

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	12/09/2019 17:25
Date Of Accident	12/09/2019 09:05
Exact Location Of Accident	SOMPAH ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLZ6906T
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Insured/Policyholder

Name Of Registered Owner	NADIMUTHU KANNAN
NRIC No	S7667788C
Email Address	NJKKANNAN@YAHOO.COM
Mobile Phone No	(LOCAL) +65-81633107
Alternative Phone No	OFFICE-81633107

Vehicle Particulars

Manufacturer	TOYOTA
Model	C-HR HYBRID 1.8S CVT
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	FWD SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	PNPV2019-00007953
Cover Note Number	14/05/2019-13/05/2020

Driver

Name of Driver	NADIMUTHU KANNAN
NRIC No	S7667788C
Date Of Birth	15/05/1976
Occupation	INDOOR
Date Of Driving Pass	18/02/2015
Driving Experience	4 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81633107
Fax Number	
Contact Number	OFFICE-81633107
Email Address	NJKKANNAN@YAHOO.COM

Address	BLK 56 CHAI CHEE DRIVE #11-148
Postcode	460056
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 - HEAD TO REAR
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?	
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 ATTACHMENT

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	SLJ3955E
Vehicle Make/Model/Colour	HONDA VEZEL (B)
Details Of Properties	
Vehicle Category	PRIVATE HIRE
Name of Driver	LEONG WENG HENG
NRIC/Passport Number	S1791273I
Contact Number	96511448
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

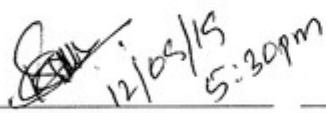
SKETCH PLAN

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

I understand, acknowledge, agree and consent that:

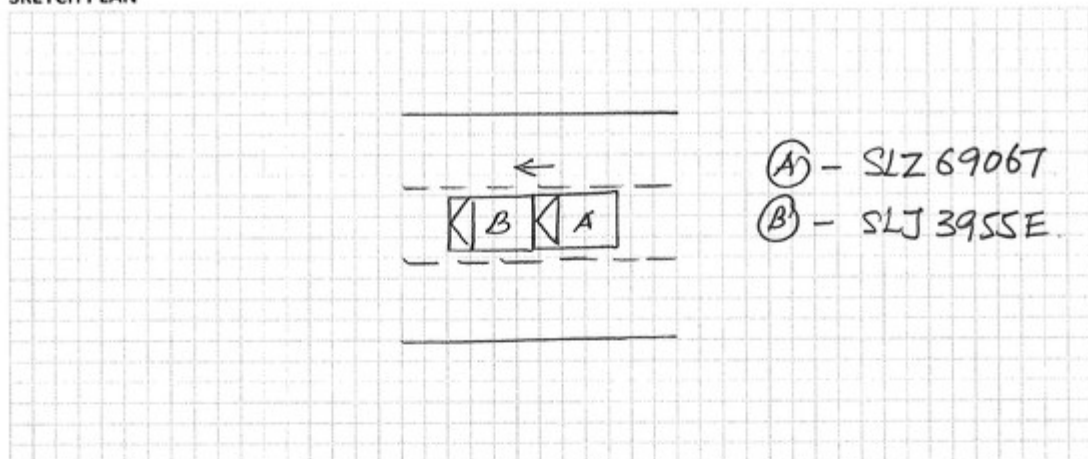
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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: 12/05/13 5:30pm

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


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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


When drive along Sompah Road towards to my office, the front car suddenly jam brake then caused me to hit behind the car, I have managed to apply brake and was hit behind 14/15th, the impact on the front car is very minor and my car left with minor scratch.

You had been advised by workshop that in the event that you wish to claim against your own policy (OD claim), there is a **Fourteen (14) days clause** whereby the claim must be made within the stipulated timeframe from the day of occurrence.

<input checked="" type="checkbox"/>	Reporting Only
<input type="checkbox"/>	Claim OD
<input type="checkbox"/>	Claim TP
<input type="checkbox"/>	Claim OD / TP at other workshop

DECLARATION

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


Policyholder's Signature
Date & Time: 12/05/15 5:30pm

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


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

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S7667788C**

Name: **NADIMUTHU KANNAN**

Birth Date: **15 May 1976**

Issue Date: **18 Feb 2015**

FOR ACCIDENT CLAIM USE ONLY

SG 50

1002397965F

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S7667788C

Name: **NADIMUTHU KANNAN**

நாடிமுத்து கண்ணன்

Race: **INDIAN**

Date of birth: **15-05-1976** Sex: **M**

Country of birth: **INDIA**

SG 50

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

EFFECTIVE DATE **18 Feb 2015**

Class 3A Motor cars without clutch pedals (Auto) =< 3000kg with =< 7 passengers, exclusive of the driver; and other motor vehicles without clutch pedals =< 2500kg

FOR ACCIDENT CLAIM USE ONLY

Licence No: **S7667788C**

NP 428A

6929039

NRIC No: S7667788C

Nationality: **INDIAN**

Date of issue: **13-05-2008**

APT BLK 58 CHAI CHEE DRIVE #11-14B
SINGAPORE 480056

NRIC No: **S7667788C** Date: **09/07/2018 (R)**

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



3RD PARTY'S Driving License

