soon Guan		
ID Type	NRIC NO	ID No	S1365387I
Gender	Male	Age	59-60
Race	Chinese	Language	English
Mobile No	91839305		
Victim			
Person Name	RAJVIND JUDE DHALIWAL		
ID Type	NRIC NO	ID No	S8704171I
Gender	Male	Age	31
Race	Sikh	Language	English
Occupation	Business development manager	Address Type	
Address	APT BLK 869A TAMPINES AVENUE 8 #15-508 SINGAPORE 521869		Mobile No 98505791

Signature Of Officer Recording The Report:

Not applicable

Signature Of Interpreter:

Not applicable

Officer In-Charge Of Case:

Signature Of Informant:

The identity of the person making this report has been authenticated by SingPass. No signature is required.

Date/Time:

10/11/2018 18:50

Classification Of Case:

Authentication Stamp



**SINGAPORE
POLICE FORCE**



A/20181110/7023

3 of 3

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. A/20181110/7023

Is Informant A Victim?	Yes		
Person Name	RAJVIND JUDE DHALIWAL (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: 10/11/2018 18:50
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	