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 witholding 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	08/01/2019 14:18
Date Of Accident	07/01/2019 09:50
Exact Location Of Accident	BLK 107 TAMPINES STREET 11 OPEN SPACE CARPARK
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJP253J
Insured/Policyholder	
Name Of Registered Owner	AVANT AUTOMOBILE PTE LTD
Co Reg No	201500597E
Email Address	ARIVANPROPERTY@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-93831143
Alternative Phone No	OFFICE-93831143
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	AVANTE-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	DRIVING GOJEK
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5096363642-01
Cover Note Number	
Driver	

Name of Driver KATHIRARIVAN KASINATHAN

NRIC No S7282706F Date Of Birth 18/05/1972 Occupation **OUTDOOR** Date Of Driving Pass 10/04/2014

Driving Experience 4 YEARS AND 8 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-93831143

Fax Number

Contact Number OTHERS-93831143

EMail Address ARIVANPROPERTY@YAHOO.COM.SG Address BLK 121A EDGEDALE PLAINS

#10-257

Postcode 821121

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 (including own vehicle)

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 3

Number of Passengers (Including Driver)

Passenger 1

NAME: : PASSENGER

GENDER: : FEMALE

Passenger 2 NAME: : PASSENGER

GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name TAMPINES NEIGHBOURHOOD POLICE CENTRE

Police Station Address ROAD: 6 TAMPINES AVE 4 , POSTCODE: 529682 , COUNTRY:

SINGAPORE

Police Station Contact **TEL NO**: 1800-5871999 - **FAX NO**: 65871699

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190107/2046

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 SGT1952H
Vehicle Make/Model/Colour NISSAN

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver JOHNSON QUEK FEI LOONG

NRIC/Passport Number S7670511I Contact Number 97437047

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver) 2

Passenger 1 NAME:

GENDER: :

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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- 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.
- 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 :
 - 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 Per

Name:

NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN	IK 107	TAMPILIES ST	11 OPEN	SPACK	CARPARK
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ESCRIBE CIRCUMS	TANCES OF T	HE ACCIDENT			
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ECLARATION We declare the forest	oing particulars	are true in every respect.			/
are occurre the foreg	onig particulars		0		/ dul 19
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olicyholder's Signature		Driver's Signature		Reporting	Centre Personnel's & gnature
ate & Time:		(If driver is not the policyho Date & Time:	(der)	Name: NRIC/FIN N	

POLICE REPORT





1 of 4

Report No. T/20190107/2046

Police Station Of Origin: Tampines N.P.C 6 Tampines Avenue 4 SINGAPORE 529682 Tel No: 1800-5871999

	e Report M 19 11:53		Vide Report No.: Station II				
Informa	nt's Particu	ilars		RETURNS THE RESERVE			
Name of	Informant:	SINATHAN	Address: APT BLK 121A EDGEDALE PLAINS #10-257 SINGAPORE 821121				
ID Type / ID No.: NRIC NO / S7282706F			Contact No.: Home/Office:	Mobile: 93831143			
Nationality: SINGAPORE CITIZEN			Email:				
Sex: Age: Date of Birth: Male 46 18/05/1972			Type of Informant: Driver				
Race: Indian			Language: English	Institution / School Name:			
Occupation: DRIVER			Driving Licence Information: Class: 3 Date of Expiry:				

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 07/01/2019 09:50	Type of Location Car Park
Location: Along Road 1 TAMPINES S	STREET 11 MPINES STREET 11 C	PEN SPACE CARPA	RK	-
Weather: Clear	William Street	Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled	1	Fraffic Volume: Light
Type of Colli	sion: ving Vehicles - Side St	wipe - Opposite Direct	ion	Anyone conveyed by ambulance: No

Details of V	De Cale Cale	Make	Model	Color	Condition	No of Passenge
Vehicle No.	Туре	IVIAKE	MODEL	The state of the s		4
SGT1952H	Car	NISSAN		Silver	Slightly Damaged	1
SJP253J	Car	HYUNDAI	AVANTE	Brown	Slightly Damaged	2

Details of V	ehicle Insurance	NAME OF TAXABLE PARTY.	-0	Eveler Date
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJP253J	NTUC Income Insurance Co-Operative	5096363642	21/08/2018	20/08/2019

POLICE REPORT



T/20190107/2046

2 of 4

Report No. T/20190107/2046

Police Station Of Origin: Tampines N.P.C 6 Tampines Avenue 4 SINGAPORE 529682 Tel No: 1800-5871999

