

## 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	09/11/2019 12:20
Date Of Accident	13/05/2019 10:00
Exact Location Of Accident	25 NORTH BRIDGE ROAD SERVICE LANE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLB9455J
<b>Insured/Policyholder</b>	
Name Of Registered Owner	GOWRI SANKAR KRISHNAMOORTHY
NRIC No	S2726439E
Email Address	SREEVENDAR@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-97879916
Alternative Phone No	OTHERS-81518140

### Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	GOLF 1.4 TSI AT 5G13HZ HID SR
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPPHQ19-002586
Cover Note Number	27/04/2019 - 26/04/2020

### Driver

Name of Driver	SETHUMANI RAMESH KUMAR
Passport No/FIN	G7815263Q
Date Of Birth	09/07/1982
Occupation	OUTDOOR
Date Of Driving Pass	07/05/2019
Driving Experience	0 YEAR AND 0 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-81518140
Fax Number	
Contact Number	
Email Address	SREEVENDAR@YAHOO.COM.SG

Address	-
Postcode	
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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 PROPERTY
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
Number of Passengers (Including Driver)	1

#### Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO THE ATTACHED SKETCH PLAN BY DRIVER.

#### Attachment(s)

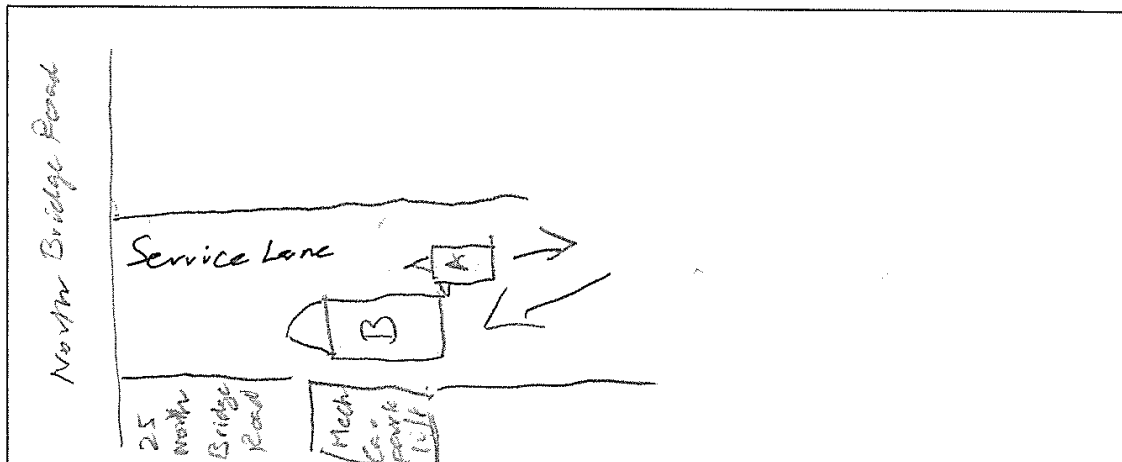
Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YP684X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	SU MEE HUA
NRIC/Passport Number	F0261534R
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

# Sketch Plan Pg. 1

Date of accident: 13/05/19 Time: About 10am Location: 25 North Bridge Road Service Lane  
 My Vehicle A: SLB 9455 J Vehicle B: YF 684 X Vehicle C: \_\_\_\_\_  
 SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I on 13<sup>th</sup> May 2019 at about 10 am was about to drive in my boss car into the car park lift, waiting for the lift to come down. When I started reversing to go into lift, the delivery lorry didn't wait for me to park and cut through the left. Seeing the lorry coming at me, I changed gear and moved forward to the right to avoid the lorry and reversed again on the right side of the lane. The lorry while going on the left got one obstruction and stopped suddenly and in the process braked the left side mirror. The mirror case came off. The driver apologised to my boss and tried to fix the case. My boss forgave him and fixed himself. He said he won't proceed with the claim.

veh B: Su Mee Hue / F0861534R

☐ Claim OD/TP at Ah Lim Motor ☐ Claim OD/TP at other workshop ☒ Reporting Only

Remarks: Please forward a copy of my efile accident report to:

My workshop :

Email address :

& myself :

Email address :

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

## DECLARATION

I/We declare the foregoing particulars are true in every respect.

