## 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 <u>truthful and accurate</u> 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

aforesaid.	tent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	02/01/2019 09:34
Date Of Accident	31/12/2018 11:50
Exact Location Of Accident	NEAR 46,TUAS ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKR5916A
Insured/Policyholder	
Name Of Registered Owner	SAMMANDA VIVEKANANDAN
NRIC No	S2647719J
Email Address	VIVEKNAN@GMAIL.COM
Mobile Phone No	(LOCAL) +65-92380941
Alternative Phone No	OFFICE-92380941
Vehicle Particulars	
Manufacturer	RENAULT
Model	FLUENCE-1.5 D DCI 110 (A)
Exact Purpose for which vehicle was being used at time of accident	COMMUTING TO OFFICE
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number VA1/GA310552/1

Cover Note Number

**Driver** 

Name of Driver SAMMANDA VIVEKANANDAN

NRIC No S2647719J
Date Of Birth 25/08/1953
Occupation INDOOR
Date Of Driving Pass 02/06/1992

Driving Experience 26 YEARS AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-92380941

Fax Number

Contact Number OFFICE-92380941

EMail Address VIVEKNAN@GMAIL.COM

Address BLK 662B JURONG WEST STREET 64 #05-324

Postcode 642662

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

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

NO

NO

YES

NO

YES

2

2

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME: : MS ELLEN TONG

GENDER: : FEMALE

**Details of Police Action** 

Was the accident reported to the police?

If Yes, Please state which Police Station

POLICE STATION NAME [OTHER] NANYANG N.P.C

Was notice of intended Prosecution given?

If Yes, against whom?

**Circumstances of Accident** 

REFER TO THE ATTACH SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?

Was there any video captured by Car Camera? YES

Remarks/ Reasons:

TO LARGE UNABLE TO UPLOAD OR SEND BY EMAIL

Was there any audio recorded?

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number GW7517B

Vehicle Make/Model/Colour MITSUBISHI/FB511/WHITE

**Details Of Properties** 

Vehicle Category COMMERCIAL VEHICLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Page 2 of 32

Nature Of Damage

No. Of Passenger (Including Driver)

#### **Sketch Plan**

## TANT HOTICE

SICEYON PLAN

, report garractly the details of the socident to speed up the claims process.

- This Form must be appropriated by the Followholder end/or the Author/sed Driver.
- information provided must be as graphful and accurate as cossible. Any willut 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.
- Any false reporting may be referred to the Police for investigation.
- E. This report will be forwarded by the insurars to the GIA Records Mangement Centre establised by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made evallable 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.
- 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 ("GtA") 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 socident (all insurer(s) who have insured vahicle(s) involved in this socident shall be collectively referred to as the "insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Singapors 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 end/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/mall 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/few 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 fawyers/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 detention, investigation and management in present and all future claims.
- (a) the information so collected under (d) above may be shared / disclosed:
  - (I) to all insureres 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 requirments under any regulations, laws or court orders.

(If differ is not the policymolous)

