

## 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	27/05/2019 12:35
Date Of Accident	26/05/2019 11:40
Exact Location Of Accident	DEMPSEY RD CARPARK
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLF7114K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	EASYDRIVE CAR RENTAL
Co Reg No	53375868L
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-63339441

### Vehicle Particulars

Manufacturer	KIA
Model	FORTE K3 1.6A
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL 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 HIRE

### Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMHCSN1907491900
Cover Note Number	

### Driver

Name of Driver	N RAJA SEKAR
NRIC No	S1502164J
Date Of Birth	25/05/1961
Occupation	OUTDOOR
Date Of Driving Pass	31/10/1980
Driving Experience	38 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91703577
Fax Number	
Contact Number	OFFICE-91703577
Email Address	NOEMAIL

Address	BLK 75 WHAMPOA DRIVE #04-374
Postcode	320075
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - MAJOR/MINOR RD
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?	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	WHAMPOA NEIGHBOURHOOD POLICE POST
Police Station Address	<b>ROAD:</b> BLK 29 JALAN BAHAGIA , <b>POSTCODE:</b> 320029 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-2507999 - <b>FAX NO:</b> 63554314
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT - T/20190526/2060.

#### 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	SKG5755E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	CHARLIE
NRIC/Passport Number	
Contact Number	90285465
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver) 1

**DETAILS OF INJURED PERSON 1**

Name N RAJA SEKAR

Approximate Age

Injuries Sustain BODY

Injured person in which vehicle? SLF7114K

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.
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. 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.

#### EasyDrive Car Rental

200 Jalan Sultan  
#02-38 Textile Centre  
Singapore 199018  
Tel: 6673 5989 Fax: 6863 2418  
Email: easydrivesg@gmail.com  
UEN: 533758681

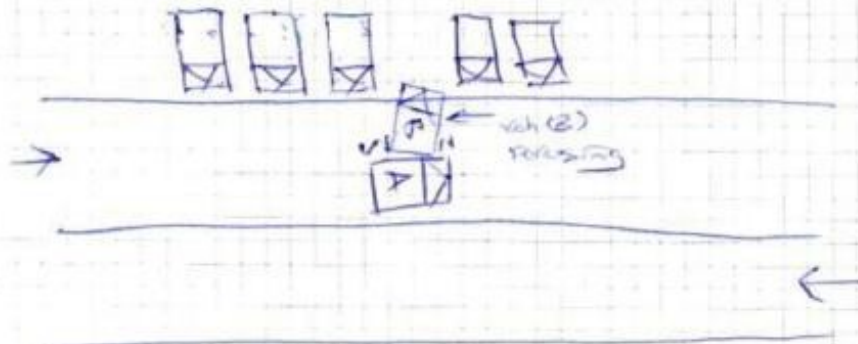
Policyholder's Signature  
Date & Time:

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

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

# Accident Sketch Plan

## SKETCH PLAN



Dumping Red Gasfork inside Ms. Jian

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As per police report no: T/20170526/2060

A - SF 7114K

B - SKG 5755E

## DECLARATION

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

**EasyDrive Car Rental**

200 Jalan Sultan

#02-38 Textile Centre

Singapore 189018

Tel: 6672 5980 Fax: 6663 9418

Policyholder's Signature

Email: easydrivesg@gmail.com

UEN: S3375868L

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/20190526/2060

Police Station Of Origin:  
Whampoa NPP  
29 Jalan Bahagia #01-368 SINGAPORE  
320029  
Tel No: 1800-2507999

1 of 3

Report No. T/20190526/2060

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/05/2019 15:32	Video Report No.:	Station Diary No.: 22
--	-------------------	--------------------------

### Informant's Particulars

Name of Informant: N RAJA SEKAR			Address: APT BLK 75 WHAMPOA DRIVE #04-374 SINGAPORE 320075		
ID Type / ID No.: NRIC NO / S1502134J			Contact No.: Home/Office: Mobile: 91703577		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 58	Date of Birth: 25/05/1961	Type of Informant: Driver		
Race: Indian			Language:		Institution / School Name:
Occupation: PRIVATE DRIVER			Driving Licence Information: Class: 2B,3,4,5 Date of Expiry:		

### General Information of the Accident

Type of Accident: Non-Injury	Drink Drive: No	Date/Time of Accident: 26/05/2019 11:40	Type of Location: Car Park
Location: Along Road 1 DEMPSEY ROAD			
Carpark inside of the Jlang at Dempsey			
Weather: Clear	Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way	Traffic Control: Not Controlled	Traffic Volume: No Traffic	
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
SKG5755E	Car				Slightly Damaged	0
SLF7114K	Car				Slightly Damaged	0

### Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

# Police Report



**SINGAPORE  
POLICE FORCE**



T/20190526/2060

Police Station Of Origin:  
Whampoa NPP  
29 Jalan Bahagia #01-368 SINGAPORE  
320029  
Tel No: 1800-2507999

2 of 3

Report No. T/20190526/2060

## CONTINUATION OF REPORT

<b>Driver</b>			
Name	Charles Philip thoms		ID No. S8785410H
Related Vehicle	SKG5755E (Car)		Contact No. 90285465
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
<b>Driver</b>			
Name	RAJA SEKAR		ID No. S1502164J
Related Vehicle	SLF7114K (Car)		Contact No. 91703577
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL		Class of Driving Licence & Expiry Date Class: 2B,3,4,5 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	03	Degree of Injury	Slight

### Brief Details.

On 26/05/2019 at about 1138hrs, after I dropped my passenger off at the Min Jiang drop off point, I made a U-turn to exit from the location. While I was driving, another vehicle (V2), reversed and hit onto at both sides of my door. I was behind his vehicle when he is reversing. I was shock as he was reversing in a very fast speed. I managed to turn my vehicle (V1) slightly to the right before he hit onto my vehicle. As a result from the accident, my chest hit onto the steering wheel and I could not catch my breath as I was in a state of shock. I was given three days MC for that.

