

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 | 07/03/2019 09:05 |
| Date Of Accident | 06/03/2019 18:15 |
| Exact Location Of Accident | TPE (SLE) AFTER TAMPINES AVE 10 EXIT |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|------------------------------------|
| Vehicle Registration Number | SFN2733K |
| Insured/Policyholder | |
| Name Of Registered Owner | BALASUBRAMANIAM S/O MUTHU NALLAYAN |
| NRIC No | S1611419G |
| Email Address | NOEMAIL |
| Mobile Phone No | (LOCAL) +65-90057603 |
| Alternative Phone No | OFFICE-90057603 |

Vehicle Particulars

| | |
|--|------------------------|
| Manufacturer | HONDA |
| Model | VEZEL HYBRID 1.5X AUTO |
| Exact Purpose for which vehicle was being used at time of accident | PRIVATE USE |
| 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 | NTUC INCOME INSURANCE CO-OPERATIVE LTD |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | 5099335248 |
| Cover Note Number | |

Driver

| | |
|----------------------|---------------------------|
| Name of Driver | CHANDHIRU BALASUBRAMANIAM |
| NRIC No | S9245705B |
| Date Of Birth | 09/12/1992 |
| Occupation | INDOOR |
| Date Of Driving Pass | 28/11/2011 |
| Driving Experience | 7 YEARS AND 3 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-90057603 |
| Fax Number | |
| Contact Number | OFFICE-90057603 |
| Email Address | NOEMAIL |

| | |
|---|--------------------------------------|
| Address | BLK 689 HOUGANG STREET 61 #08-244 |
| Postcode | 530689 |
| Was driver an employee of the Insured's Company | NO |
| If No, Relationship of the Driver with the Insured | PARENT |
| Vehicle Registration Number of Driver's Own Vehicle | - - - |
| Insurance Company of Driver's Own Vehicle | - - - |

General Information of the Accident

| | |
|--------------------|-----------------|
| Type Of Accident | CHAIN COLLISION |
| 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 | 3 |
| Was any body injured in the Accident? | YES |
| 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) | 1 |

Details of Police Action

| | |
|---|---|
| Was the accident reported to the police? | YES |
| If Yes, Please state which Police Station | |
| Police Station Name | HOUGANG NEIGHBOURHOOD POLICE CENTRE |
| Police Station Address | ROAD: 60 HOUGANG AVE 9 , POSTCODE: 538775 , COUNTRY: SINGAPORE |
| Police Station Contact | TEL NO: 1800-4890999 - FAX NO: 63128989 |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

REFER TO POLICE REPORT - T/20190306/2167.

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 | SJG5955G |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | PRIVATE CAR |
| Name of Driver | |
| NRIC/Passport Number | |
| Contact Number | |
| Address | |
| Postcode | |
| Insurance Company Name | |

Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SMA5122P
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category PRIVATE CAR
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 CHANDHIRU BALASUBRAMANIAM
Approximate Age
Injuries Sustain BODY
Injured person in which vehicle? SFN2733K
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

Accident Sketch Plan


SKETCH PLAN

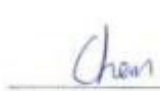
IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
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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 Personnel's Signature
Name:
NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN

Diagram illustrating the accident sketch plan. Three vehicles are shown in a line, moving from left to right. The vehicles are labeled A, B, and C. Vehicle A is SFN 2733K, Vehicle B is SJG 5955G, and Vehicle C is SMA 5122P. Arrows indicate the direction of travel. A legend on the right lists the vehicle details.

Legend:

- (A) SFN 2733K
- (B) SJG 5955G
- (C) SMA 5122P

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON THE 6th MARCH (6/3/2019) as I was travelling along TPE towards SLE after Tampines Ave 10 Exit and 06:15 PM, the vehicle in front of me slow down and I follow suit.

Suddenly without warning I heard a very loud bang from the rear of my car.

After inspection there is a chain collision involving 3 cars.

I saw the vehicle behind me (SJG 5955G) had also slow down and follow suit.

The last vehicle SMA 5122P did not stop in time and caused the chain collision.