Date 5 Time

COMFORTDELGRÓ ENGINESRING PTE LTD

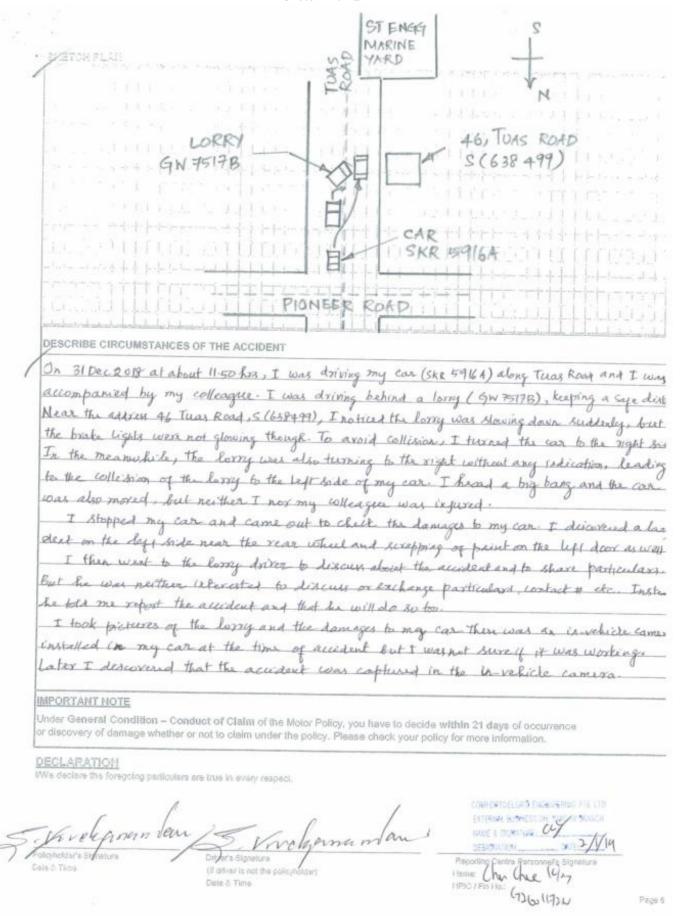
EXTERNAL RUBBLESS THURSD

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HRIC / Fin I lo.:

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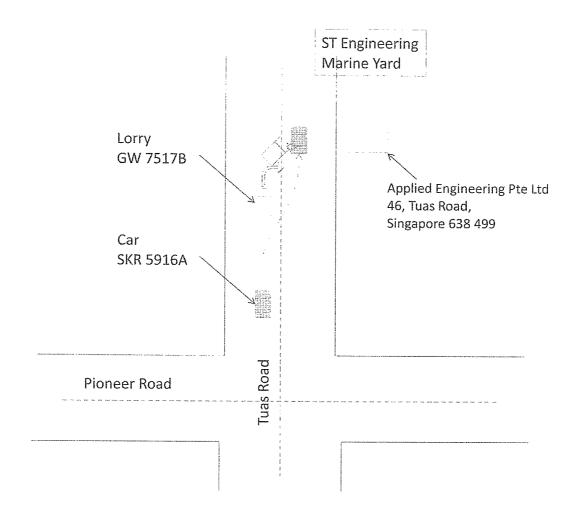
#### Sketch Plan #2



Page 6

# Sketch Plan #3 Pg. 1

# Schematic Sketch



### Sketch Plan #4 Pg. 1

On 31 Dec 2018 at about 11.50 hrs, I was driving my car (SKR 5916A) along Tuas Road towards South and I was also accompanied by my colleague. I was driving behind a lorry (Plate Number GW 7517B), maintaining a safe distance. Near Applied Engineering Pte Ltd (46, Tuas Road, Singapore 638 499), I noticed that the lorry was slowing down suddenly, but the brake lights were not glowing though. To avoid collision, I turned the car slightly to the right side of the road. In the meanwhile, the lorry was also turning to the right without any indication, leading to the collision of the lorry to the left side of my car. I heard a big bang and the car was also moved, but neither I nor my colleague was injured.

I stopped my car and came out to check the damage: I discovered a large dent on the left side near the rear wheel and scrapping of paint on the left door as well.

I then went to the lorry driver to discuss about the accident. But he was neither interested to discuss nor to exchange personal particulars, contact number, insurance details etc. Instead, he told me to report the accident and that he will do so too.

I took pictures of the lorry and the damages to my car. There was an in-vehicle camera installed in my car at the time of the accident but I was not sure if it was working. Later I discovered that the accident was captured in the in-vehicle camera.

## **POLICE REPORT Pg. 1**





Police Station Of Origin:

Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482

Tel No: 1800-7929999

1 of 3 Report No. T/20181231/2116

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 31/12/2018 17:17			Vide Report No.:	Station Diary No.: 107		
Informan	t's Partic	ulars				
Name of Informant: SAMMANDA VIVEKANANDAN			Address: APT BLK 662B JURONG WEST STREET 64 #05-324 SINGAPORE 642662			
ID Type / ID No.: NRIC NO / S2647719J			Contact No.: Home/Office:	Mobile: 92380941		
Nationality: SINGAPORE CITIZEN			Email:			
Sex: Male	Age: 65	Date of Birth: 25/08/1953	Type of Informant: Driver			
Race: Indian			Language: English	Institution / School Name:		
Occupation: COMMERCIAL MANAGER			Driving Licence Information: Class: 2B,3	Date of Expiry:		

	nation of the Accide	ent		
Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 31/12/2018 11:50	Type of Location: Straight Road
Location: Along Road 1 TUAS ROAD	ed Engineering Pte L	tol		
Weather:	<u>sa Engineening Fie L</u>	Road Surface:	R	oad Speed Limit:
Traffic Flow: Two Way		Traffic Control:	1	raffic Volume: o Traffic
Type of Collisi	ion:			nyone conveyed by mbulance:

