

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 13:44
Date Of Accident	10/05/2019 15:35
Exact Location Of Accident	BUKIT TIMAH ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJZ9074Y
Insured/Policyholder	
Name Of Registered Owner	AM AUTOMOTIVE(S) PTE LTD
Co Reg No	199405965C
Email Address	ADMIN@AMAUTO.SG
Mobile Phone No	(LOCAL) +65-96373554
Alternative Phone No	OFFICE-96373554

Vehicle Particulars

Manufacturer	CHEVROLET
Model	CAPTIVA-2.0 D (A)
Exact Purpose for which vehicle was being used at time of accident	
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	VCX/P1664216
Cover Note Number	

Driver

Name of Driver	MADURAI MURTHY(MR)
NRIC No	F8277378U
Date Of Birth	04/02/1970
Occupation	INDOOR
Date Of Driving Pass	06/07/2015
Driving Experience	3 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96122723
Fax Number	
Contact Number	OFFICE-96122723
Email Address	NOEMAIL

Address	C/O NO. 27 FOCH ROAD #02-07 HOA NAM BUILDING
Postcode	SINGAPORE
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - LEASING
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
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

PLEASE SEE SKETCH PLAN.

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	SLA8407K
Vehicle Make/Model/Colour	MERCEDES BENZ
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	DAVID YUEN CHAO WEI
NRIC/Passport Number	S9620032C
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

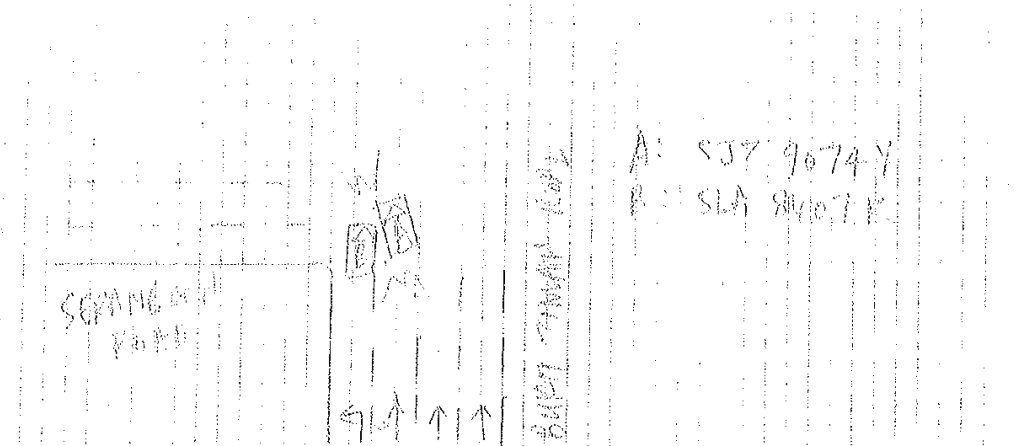
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the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



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

⑧ PLEASE REFER TO STATEMENT ATTACHED.

I REPORTED LATE AS I WAS NOT GIVEN FULL INFORMATION BY THE RENTAL COMPANY UNTIL TODAY. THAT'S WHY I REPORTED TODAY.

DECLARATION

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

Policyholder's Signature
Date & Time:
Company Chop (if applicable)

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

Reporting Centre Personnel's Signature
Name:
NRIC/EPN No:

MOTOR VEHICLE ACCIDENT REPORT

BETWEEN

VEHICLE NO: SLA 8407 K / DRIVER : DAVID YUEN CHAO WEI

AND

VEHICLE NO: SJZ 9074 Y / DRIVER : MADURAI MURTHY

(VICTIM)

BROADSIDE COLLISIONS

NO INJURIES IN CAR ACCIDENT

I AM FILING A REPORT FOR A CAR ACCIDENT IN WHICH I WAS INVOLVED ON THE 10TH MAY 2019 APPROXIMATELY 1532 HRS I, MADURAI MURTHY, HOLDER OF REPUBLIC OF SINGAPORE DRIVING LICENCE NO: F8277378U, WAS DRIVING VEHICLE NO: SJZ 9074 Y ALONG BUKIT TIMAH ROAD AND MY INTENTION IS TO MAKE A LEFT TURN TOWARDS SERANGOON ROAD, TEKKA CENTRE / MARKET.

I WAS ON THE 2ND LANE AT BUKIT TIMAH ROAD WITH 2 ARROWS IN MY FAVOUR, 1 ARROW PROCEEDING STRAIGHT TO SUNGAI ROAD CONTINUING FROM BUKIT TIMAH ROAD AND THE SECOND ARROWS SHOWING I CAN TURN LEFT TO SERANGOOD ROAD.

BUT, THE VEHICLE WHICH HIT ME WAS IN THE 1ST LANE AND HAVE ONLY ONE OPTION TURN LEFT BUT HE HIT STRAIGHT INSTEAD.

THIS IS HOW HE COLLIDED INTO MY VEHICLE AT THE LEFT FRONT TIRE AND SIDE DOORS AND HIS RIGHT HEAD LIGHT.

WE HAVE ATTACHED ALL POSSIBLE EVIDENT TO SETTLE AMICABLY AS IT A STRAIGHT FORWARD AND ADMITTED CASE.



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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