*[Signature]*

Policyholder's Signature

Date & Time:

*[Signature]*

Driver's Signature

(If driver is not the policyholder)

Date & Time:



Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

AH LIM MOTOR COMPANY

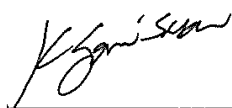
SKETCH PLAN

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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:

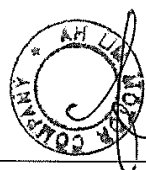
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.:

Insurance Company Limited  
 Road #17-00 Tower Block MND Complex Singapore 069110  
 23 9433 | fax 65 6224 3903 | www.eqnsurance.com.sg  
 1978-00490-N



# PRIVATE CAR SCHEDULE

Page 1 of 9

Agency	B000006	Class of Policy	PRIVATE CAR	Policy Number	DMPPHQ19-002586
Account	B000006	Issued on	08/04/2019 in Singapore		
Client	0165197	Acceptance Date	08/04/2019		

Period of Insurance from 27/04/2019 to 26/04/2020, both dates inclusive

Insured's Name GOWRI SANKAR KRISHNAMOORTHY  
 Address BLK/HOUSE NO. 16 #10-41  
 UPPER SERANGOON CRESCENT  
 SINGAPORE 534028

52786439E

Business/Occupn Manager (Office)  
 Hire Purchase DBS BANK LTD

Premium	Basic Annual Premium	SGD1,535.51		
	Premier Plan	SGD307.10		
	Premium after NCD	SGD1,842.61	Premium Due	SGD1,842.61
			Premium GST	SGD128.98
			Total Due	SGD1,971.59

Risk No. 001	PRIVATE CAR				
1. Registration	SLB9455J	Make/Model	VOLKSWAGEN GOLF 1.4 Hatchback	1395cc	
Type of Cover	Comprehensive	No. of seats	5	Body Type	Hatchback
Engine No.	CZC410250	Capacity cc	1395	Yr of Manuf/Regn	2015/2016
Chassis No.	WVWZZZAUZGW069352			NCB%	10.00
				Certificate Ref.	MX2
Sum Insured: Market Value at the time of loss			SGD0.00		
Insured/Named Drivers			SGD500.00		
Unnamed Drivers			SGD1,000.00		
YEID	Additional		SGD3,000.00		
Named Drivers Insured					

## PRIVATE CAR COMPREHENSIVE - PREMIER PLAN (Ver. 8)

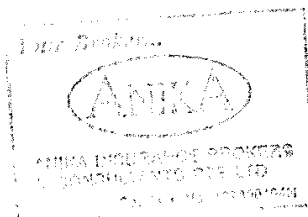
For information on Motor Claims Framework (MCF), please visit GIA websites  
 (www.gia.org.sg /pdfs /Industry /Motor /MCF2010\_Brochure.pdf)

The Policy is subject to the following Clauses, Warranties, Memo, Endorsement,  
 Exclusions as printed herein and/or attached hereto:-

### EXCESS - OWN DAMAGE CLAIMS

We will not pay for the Excess specified in the Policy Schedule or the  
 Certificate of Insurance. You will have to pay the Excess for every claim made  
 against us for own damage claims to your vehicle under Section 1.


If we have made any payment under Section 1 which includes this Excess, you have  
 to refund us the amount of the Excess.



Continued on page 2



**REPUBLIC OF SINGAPORE DRIVING LICENCE**




Licence Number: **G7815263Q**  
 Name: **SETHUMANI RAMESH KUMAR**  
 Birth Date: **09 Jul 1982**  
 Issue Date: **07 May 2019**  
 Valid Till: **14/05/2024**

002931032B

**S PASS**  
 Employment of Foreign Manpower Act (Chapter 91A)  
 Republic of Singapore

Employer:  
**RB CAPITAL HOTELS PTE. LTD.**



Name:  
**SETHUMANI RAMESH KUMAR**  
 S Pass No.: **0 33361173**  
 Sector: **SERVICE**

K0814480

STRICTLY  
FOR WORKSHOP USAGE

USE FOR ACCIDENT  
REPORTING ONLY

*Driver*

*slp 8151 8140*

**YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)**

Class	Description	Effective Date
Class 2B	Motorcycles =< 200 cc	26 Dec 2008
Class 3C	Motor cars with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver	07 May 2019

