

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	11/06/2019 11:12
Date Of Accident	19/05/2019 20:05
Exact Location Of Accident	ALONG AMBER ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBH6834E
-----------------------------	----------

Insured/Policyholder

Name Of Registered Owner	RAMASAMY RAJKUMAR BHARATHI
Passport No/FIN	G7477655N
Email Address	RKB20@YMAIL.COM
Mobile Phone No	(LOCAL) +65-91055241
Alternative Phone No	OTHERS-91055241

Vehicle Particulars

Manufacturer	BAJAJ
Model	PULSAR 200 NS-200CC
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	MOTORCYCLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5082636543-02
Cover Note Number	

Driver

Name of Driver	RAMASAMY RAJKUMAR BHARATHI
Passport No/FIN	G7477655N
Date Of Birth	20/07/1978
Occupation	INDOOR
Date Of Driving Pass	28/09/2011
Driving Experience	7 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91055241
Fax Number	
Contact Number	OTHERS-91055241
Email Address	RKB20@YMAIL.COM

Address	BLK 41 HOLLAND DRIVE #03-15
Postcode	270041
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	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?	YES
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)	2
Passenger 1	NAME: : JESSICA DA COSTA GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	ALEXANDRA NPP
Police Station Address	ROAD: BLK 46 TANGLIN HAIT RD #01-328 , POSTCODE: 140462 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190609/2069

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	SLL5676L
Vehicle Make/Model/Colour	MERCEDES BENZ
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	SHUA
NRIC/Passport Number	
Contact Number	82188781

Postcode

Nature Of Damage

Passenger 1 NAME: _____ :

GENDER: :

Name RAMASAMY RAJKUMAR BHARATHI

Approximate Age

Injuries Sustain SERIOUS INJURY

Injured person in which vehicle?	FBH6834E
----------------------------------	----------

Were seat belts worn?

Was this injured conveyed to hospital by ambulance? YES

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.

Ru 728-01 10/06/15

Policyholder's Signature
Date & Time:

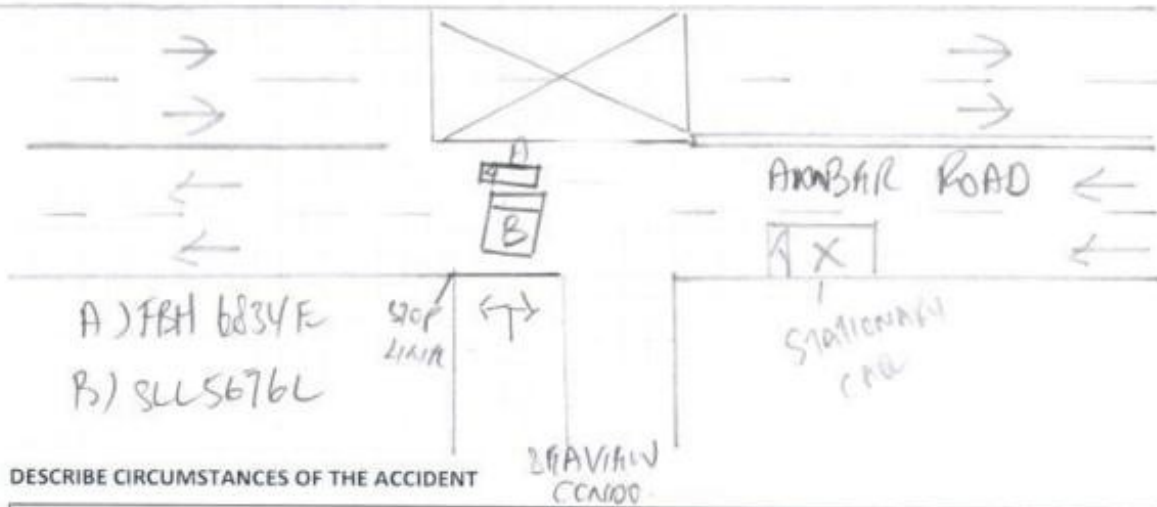
Driver's Signature
(If driver is not the policyholder)
Date & Time:

11/06/2015
Roshan

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

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PS REFER TO POLICE REPORT
7/20/2009/2009

DECLARATION

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

Policyholder's Signature: [Signature] Date & Time: 10/06/19

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

11/06/2019
Reporting Centre Personnel's Signature
Name: Reshika
NRIC/FIN No.: 10103

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190609/2069

Police Station Of Origin:
Alexandra NPP
46 Tanglin Halt Road #01-328 SINGAPORE
140462
Tel No: 1800-4739999

2 of 4

Report No. T/20190609/2069

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBH6834E	NTUC Income Insurance Co-Operative Limited	5082636543-02	22/08/2018	21/08/2019

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	RAMASAMY RAJKUMAR BHARATHI	ID No.	G7477655N
Related Vehicle	FBH6834E (Motorcycle)	Contact No.	91055241
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	19/05/2019	Date Discharge	09/06/2019
No. of Days granted Medical Leave	30	Degree of Injury	Serious
Witness			
Name	SHUA	ID No.	NIL
Related Vehicle	SLL5676L (Car)	Contact No.	82188781
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 19/05/2019, at about 2003hrs, I was riding Motorcycle, vehicle plate number: FBH6834E, along Ambre Rd. I was on the 2nd lane of Amber Rd towards Marine Parade Rd. I noticed that there was a Silver Mercedes Benz, car plate number: SLL5676L, along the small road coming out of Sea View Condominium. There was a stop line, however, the silver Mercedes Benz did not stop and proceeded to move towards the yellow box along Ambre Rd towards Haig Rd. The Mercedes Benz hit on to the side of my motorcycle and my bike skidded to the other side of the road. My friend namely Jessica Da Costa, hand phone number: 85492946, who was on my bike sustained small scratches. My bike had landed on my right leg and I couldn't take out my leg under the bike. A Passerby helped me lift up the bike and helped bring my bike and I to the pavement. The driver of the silver Mercedes Benz stopped his car at the side of the road and provided the following particulars. His name is Mr Shua and his hand phone number: 82188781.

Later the police and ambulance arrived at scene. I was conveyed to Tan Tock Seng Hospital. The police attended to my friend namely Jessica and Mr Shua. My friend namely Jessica did not see the doctor as

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190609/2069

Police Station Of Origin:
Alexandra NPP
46 Tanglin Halt Road #01-328 SINGAPORE
140462
Tel No: 1800-4739999

1 of 4

Report No. T/20190609/2069

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 09/06/2019 14:01		Vide Report No.:		Station Diary No.: 16	
Informant's Particulars					
Name of Informant: RAMASAMY RAJKUMAR BHARATHI			Address: APT BLK 41 HOLLAND DRIVE #03-15 SINGAPORE 270041		
ID Type / ID No.: FIN NO / G7477655N			Contact No.: Home/Office: Mobile: 91055241		
Nationality: INDIAN			Email:		
Sex: Male	Age: 40	Date of Birth: 20/07/1978	Type of Informant: Rider		
Race: Indian			Language: English		Institution / School Name:
Occupation: ASSISTANT ENGINEERING EXECUTIVE			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 19/05/2019 20:05	Type of Location: Straight Road
Location: Along Road 1 AMBER ROAD				
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 Side			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBH6834E	Motorcycle	BAJAJ CHETAK	PULSAR 200 NS MANUAL	Yellow	Slightly Damaged	1
SLL5676L	Car	MERCEDES BENZ			Slightly Damaged	1

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
-------------	-------------------	--------------	-----------	-------------

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190609/2069

Police Station Of Origin:
Alexandra NPP
46 Tanglin Halt Road #01-328 SINGAPORE
140462
Tel No: 1800-4739999

3 of 4

Report No: T/20190609/2069

CONTINUATION OF REPORT

her injuries were minor.

I am not sure about the damages to my bike and the other party's vehicle. My Bike was towed by traffic police.

I was admitted in Tan Tock Seng Hospital from 19/05/2019, at 2046hrs to 09/06/2019, 1015hrs. The doctors gave me a 30days hospitalization leave from 19/05/2019 to 17/06/2019. I sustained a closed fracture to tibia and fibula on my right lower leg. I went through operations two times and I have an upcoming appointment at Tan Tock Seng.

Vide to incident T/20190520/2031 and TP/IP31971/2019.

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20190609/2069

Police Station Of Origin:
Alexandra NPP
46 Tanglin Halt Road #01-328 SINGAPORE
140462
Tel No: 1800-4739999

4 of 4

Report No. T/20190609/2069

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:

D /

Sgt 2 TAN HONG CHI, SEAN

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Sr Staff Sgt NOR FAIZAL BIN YAHYA

Contact No.: 65476202

Signature Of Informant:

Date/Time:

09/06/2019 14:01

Classification Of Case:

Authentication Stamp
NP168

5/1/17

1706090002

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



A close-up photograph of a car's engine compartment. The focus is on a black plastic engine cover or bracket. On its surface, there is a yellow-stamped alphanumeric code: 'K36FZXDCB000618*'. Several grey hoses and a corrugated black hose are visible in the background, along with various metal engine components and a green plastic clip.

Accident Photo