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.:

Police Report



**SINGAPORE
POLICE FORCE**



T/20190306/2167

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4690599

1 of 4

Report No: T/20190306/2167

REPORT OF A TRAFFIC ACCIDENT

| | | |
|--|------------------|--------------------------|
| Date/Time Report Made: 05/03/2019 21:54 | Video Report No: | Station Diary No: 127 |
|--|------------------|--------------------------|

Informant's Particulars

| | | | | | |
|--|-----------|-----------------------------|---|--|----------------------------|
| Name of Informant CHANDHIRU BALASUBRAMANIAM | | | Address APT BLK 689 HOUGANG STREET 61 #08-244 SINGAPORE 530689 | | |
| ID Type / ID No. NRIC NO / S9245705B | | | Contact No. Home/Office: Mobile: 90057603 | | |
| Nationality SINGAPORE CITIZEN | | | Email: | | |
| Sex Male | Age 25 | Date of Birth 09/12/1992 | Type of Informant Driver | | |
| Race Indian | | | Language English | | Institution / School Name: |
| Occupation AIRCRAFT TECHNICIAN | | | Driving Licence Information: Class: 3 | | |
| | | | Date of Expiry: | | |

General Information of the Accident

| | | | | |
|--|------------------------------------|----------------|---|---------------------------------|
| Type of Accident | Injury Others | Drink Drive No | Date/Time of Accident: 05/03/2019 18:15 | Type of Location: Straight Road |
| Location: Along Road 1 TAMPINES EXPRESSWAY | | | | |
| Along TPE towards SLE, just after Tampines Avenue 10 exit | | | | |
| Weather: Clear | Road Surface: Dry | | Road Speed Limit: | |
| Traffic Flow: One Way | Traffic Control: Not Controlled | | Traffic Volume: Heavy | |
| Type of Collision: Between Moving Vehicles - Head To Rear | | | Anyone conveyed by ambulance: No | |

Details of Vehicle Involved

| Vehicle No | Type | Make | Model | Color | Condition | No of Passenger |
|------------|------|------------|---------------------------------|--------|-----------|-----------------|
| SFN2733K | Car | HONDA | VEZEL HYBRID 1.5X/AUTO | Silver | | 0 |
| SJG5955G | Car | MITSUBISHI | LANCER 1.5 MIVEC GLS 4AT | Black | | 1 |
| SMA5122P | Car | HONDA | ODYSSEY HYBRID 2.0 ABSOLUTE CVT | White | | 3 |

Police Report



**SINGAPORE
POLICE FORCE**



1/2019G306/2157

2 of 4

Police Station Of Origin
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

Report No: T/2019G306/2157

CONTINUATION OF REPORT

Details of Person Involved

| | | | |
|-----------------------------------|----------------------------|--|-----------------------------------|
| Any Pedestrian Involved: No | | | |
| No. of Pedestrians Injured: NIL | | Use of Pedestrian Crossing: NA | |
| Driver | | | |
| Name | CHANDHIRU BALASUBRAMANIAM | ID No. | S9245705B |
| Related Vehicle | SFN2733K (Car) | Contact No. | 90057603 |
| Hospital/Clinic | MEDLIFE CLINIC & SURGERY | Class of Driving Licence & Expiry Date | Class: 3 Date of Expiry: NIL |
| Date Treatment | 06/03/2019 | Date Discharge | 06/03/2019 |
| No. of Days granted Medical Leave | 03 | Degree of Injury | NIL |
| Driver | | | |
| Name | MUHAMMAD SHAFIQ BIN ROSLAN | ID No. | S9026944E |
| Related Vehicle | SJG5955G (Car) | Contact No. | 90665892 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL |
| Driver | | | |
| Name | TAN TECK PENG | ID No. | S1675404H |
| Related Vehicle | SMA5122P (Car) | Contact No. | 97905657 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL |

Brief Details.

On 06/03/2019 at about 1815hrs, I was driving my car(Registration No. SFN2733K) along TPE towards SLE, just after Tampines Avenue 10 exit, where my car was stationary due to the traffic on the 1st lane(Extreme Right Lane) of the 3lanes road. Suddenly, a 3rd vehicle(Registration No. SMA5122P) collided onto the 2nd vehicle(Registration No. SJG5595G) behind me which causes the 2nd vehicle to surge forward to hit my car's rear. I am suffered impact on my back and neck area. We then alighted from our vehicle to take photos, agree on Insurance Claim, exchange particulars, and left the scene. There is dashcamera in my car however it was not on. I later went to Medlife Clinic & Surgery and has got 3days of MC, therefore lodging this Traffic Accident report.

Police Report



**SINGAPORE
POLICE FORCE**



T/20190306/2157

Police Station Of Origin:
Hougang N.P.C.
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

3 of 4

Report No: T/20190306/2157

CONTINUATION OF REPORT

Police Report



SINGAPORE
POLICE FORCE



T/20190306/2167

4 of 4

Police Station Of Origin
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

Report No: T/20190306/2167

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

F /

Sgt 2 BOH YONG SENG

Signature Of Informant:

Chen

Signature Of Interpreter:

Not applicable

Date/Time:

06/03/2019 21:54

Officer In Charge Of Case:

TP / AEIT /

Sgt 2 SHARIFAH NOR FARIZAN BINTE SYED

MOHD SAID

Contact No: 65476172

Classification Of Case:

Authentication Stamp

NP168

Singapore Police Force

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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