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
GW7517B	Lorry	MITSUBISHI	FB511BOJS RDE	White	No Damage	1
SKR5916A	Car	RENAULT	FLUENCE 1.5L DCI 110 AT GEARBOX EURO 5	White	Slightly Damaged	2

## POLICE REPORT Pg. 1





Police Station Of Origin:
Nanyang N.P.C
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7929999

2 of 3 Report No. T/20181231/2116

#### CONTINUATION OF REPORT

Details of Ve	ehicle Insurance			
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKR5916A	AXA INSURANCE SINGAPORE PTE	GA310552	23/02/2018	22/02/2019
	LTD			

Details of Perso	n Involved					
Any Pedestrian II	nvolved: No		······································			
No. of Pedestriar	ns Injured: NIL	Z	Use of Ped	destriar	Cross	ing: NA
Driver						
Name	SAMMANDA VIVEKA	NANDAN		ID No	•	S2647719J
Related Vehicle	NIL			Conta	ct No.	92380941
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g	Class: 2B,3 Date of Expiry: NIL
Date Treatment	NIL Date Dis			harge	NIL	
			Degree of	Injury	NIL	

## Brief Details.

On 31/12/2018 at about 1150hrs, I was driving my car (plate no: SKR5916A) along Tuas Road outside Applied Engineering Pte Ltd with my colleague. I was driving behind a lorry (plate no: GW7517B). I noticed that the lorry was speeding, hence I maintained a safe distance between my car and the lorry. Subsequently, the lorry did a sudden break and to avoid the collision, I turned my car slightly to the right side of the road. However, at the same time the lorry did a sudden illegal right turn without indicating a signal and hit the left side of my car. I heard a bang sound and subsequently came out of the car to see the damage. I made a check on my vehicle and discovered that there is a dent on the left side near the back door and the paint near the dent was scraped off. I then went to talk to the lorry driver regarding the accident, however, he did not wish to talk about it and asked me to make a police report. He also refused to give his particulars when I asked for it. I would like to further state that this is the first time such an incident happened. There is an in-vehicle camera installed in my car but I am not sure if it is in working condition. I have also pictures of the lorry that hit my car and the damage on my car.

## **POLICE REPORT Pg. 1**





Police Station Of Origin: Nanyang N.P.C 2 Jurong West Avenue 5 SINGAPORE 649482 Tel No: 1800-7929999

3 of 3 Report No. T/20181231/2116

CONTINUATION OF REPORT

## Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report J / Sgt 2 NG JIA YI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 31/12/2018 17:17
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:
	re Police Force

## **CERTIFICATION OF INSURANCE Pg. 1**





Certificate number

Chassis number

Engine number

AXA Insurance Pte Ltd

1800 880 4888 (Within Singapore) (65) 6880 4888 (International)

(65) 6880 4740

 $\square$ customer.care@axa.com.sg

3,753 www.axa.com.sg

account number

GA310552 / 1

VF1LZLF0E52015791

K9KN837D173649

15233

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

### Policy details

Policyholder name Cover

Plan name

NCD applicable

SAMMANDA VIVEKANANDAN

Comprehensive

Essential 50%

**Certificate of Insurance** 

SKR5916A

Vehicle registration number

Period of Insurance

Nil

from 23/02/2018 to 22/02/2019 (both dates inclusive)

Finance loan company

# Persons or classes of persons entitled to drive\*

(a) The Policyholder

(b) Any Named Driver as stated in the Policy:

1. HEMAMALINI SENTHILARASU

(c) Any person who is driving on the Policyholder's order or with their permission

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 reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

#### Limitation as to use\*

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover - use for hire or reward, racing, pace-making, reliability trial, speed testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with motor trade; or when the Motor Car, whether stationary, in use or otherwise, is in or on, a racing track, circuit, route, course or any other roads by whatever name called that are typically used for racing, pace-making or such similar purposes.

