

## 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	31/08/2019 11:07
Date Of Accident	29/08/2019 07:10
Exact Location Of Accident	DEPOT RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKA2166G
<b>Insured/Policyholder</b>	
Name Of Registered Owner	THEDJANAMURTHI NJANESWARI
NRIC No	S1192583I
Email Address	PRIYAPATIL_@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-93364950
Alternative Phone No	OFFICE-93364950

### Vehicle Particulars

Manufacturer	TOYOTA
Model	VIOS
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	PRIVATE CAR

### Insurance Company

Name of Insurance Company	GREAT EASTERN GENERAL INSURANCE LIMITED
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2019-V0104210
Cover Note Number	

### Driver

Name of Driver	PRIYA D/O SUBHASH P PATIL
NRIC No	S9125296A
Date Of Birth	26/07/1991
Occupation	INDOOR
Date Of Driving Pass	23/11/2017
Driving Experience	1 YEAR AND 9 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-87492059
Fax Number	
Contact Number	
Email Address	PRIYAPATIL_@HOTMAIL.COM

Address	BLK 557 PASIR RIS ST 51 #06-207 S510557
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
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)	1

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY
Police Station Address	<b>ROAD:</b> 10 UBI AVENUE 3 , <b>POSTCODE:</b> 408865 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 65470000 - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO ATTACHED POLICE REPORT

#### 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	SLJ4974J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAN SEOW NGEE
NRIC/Passport Number	
Contact Number	91722110
Address	NA
	NA
Postcode	NA
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1	
Name	PRIYA D/O SUBHASH P PATIL
Approximate Age	
Injuries Sustain	KNEE, CHEST & BACK PAIN
Injured person in which vehicle?	SKA2166G
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

**SKETCH PLAN**

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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.

\_\_\_\_\_  
Policyholder's Signature  
Date & Time:

\_\_\_\_\_  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 11.05 31/08

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







**SINGAPORE  
POLICE FORCE**



T/20190829/2056

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

1 of 3

Report No. T/20190829/2056

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 29/08/2019 12:01	Vide Report No.:	Station Diary No.:
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**Informant's Particulars**

Name of Informant: PRIYA D/O SUBHASH P PATIL			Address: APT BLK 557 PASIR RIS STREET 51 #06-207 SINGAPORE 510557		
ID Type / ID No.: NRIC NO / S9125296A			Contact No.: Home/Office: Mobile: 87492059		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 28	Date of Birth: 26/07/1991	Type of Informant: Driver		
Race: Indian			Language:		Institution / School Name:
Occupation: EXECUTIVE			Driving Licence Information: Class: Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 29/08/2019 07:10	Type of Location:
Location: Along Road 1 DEPOT ROAD  DEPOT ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision:				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKA2166G	Car	TOYOTA	VIOS E AUTO	Blue	Seriously Damaged	0

**Details of Person Involved**

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



**SINGAPORE  
POLICE FORCE**



T/20190829/2056

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

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Report No. T/20190829/2056

**CONTINUATION OF REPORT**

<b>Driver</b>			
Name	PRIYA D/O SUBHASH P PATIL		ID No. S9125296A
Related Vehicle	SKA2166G (Car)		Contact No. 87492059
Hospital/Clinic	SINGAPORE GENERAL HOSPITAL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	29/08/2019	Date Discharge	29/08/2019
No. of Days granted Medical Leave	05	Degree of Injury	NIL
<b>Driver</b>			
Name	TAN SOEW NGEE		ID No. S7836406H
Related Vehicle	NIL		Contact No. 91722110
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 THE STATED DATE, TIME AND LOCATION  
I WAS DRIVING MY CAR STRAIGHT WHEN ANOTHER CAR DROVE OUT FROM THE CARPARK,  
THE DRIVER DID NOT STOP AT THE STOP LINE AND ACCELERATE FORWARD. I HORN AND  
BRAKE BUT THE CAR WAS STILL GOING FORWARD.  
IN THE MIDST OF AVOIDING, I HIT ONTO HIS CAR AND MY CAR STEER TOWARDS THE BUS  
STOP AND HIT ONTO THE BUS STOP SIGNAGE. I WAS CONVEYED TO SGH AND WAS GIVEN 5  
DAYS OF MC. MY CAR WAS COMPOUNDED.  
I DID NOT GET TO TAKE A CLEARER PICTURE OF ANOTHER CAR NUMBER PLATE.