Both of my vehicle's left front and side door is dented and paint was being scripted off. While his vehicle's rear bottom right paint was being scripted off as well as there is scratches. V2 was being shifted a bit to the front and he mentioned that he is obstructing the traffic flow. I would like to state that we did not call for police and ambulance assistance at that point of time. I would like to state that I have in-car camera but I am not sure if it have captured the accident.

I am lodging this report for record and insurance claim purposes.

# Police Report



SINGAPORE  
POLICE FORCE



T/20190526/2060

Police Station Of Origin:  
Whampoa NPP  
29 Jalan Bahagia #01-368 SINGAPORE  
320029  
Tel No: 1800-2517999

3 of 3

Report No: T/20190526/2060

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: E / Sgt 1 JANSEN GOH JIAJUN 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 26/05/2019 15:32
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476161	Classification Of Case:
Authentication Stamp NP158 	



Accident Photo



**Accident Photo**



Accident Photo





Accident Photo

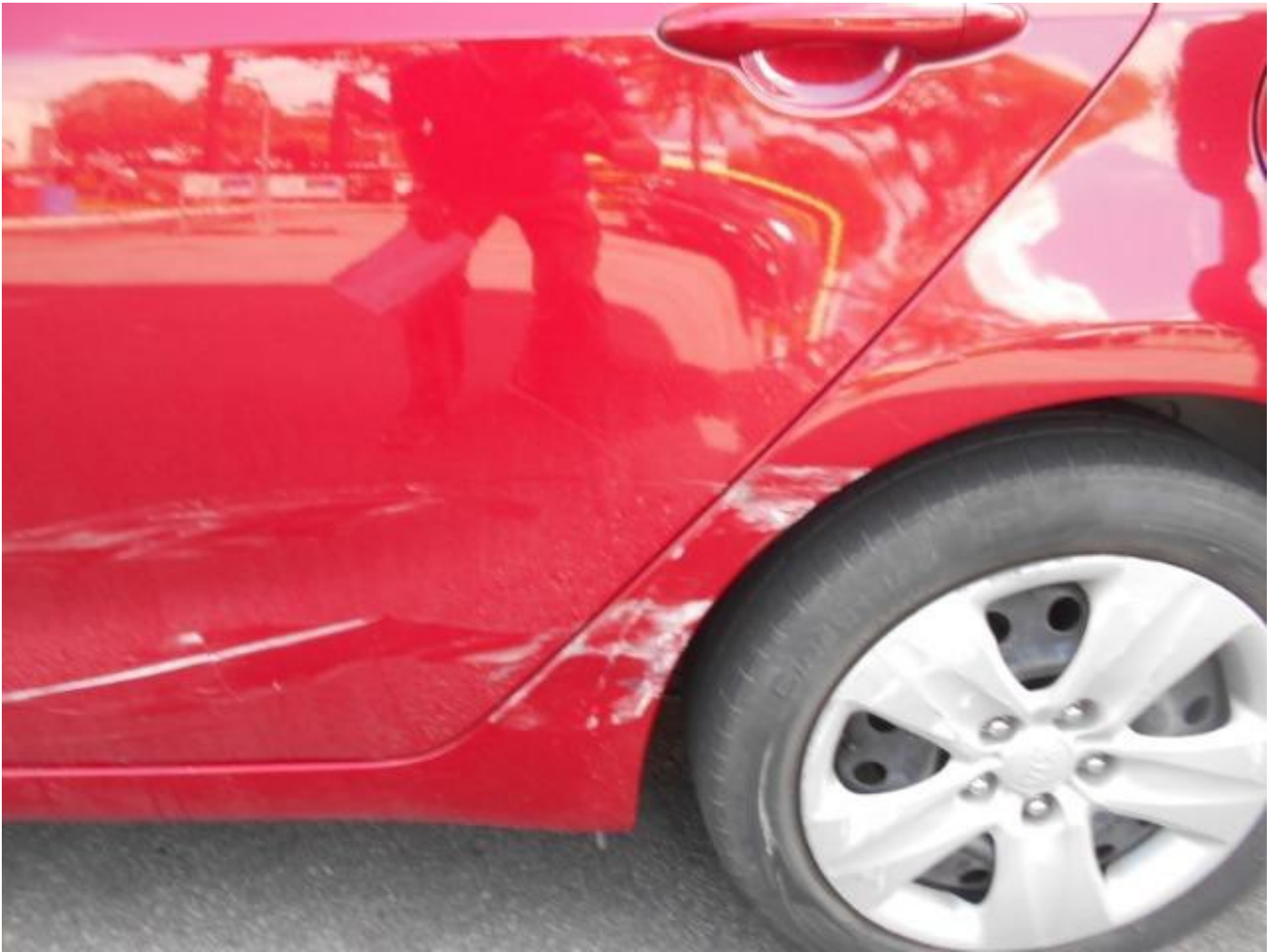


**Accident Photo**





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo

