

## 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	18/02/2019 16:45
Date Of Accident	16/02/2019 15:00
Exact Location Of Accident	YELLOW BOX OUTSIDE WATERVIEW CONDO
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLW6471X
<b>Insured/Policyholder</b>	
Name Of Registered Owner	PRANEETH YENDAMURI
NRIC No	S7683386I
Email Address	YPRANEETH@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-91766451
Alternative Phone No	OTHERS-84999173

### Vehicle Particulars

Manufacturer	BMW
Model	318I LED NAV
Exact Purpose for which vehicle was being used at time of accident	NORMAL USAGE
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	GA335147
Cover Note Number	

### Driver

Name of Driver	PRANEETH YENDAMURI
NRIC No	S7683386I
Date Of Birth	13/10/1976
Occupation	INDOOR
Date Of Driving Pass	28/01/2013
Driving Experience	6 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91766451
Fax Number	
Contact Number	OTHERS-84999173
EEmail Address	YPRANEETH@HOTMAIL.COM

Address	73 TAMPINES AVENUE 1 #15-01
Postcode	529780
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	COLLIDED INTO MOTORCYCLIST
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?	YES
Was any injured conveyed to hospital by ambulance?	YES
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: : JAYASHREE NARASIMHAN GENDER: : FEMALE
Passenger 2	NAME: : AKASH TEJA YENDAMURI GENDER: : MALE

### 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	<b>ROAD:</b> 6 TAMPINES AVE 4 , <b>POSTCODE:</b> 529682 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-5871999 - <b>FAX NO:</b> 65871699
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

### Circumstances of Accident

REFER TO ATTACH.

### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	HANDED OVER TO TRAFFIC POLICE
Was there any audio recorded?	NO

### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBE582L
Vehicle Make/Model/Colour	YAMAHA Y2F-R 6S BLACK
Details Of Properties	
Vehicle Category	MOTORCYCLE

Name of Driver  
NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name	UNKNOWN
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	FBE582L
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

SKETCH PLAN

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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 Personne's Signature  
Name:  
 NRIC/FIN: [redacted] MOTORCYCLES LIMITED  
 303 Alexandra Road  
 Sino Garby Performance Centre  
 Singapore 159341  
 Tel: 6319 0100 (Sales)  
 6319 0111 (AfterSales)

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 16/02/2019 at about 1500hrs, I was driving my car (CLW 6471X) with 2 passengers on board (wife + son), exit from Waterview Condo entrance.

Out of a sudden, there was a motorcycle (E8E 528L) collided on the right portion of my back door car which resulted to damage in the yellow box outside the Waterview Condo. I did not notice the motorcyclist, he fell on the ~~road~~<sup>road</sup> and suffered open wound. The car behind me called for the ambulance and when arrived, paramedics attended to him. I did not exchange any particulars with the rider. I have in car CCTV installed in my car and captured the accident scene. Traffic Police officer came down to scene and took my memory card for investigation. I was given a case card to lodge to Police. I have lodged with Police at Tampines Police Station. Report enclosed.

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:  
**PERFORMANCE MOTORS LIMITED**  
 303 Alexandra Road  
 Sims Derby Performance Centre  
 Singapore 133041  
 Tel: 6319 0100 (Sales)  
 6319 0111 (AfterSales)

18 Feb, 2019 12:58 PM



**SINGAPORE  
POLICE FORCE**



T/20190216/2115

1 of 3

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

Report No. T/20190216/2115

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/02/2019 17:12		Vide Report No.: G/20190216/0160		Station Diary No.: 102	
<b>Informant's Particulars</b>					
Name of Informant: PRANEETH YENDAMURI			Address: 73 TAMPINES AVENUE 1 #15-01 SINGAPORE 529780		
ID Type / ID No.: NRIC NO / S7683386I			Contact No.: Home/Office: Mobile: 91766451		
Nationality: INDIAN			Email:		
Sex: Male	Age: 42	Date of Birth: 13/10/1976	Type of Informant: Driver		
Race: Indian			Language: English		Institution / School Name:
Occupation: Manager			Driving Licence Information: Class: 3		Date of Expiry:

<b>General Information of the Accident</b>				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 16/02/2019 15:00	Type of Location: Yellow Box
Location:  TAMPINES AVENUE 1  In yellow box outside Waterview Condo Lamp Post Number: 63/1				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBE582L	Motorcycle	YAMAHA	YZF-R6S	Black		0
SLW6471X	Car	BMW	318I LED NAV	Grey		2

<b>Details of Vehicle Insurance</b>				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLW6471X	AXA INSURANCE SINGAPORE PTE LTD	GA335147	04/01/2019	25/02/2020

18 Feb, 2019 12:58 PM



**SINGAPORE  
POLICE FORCE**



T/20190216/2115

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

2 of 3

Report No. T/20190216/2115

## CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	PRANEETH YENDAMURI	ID No.	S7683386I
Related Vehicle	SLW6471X (Car)	Contact No.	91766451
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 16/02/2019 at about 1500hrs, I was driving my car (SLW6471X) with 2 passengers on board (wife & son) exit from Waterview Condo entrance.

Out of sudden, there was a motorcycle (FBE528L) collided on the right portion of my back door car which resulted to damage in the yellow box outside the Waterview Condo.

I did not notice the motorcyclist, he fell on the road and suffered open wound. The car behind me called for ambulance and when arrived, paramedics attended to him. I did not exchange particulars with the rider.

I have in-car CCTV installed in my car and captured the accident scene. Traffic police officer came down to scene and took my memory card for investigation.

I was given a case card and advised to lodge a traffic accident report.

18 Feb, 2019 12:58 PM



SINGAPORE  
POLICE FORCE



T/20190216/2115

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

3 of 3

Report No. T/20190216/2115

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: G / Sgt 2 MUHAMMAD ISA BIN MD RASHID <i>GR</i>	Signature Of Informant: <i>Pravish</i>
Signature Of Interpreter: Not applicable	Date/Time: 16/02/2019 17:12
Officer In Charge Of Case: TP / GIT / Staff Sgt SUFIYAN BIN KHAIRI Contact No.: 65476390	Classification Of Case:
Authentication Stamp NP168	<div data-bbox="638 1787 1141 1986" data-label="Image"></div>

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



**Accident Photo**



Accident Photo



Accident Photo



Accident Photo



Accident Photo