CONTINUATION OF REPORT

Details of Person		A PROPERTY OF THE PARTY OF THE			A STATE OF THE PARTY OF THE PAR
Any Pedestrian In	volved: No	Lit CD-d	- string (Crocci	na: NA
No. of Pedestrian	s Injured: NIL	Use of Pede	estrian	UTOSSI	ng. NA
Driver.		* 16 ST 15 ST	ID NI		S7670511I
Name	JOHNSON QUEK FEI LOONG		ID No.	į.	3/0/03/11
Related Vehicle	SGT1952H (Car)		Contact No.		97437047
Hospital/Clinic	NIL	-	Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Disch	1001 39 0	NIL	
No. of Days gran	ted Medical Leave NIL	Degree of	Injury	NIL	
Driver		Market Line		HOLE	
Name	KATHIRARIVAN KASINATHAN		ID No.		S7282706F
Related Vehicle	SJP253J (Car)		Conta	ct No.	93831143
Hospital/Clinic	NIL	-	Class Driving Licent Expiry	g ce &	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Disc		NIL	
	nted Medical Leave NIL	Degree of	f Injury	NIL	

Brief Details.

On 07/01/2019 at about 0950hrs, I was driving my car Reg no: SJP253J and entered the carpark of B/107 Tampines Street 11 to send my passengers to their destination. As I entered the parking gantry, I slowed down as there are vehicles in front of me. There I a car Nissan Silver in colour Reg no: SGT1952H was on my right side facing towards the exit of the carpark. I did not notice the vehicle have any hazard light on indicating it is stopping or parking in a lot when suddenly the said vehicle was reversing to his left and during that motion the front right side had hit my front driver door. Upon the contact with my car, I look at the driver and signaled him to stop as I was getting out from my car from the left passenger door. During this time the driver move his car and when I managed to get out of my car, I saw the car was proceeding towards the carpark exit. He was about to leave when I had to stand in front of his car to stop him from driving out of the car. The driver eventually stopped. He then reversed and parked the car in a nearby lot. He then came out of his vehicle and denied that he was running away. I have also called for the police at that time as he does not seems happy with my claim that he is running away from the accident scene. I did manage to get his particulars and also took down his car Registration number. He did the same and both of us took photos of the vehicles before leaving the scene.

My two passengers and me are not injured. He has a passenger and he also do not informed me of any injury to him or his passenger. My car front right driver door had scratches. His front right side of bumper also had some light scratches.

POLICE REPORT





Police Station Of Origin: Tampines N.P.C 6 Tampines Avenue 4 SINGAPORE 529682 Tel No: 1800-5871999 3 of 4 Report No. T/20190107/2048

CONTINUATION OF REPORT

AVANT AUTOMOBILE PTE LTD

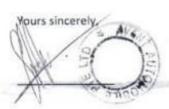
17.12.2018

Authorisation - KATHIRARIVAN KASINATHAN(\$7282706F)

Vehicle Reg No: SJP 253J

Make & Model: HYUNDAI AVANTE 1.6A

The letter serves to confirm the above vehicle can be entered and added under the hirer's account and that the said hirer will be handling his own earning.





Termination Charge

Other Charges

AVANT AUTOMOBILE PTE LTD 61 Ubi Ave 2 #04-16 AML Building Singapore 408898

Tel: 6842 3331 Fax: 6842 2311

UTOMOBIL	LE LEASE AGREEMENT			Agreem	ent No.: ent Date:/.	1506
essor	AVANT AUTOMOBILE PTE LTD	ROC No.	201500	and the second second		1-1
Address	No. 61 Ubi Avenue 2 #04-16 AML Building Singapore 408898	Office No	6842 3	331		
Lessee	KAMHIRABUAN KASINATHAN	NRIC/UEN I	NO. 5728	2706F	Contact 1	9383/143
Address	KAMHIKARIVAN KASINATHAN BIK WIA, Edgedale Flaw	1 410-	157 5/5	21121)	Contact 2	
Main Driver		NRIC/UEN I	Vo.		Contact 1	
Address	armaproferty in your	J- CONT	>4 -		Contact 2	
Company					Occupation	
Co. Address						
Driving Pass Date		Driving Cla	55		D.O.Birth	
Co-Lessee / GTR		NRIC/UEN	No.		Contact 1	
Address					Contact 2	
Named Driver 2		NRIC/UEN	No.		Contact 1	
Company		1			Occupation	
Co. Address						
Driving Pass Date		Driving Cla	255		D.O.Birth	
ESCRIPTION OF	VEHICLE					(Personal Gr
Registration No.	225323.2		Colour		MARKEN	
Make / Model	Chassis No.		As Loty CARD			
Reg. Date	10 man 2009 ** (Ne	ew / Used)	Engine No.	As	. Lity (AR)
RMS OF RENTA	AL PAYMENT & PERIOD					
Leasing Period		Deposit		59	oct tok	top wakly
Leasing Start Date		1st Rental Fee		3	#315/	0
Leasing End Date	20/3/19	Weekly Rento	ai Fee		/	
Termination Charge	10-1-11	Weekly Rento	al Due on			

Estimated Residual Value