\* Emitations 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.

**EXCESS** 

Basic Own Damage Excess

Windscreen Excess

SGD 400.000

SGD 100.00

An Additional Excess is applicable as follows:

- 1. S\$500 for unnamed Authorised Driver
  - 2. S\$500 for declared Young and Inexperienced Driver
  - 3. \$\$5,000 for undeclared Young and Inexperienced Drivers. This additional excess is reduced to \$\$2,500 if You have chosen AXA Premium Workshops.

# Additional clauses & endorsements to your policy

Nil

I/We hereby certify that the policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third Party Risks and Compensation) Act, (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

#### AXA Insurance Pte Ltd

Authorised signature

## Important note

Policyholders are warned that on the sale of a motor vehicle they must surrender the Certificate of Insurance and the Policy to the insurance company. It the Certificate of Insurance has been lost or destroyed a Statutory Declaration to the effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicle (Third Party Risks and Compensation Act (Cap. 189).

The Premium Warranty Clause requires the promium to be paid in full within a specific period failing which there would be no liability under the policy, renown certificate

AXA Insurance Pte Ltd (199903512M) 8 Shenton Way, #24-01, AXA Tower, Singapore 068811 Customer Centre, #B1-01

1 of 3

## **CERTIFICATION OF INSURANCE Pg. 1**





SAMMANDA VIVEKANANDAN 662B JURONG WEST STREET 64 #05-324 SINGAPORE 642662 AXA Insurance Pte Ltd

1800 880 4888 (Within Singapore) (65) 6880 4888 (International)

(65) 6880 4740

customer.care@axa.com.sg

www.axa.com.sg

**New business** 

date 02/01/2018

your servicing distributor

AMEX-ELLAINE RAMOS / 15233

your servicing distributor contact **1800-880-4888** 

# **Policy Schedule**

Your SmartDrive Comprehensive Essential

## Your policy snapshot

Policyholder name SAMMANDA VIVEKANANDAN Policy number VA1 / GA310552 Cover Comprehensive Fin / NRIC S2647719J

Period of Insurance from 23/02/2018 to 22/02/2019 (both dates inclusive)

#### Premium breakdown

 Gross Premium after 50% NCD
 SGD 1.128.68

 Total Discounts
 - SGD 60.17

 7% GST
 SGD 74.80

 Final Premium
 SGD 1,143.31

## Your benefits highlights

(refer to Policy Wording for full terms and conditions)

## SmartDrive Comprehensive Essential Benefits

- 24/7 Towing & Transportation in Singapore or Overseas
- Windscreen Replacement with Excess OR Repair your windscreen at your preferred location and get \$50 cash reward with no excess
- Guaranteed Repairs for twelve (12) Months
- Loss or Damage
- Legal Liability

#### Vehicle details

RENAULT FLUENCE 1.5 DCI Make & Model of Vehicle Year of manufacture 2015 Vehicle registration number SKR591GA Private use Type of Use SALOON Body type Engine capacity (c.c.) 1461 Seating capacity (excl driver) Engine number K9KN837D173649 Off-Peak car VF1LZLF0E52015791 No Chassis number

Insured's Estimated Market Value

Market Value at the time of Loss (including accessories and spare parts)

Limitation to use As per Certificate of Insurance

Nil

Finance Loan Company

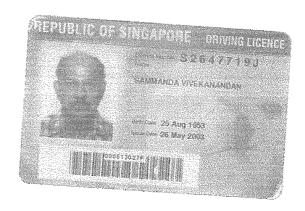
Excess applicable (refer to Policy Wording for other applicable Excesses)

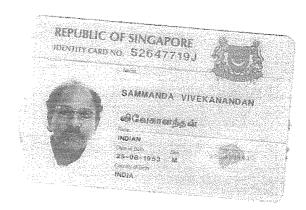
Basic Own Damage Excess SGD 400.00 Windscreen Excess SGD 100.00