Licence No: G7815263Q

**STRICTLY  
FOR WORKSHOP USAGE**

**USE FOR ACCIDENT  
REPORTING ONLY**

**VISIT PASS**  
 Immigration Regulations

25-09-2019

Name:  
**SETHUMANI RAMESH KUMAR**

FIN:  
**G7815263Q**


Date of Birth: **09-07-1982** Sex: **M**

Nationality:  
**INDIAN**

**MULTIPLE JOURNEY VISA ISSUED**


**YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.**

Download SGWorkPass App to check status



NP 428A

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S2726439E



Name  
GOWRI SANKAR  
KRISHNAMOORTHY  
கி கௌரிசங்கர்

Race  
INDIAN

Date of birth 02-04-1965 Sex M

Country of birth INDIA

2726439E


STRICTLY  
FOR WORKSHOP USAGE  
USE FOR ACCIDENT  
REPORTING ONLY

owner


Ref. 9787 9816

Email. sreelendar@yahoo.com.sg

STRICTLY  
FOR WORKSHOP USAGE  
USE FOR ACCIDENT  
REPORTING ONLY



NRIC No. S2726439E



Date of issue  
14-05-2007

16 UPPER SERANGOON CRESCENT #10-41  
SINGAPORE 534028

NRIC No: S2726439E Date: 13/09/2016

By  
cy. No  
ex: 12

Wsl. 1.

Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo

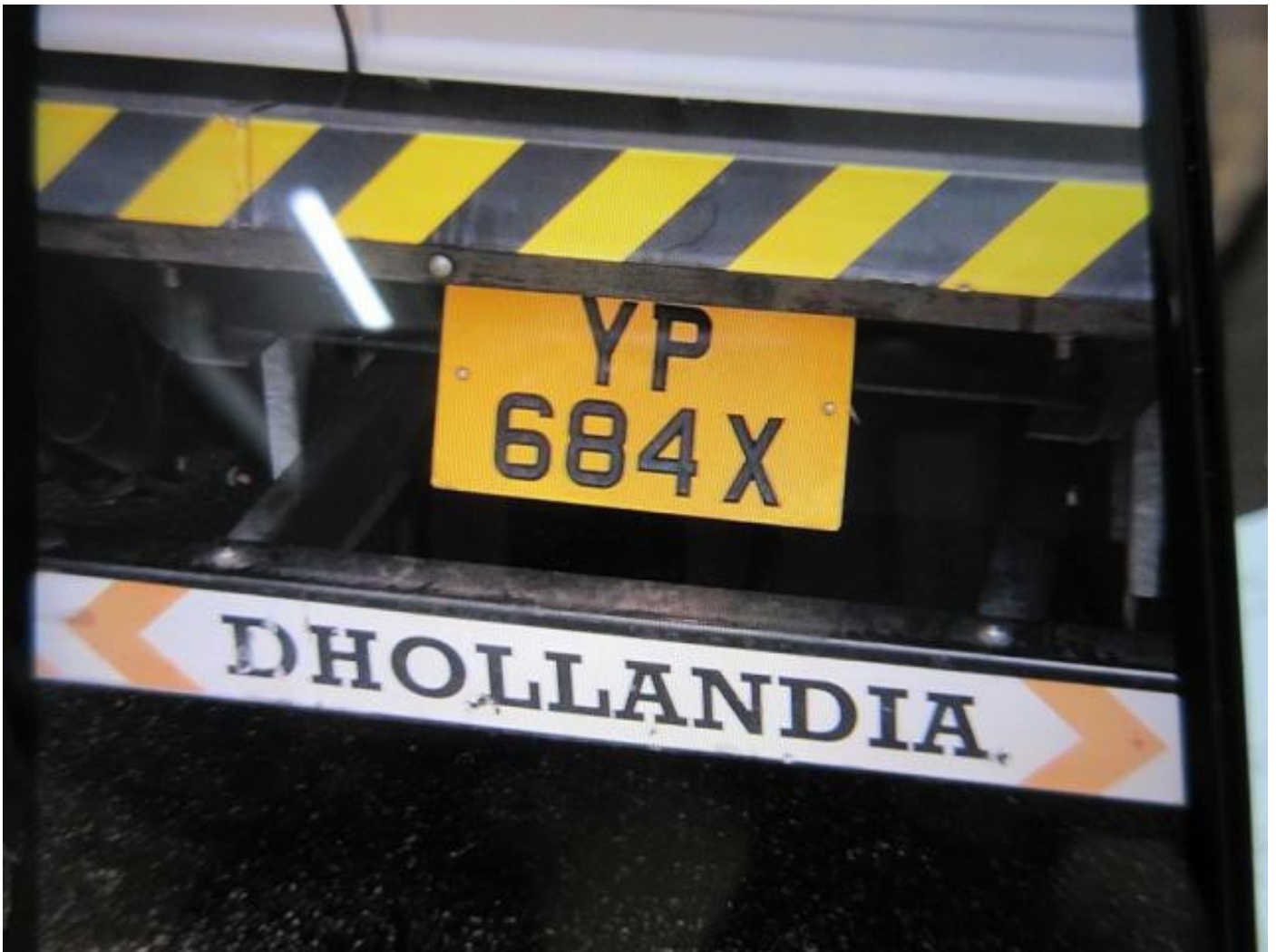


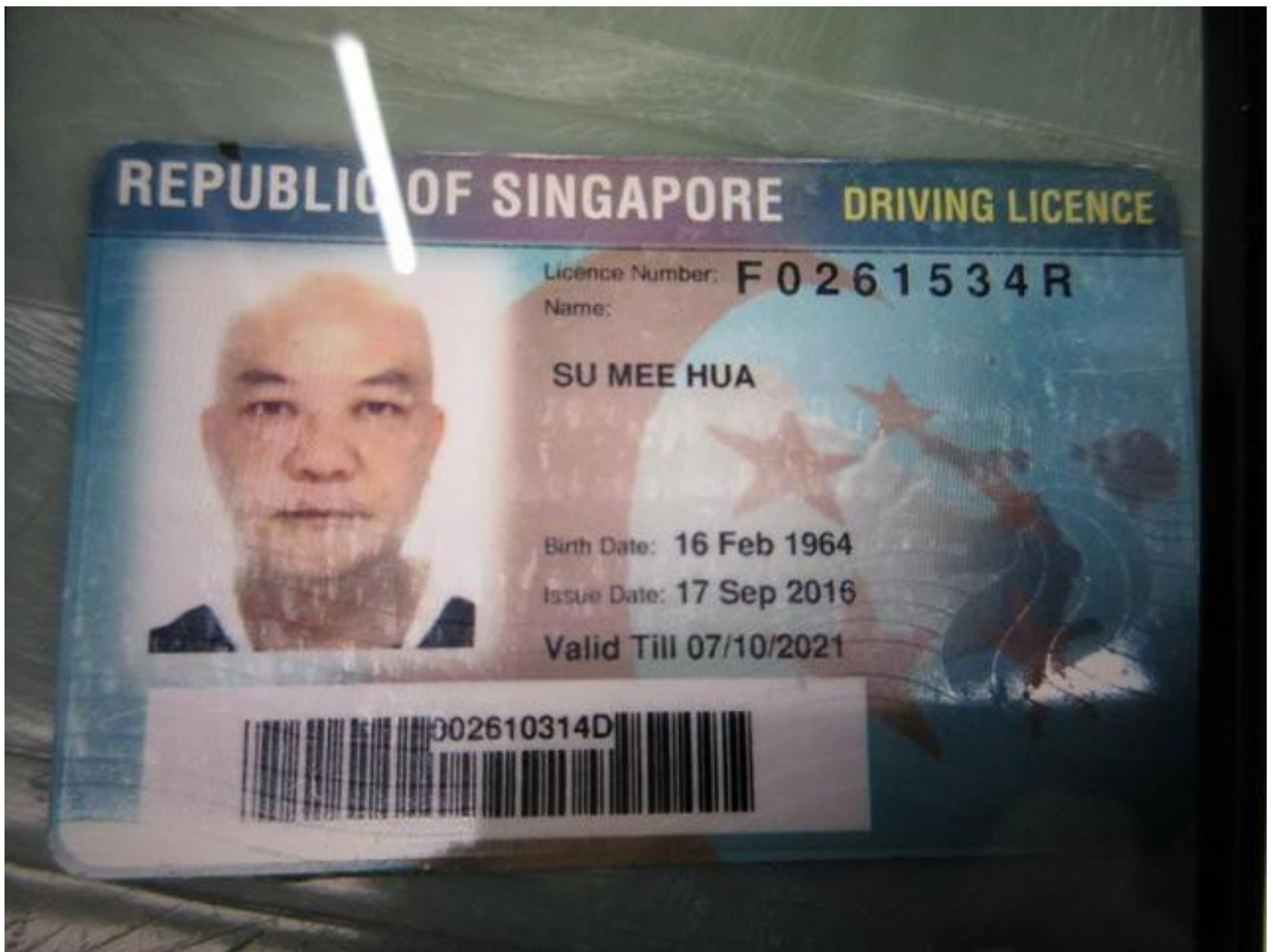
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