**SINGAPORE  
POLICE FORCE**



T/20190829/2056

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

3 of 3

Report No. T/20190829/2056

**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:  
TP /  
EUGENE AW WEI XUAN

Signature Of Interpreter:  
Not applicable


Officer In Charge Of Case:  
TP / GIT /  
Sr Staff Sgt ~~CHONG GUAN FATT~~ *Io Daniel Yen*  
Contact No.: 65476093 *tel: 6547 6252*

Authentication Stamp  
NP168

Signature Of Informant:

*[Signature]*


Date/Time:  
29/08/2019 12:01

Classification Of Case:  
 **SINGAPORE  
POLICE FORCE**

Signature: *[Signature]*



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S9125296A



Name  
PRIYA D/O SUBHASH P  
PATIL

Race  
INDIAN

Date of birth  
26-07-1991

Sex  
F

Country of birth  
SINGAPORE

FOR KFS  
ACCIDENT CLAIM  
USE ONLY


REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S9125296A

Name  
PRIYA D/O SUBHASH P PATIL

Birth Date 26 Jul 1991

Issue Date 23 Nov 2017




002746823F

Driver

Barcode

NRIC No. S9125296A



Date of issue  
05-08-2006

Address  
APT BLK 607 PASIR RIS STREET 51  
#05-207  
SINGAPORE 510557

FOR KFS  
ACCIDENT CLAIM  
USE ONLY

1915152

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

EFFECTIVE DATE 23 Nov 2017

Class 3A Motor cars without clutch pedals (Auto) with unladen weight  $\leq 3000\text{kg}$  with  $\leq 7$  passengers, exclusive of driver; and other motor vehicles without clutch pedals with unladen weight  $\leq 3500\text{kg}$

NP 428A

Licence No: S9125296A

Barcode

FOR KFS  
ACCIDENT CLAIM  
USE ONLY

For Customer Service please visit  
1 Pickering Street  
#01-01 Great Eastern Centre  
Tel: +65 6248 2888 Fax: +65 6327 3080



## Certificate of Insurance

ORIGINAL

The Motor Policy to which this Certificate relates is issued in accordance with the provisions of the following Legislation:  
Motor Vehicles (Third-Party Risks and Compensation) Act (Cap.189 of the Revised Edition) (Singapore)  
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1996 Edition (Singapore)  
Motor Vehicles (Third-Party Risks) Rules, 1959 (of Federation of Malaya)  
Road Transport Act 1987 (of Malaysia)  
Road Transport (Amendment) Act 2019 (of Malaysia)

FORM MX1

Policy No. : 2019-V0104210-VDP-R001 Risk# : 0001  
Policy Type : Drive And Save Plus Cover : Comprehensive

### DESCRIPTION OF VEHICLES:

Vehicle Registration : SKA2166G  
Vehicle Make & Model : TOYOTA VIOS E AUTO

Name of Insured : THEDJANAMURTHI NJANESWARI

Period of Insurance : 25-04-2019 (0000HRS ) to 24-04-2020

### PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE \*

(a) The Policyholder.

The Policyholder may also drive a motor car not belonging to or hired (under a hire purchase agreement or otherwise) to him/her or his/her employer or his/her partner.

(b) Any other person who is driving on the Policyholder's order or with his/her permission.

(c) In the event of the death of the Policyholder; (i) any member of the Policyholder's family, or a paid driver who has been driving the car during the lifetime of the Policyholder & permission to drive had not been withdrawn prior to the death of the Policyholder; (ii) any other person who has been given permission to drive the vehicle prior to the death & such permission had not be withdrawn by the Policyholder.

\* 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.

And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

### 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, racing, pace-making, reliability trial, speed-testing or the carriage of goods (other than samples) in connection with any other trade or business or use for any purpose in connection with the Motor Trade.