### Drivers details

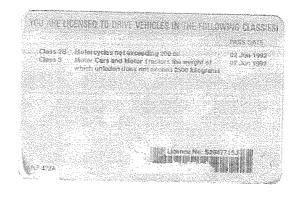
AXA Insurance Pte Ltd (199903512M) 8 Shenton Way, #24-01, AXA Tower, Singapore 068811 Customer Centre. #B1-01 1 of 2

## **INSURED ID AND DRIVING LICENCE Pg. 1**





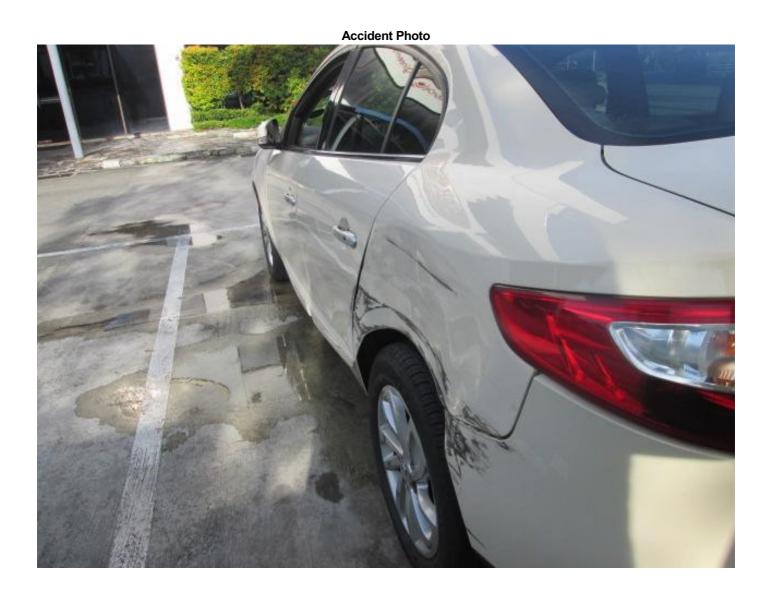
## **INSURED ID AND DRIVING LICENCE Pg. 1**

