

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	26/11/2018 13:19
Date Of Accident	25/11/2018 12:15
Exact Location Of Accident	ALONG CEYLON ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKZ8670X
Insured/Policyholder	
Name Of Registered Owner	KABRA ATIM
NRIC No	G5881233T
Email Address	HIATTA5@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91832349
Alternative Phone No	OFFICE-NOPHONE

Vehicle Particulars

Manufacturer	BMW
Model	420I-2.0 CONVERTIBLE (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	VPA/P1749361
Cover Note Number	

Driver

Name of Driver	KABRA ATIM
NRIC No	G5881233T
Date Of Birth	05/09/1968
Occupation	INDOOR
Date Of Driving Pass	08/11/2006
Driving Experience	12 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91832349
Fax Number	
Contact Number	OFFICE-NOPHONE
Email Address	HIATTA5@GMAIL.COM

Address	11 NATHAN ROAD #07-01 REGENCY PARK
Postcode	248732
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	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)	3
Passenger 1	NAME: : HIMALI KABRA GENDER: : FEMALE
Passenger 2	NAME: : AVI KABRA GENDER: : MALE

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 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	SKZ4062C
Vehicle Make/Model/Colour	HONDA SHUTTLE
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	DAVE GOH CHENG SIANG
NRIC/Passport Number	S7431771E
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage
No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

VEHICLE NO: 8K28670 X
ACCIDENT DATE: 25/11/2018 @ 12:15pm

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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.

NOTE: DO NOTE THAT YOU MAY HAVE A 14-DAYS TIMEFRAME FOR YOU TO SUBMIT AN OWN DAMAGE CLAIM UNDER YOUR OWN POLICY. PLEASE REFER TO YOUR POLICY FOR MORE INFORMATION.



Policyholder's Signature

Date & Time: 26/11/2018
11:07 am

Driver's Signature

(If driver is not the policyholder)
Date & Time:

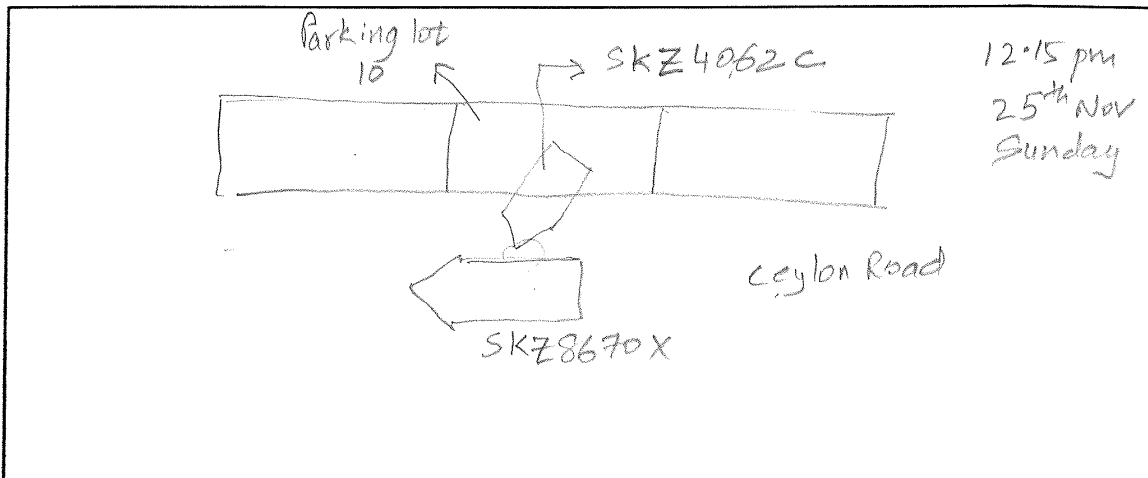
CHARN'S CUSTOMCRAFT

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On Sunday, November 25 th , 2018 at 12:15 pm, I was driving along Ceylon Road in my car SKZ8670X.			
Mr. Dave Goh (S7431771 E) was driving out of his car (SKZ4062C) out of the side parking lot #10 and hit my car.			
He acknowledged his mistake and sent me an email confirming the incident.			
OWN DAMAGE ()	3RD PARTY CLAIM <input checked="" type="checkbox"/>	REPORTING ONLY ()	OWN WORKSHOP ()

DECLARATION

I/We declare the foregoing particulars are true in every respect.

[Signature]
Policyholder's Signature

Date & Time:
26/11/2018
11:07 am

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

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

Charns Customcrafts - Reporting

From: Atim Kabra <hiatta5@gmail.com>
Sent: Monday, 26 November, 2018 10:49 AM
To: toaddphoto@gmail.com
Subject: Fwd: Accident between SKZ4062C & SKZ8670X

----- Forwarded message -----

From: **Dave Yahoo** <ispdave@yahoo.com.sg>
Date: Sun, Nov 25, 2018 at 12:20
Subject: Accident between SKZ4062C & SKZ8670X
To: <hiatta5@gmail.com>

On 25Nov at 12.15pm, my car accidentally, when coming out from parking lot 10 along Ceylon Road, hit vehicle no. SKZ8670X, belonging to Atim Kabra , ID number G5881233T.

Regards
Dave Goh (Goh Cheng Siang)
ID number : S7431771E

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Cheers,
Atim Kabra

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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