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 (of Malaysia) are not to be included under these headings.

Signed for and on behalf of the Company

Authorized Signature

GPGITG1

30-08-2019

Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo

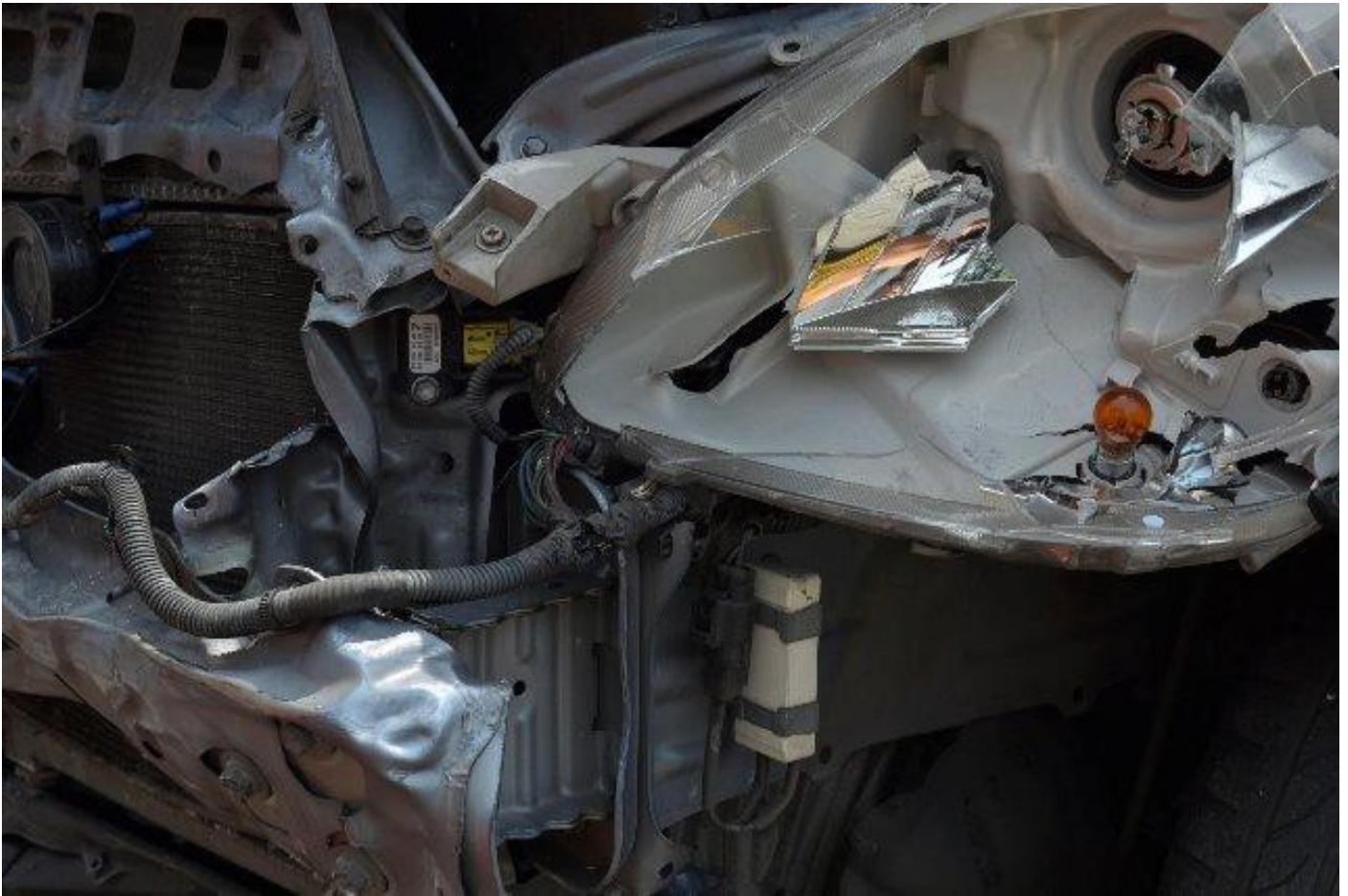




Accident Photo



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