



## 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	14/05/2019 12:12
Date Of Accident	13/05/2019 09:00
Exact Location Of Accident	BLK 367 BUKIT BATOK ST 31 OPEN CARPARK
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKU9004P
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MR PADMANABAN S/O JAYARAM
NRIC No	S2655317B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96907662
Alternative Phone No	OFFICE-96907662

### Vehicle Particulars

Manufacturer	TOYOTA
Model	ESTIMA
Exact Purpose for which vehicle was being used at time of accident	PARKED
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 CAR

### Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3064111800
Cover Note Number	-

### Driver

Name of Driver	MR PADMANABAN S/O JAYARAM
NRIC No	S2655317B
Date Of Birth	21/10/1963
Occupation	OUTDOOR
Date Of Driving Pass	27/11/1984
Driving Experience	34 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96907662
Fax Number	
Contact Number	OFFICE-96907662
Email Address	NOEMAIL

Address	BLK 364 BUKIT BATOK ST 31 #02-257
Postcode	650364
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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?	
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)	0

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT BATOK NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 21 BUKIT BATOK EAST AVE 4 , <b>POSTCODE:</b> 659840 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-6659999 - <b>FAX NO:</b> 66655793
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	NEVER CAPTURE
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	
Vehicle Make/Model/Colour	UNKNOWN
Details Of Properties	
Vehicle Category	NA/UNKNOWN
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

## SKETCH PLAN

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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:

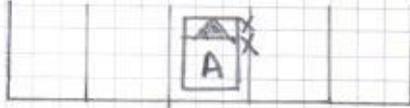
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:



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

SKETCH PLAN

Blk 367 Bukit Batok St 31 open carpark



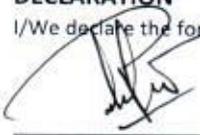
A = SKU9004P.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to Police Report

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.:





**SINGAPORE  
POLICE FORCE**



T/20190514/2031

Police Station Of Origin:  
Bukit Batok N.P.C  
21 Bukit Batok East Avenue 4 SINGAPORE  
659840  
Tel No: 1800-6659999

2 of 3

Report No. T/20190514/2031

**CONTINUATION OF REPORT**

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	PADMANABAN JAYARAM	ID No.	S2655317B
Related Vehicle	SKU9004P (Car)	Contact No.	96907662
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,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 12/05/2019 at about 0200hrs, I had parked my grey color Toyota Estima car bearing the registration number SKU9004P at Blk 367 Bukit Batok Street 31, open space car park. Everything was intact and nothing was amiss. On 13/05/2019 at about 0900hrs, when I went to retrieve my car, I discovered scratch marks on the bottom door at the driver side. I suspect the other vehicle might have grazed against my vehicle while reversing thereafter drove off without leaving any note behind. I have car cam recorder, however, it did not capture anything incriminating.



Police Station Of Origin:  
Bukit Batok N.P.C  
21 Bukit Batok East Avenue 4 SINGAPORE  
659840  
Tel No: 1800-6659999

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 3 MUHAMMAD FAZLIE BIN JOHAR <i>afha</i>
Signature Of Interpreter: Not applicable
Officer In Charge Of Case: TP / HRT / SI ABDUL KAREEM BIN ABDUL HAGUE 114 Contact No: 65476079

Signature Of Informant: <i>afha</i>
Date/Time: 14/05/2019 11:07
Classification Of Case:

Authentication Stamp  
NP168 *afha*  
Singapore Police Force

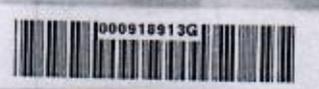
REPUBLIC OF SINGAPORE - DRIVING LICENCE

3. Licence Number **S2655317B**  
Name

**PADMANABAN S/O JAYARAM**

Birth Date **21 Oct 1963**  
Issue Date **14 Oct 2003**

000918913G

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. **S2655317B**



Name  
**PADMANABAN JAYARAM**

**பெ ஜ பத்மநாபன்**

Race  
**INDIAN**

Date of birth  
**21-10-1963**

Country/Place of birth  
**MALAYSIA**

Sex  
**M**



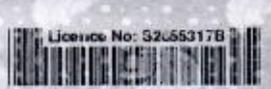


**YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES**

Class	Description	PASS DATE
Class 2B	Motorcycles not exceeding 200 cc	03 Sep 1983
Class 2A	Motorcycles between 201 cc and 400 cc	03 Sep 1983
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	27 Nov 1984

NP 428A

Licence No: S2655317B



9517027



NRIC No. **S2655317B**



Nationality  
**MALAYSIAN**

Date of issue  
**20-02-2019**

Address  
**APT BLK 364 BUKIT BATOK STREET 31  
#02-257  
SINGAPORE 650364**





中国太平保险(新加坡)有限公司  
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

MODEL  
E-SN  
AD0400A  
COMPREHENSIVE/  
AUTOSAVE

**CERTIFICATE OF INSURANCE**

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)

CERTIFICATE No.	DMPCSN3064111800	Engine No : 2AZF191399 Chassis No: ACR507067326
1. Index Mark and Registration Number of Vehicle	SKU9004P	
2. Name of Policy Holder	MR PADMANABAN S/O JAYARAM	
3. Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment	03 OCTOBER 2018	NAMED DRIVERS EX SECT. I.....S\$1,000.00 IN ADDITION TO NAMED DRIVERS EX:
4. Date of Expiry of Insurance	05 OCTOBER 2019	EX SECT. I - AGE <= 25.....S\$3,000.00 EX SECT. I - AGE >= 26.....S\$500.00 * AGE AS AT DATE OF ACCIDENT
5. Persons or Classes of Persons entitled to drive *		EX ON WINDSCREEN.....S\$100.00

(A) THE POLICYHOLDER.

(B) ANY OTHER PERSON WHO IS DRIVING ON THE POLICYHOLDER'S ORDER OR WITH HIS 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.

6. Limitations as to use: \*

USE FOR SOCIAL, DOMESTIC AND PLEASURE PURPOSES AND FOR THE POLICYHOLDER'S BUSINESS.  
THE POLICY DOES NOT COVER USE FOR HIRE OR REWARD TUITION DRIVING TEST 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 THE MOTOR TRADE.

EXCESS WHICHEVER IS APPLICABLE FOR LOSSES OCCURRING OUTSIDE SINGAPORE (CONSTRUCTIVE TOTAL LOSS / THEFT) WILL BE DOUBLED.

ONE TIME WAIVER OF EXCESS FOR THE FIRST S\$500 WILL APPLY TO THE INSURED AND NAMED DRIVERS IN THE EVENT OF OWN DAMAGE CLAIM AT OUR AUTHORISED WORKSHOPS FOR EACH POLICY YEAR.

HIRE PURCHASE CO. : SWEE SENG CREDIT PTE LTD AS HP OWNER

\* Limitations 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.

**I/We hereby Certify** that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia). Please see reverse For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.



Countersigned By:

Authorised Officer

Authorised Signatory