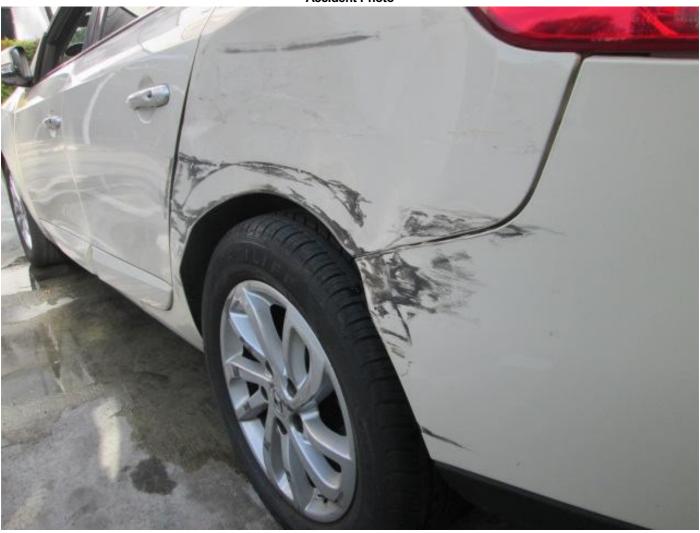


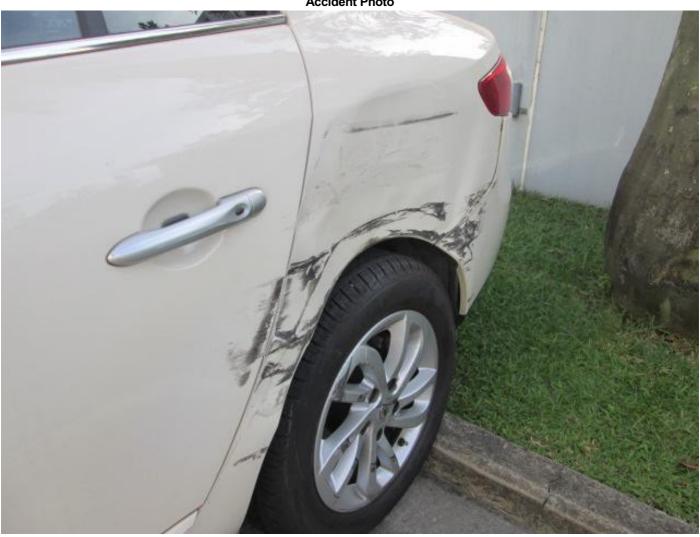


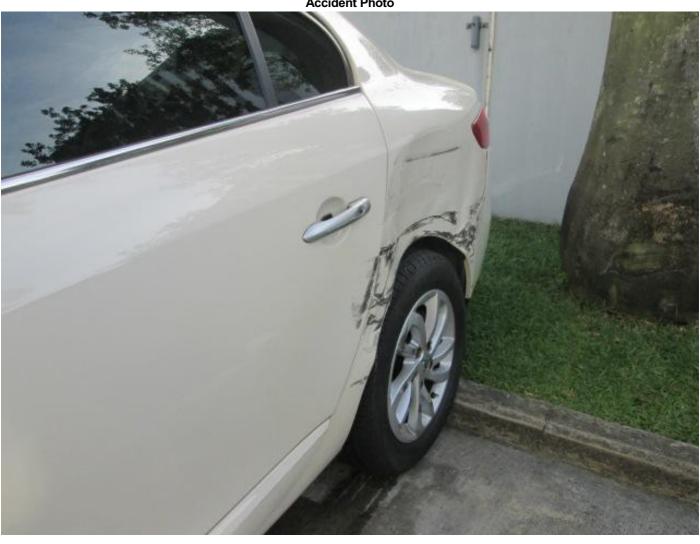


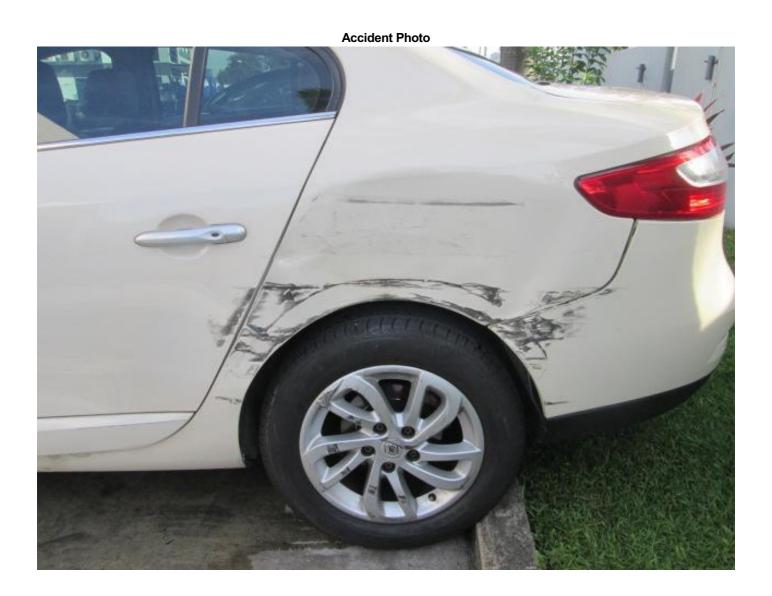






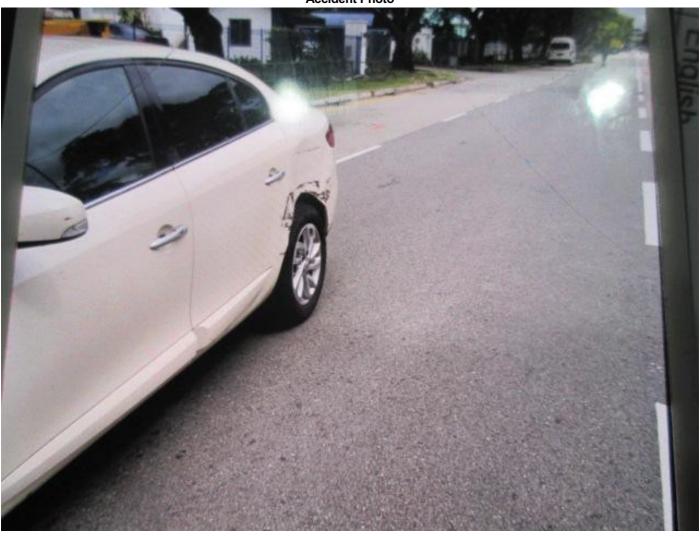


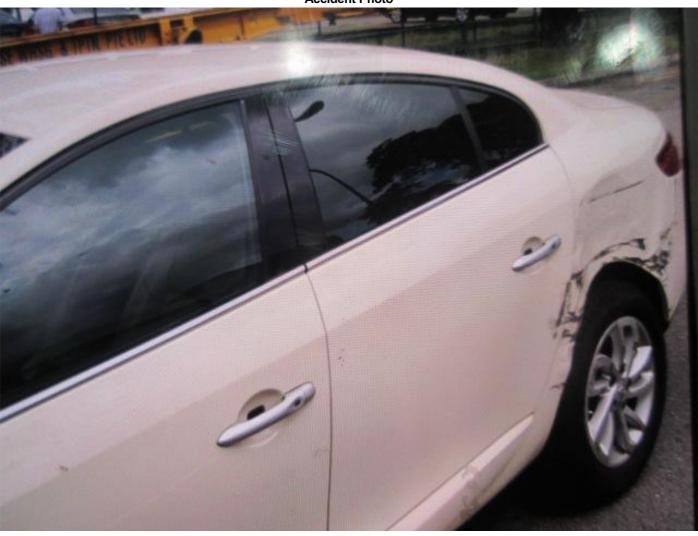


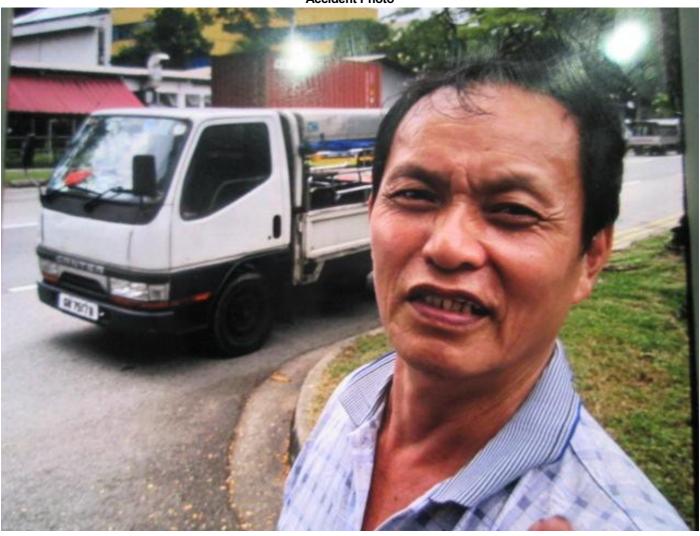






















#### **Addendum Sheet**



# GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

6 Raffles Quay #18-00 Singapore 048580 Tel (65) 6224 0010 Fax (65) 6224 0030 Operating Hours : Monday to Friday, 09:00 – 17:00 UEN: 566550020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre

# with whom you submitted the Original Report. **ADDENDUM** (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS: Original Report No : MCO 719 0000 85 \_Vehicle Registration No: \_\_\_\_ SLR 5916A Vivekananda Name(as shownin NRIC): Sammon d NRIC/FIN/Passport No : 82 64 714 J (\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate Jurany west Address Contact (Tel) Mobile No.: Email Address Date of Accident Time of Accident: Place of Accident Insurance Company: (B) ADDITIONALINFORMATION / AMENDMENTS: I have made a report on the above mentioned accident and would like to include additional information or make the following amendments: COMFORTDELIGRO ENOMISSING PTE LTD

Policyholder / Driver's Signature

EXTERNAL BUSHIESS ON, PANDAN BRANCH NAME & SIGNATURE:

Reporting Centre Personnel's Signature Name: Chu Che Nioj

NRIC/FINNO .: 62601172/ Date: