

## 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	27/09/2019 17:57
Date Of Accident	22/09/2019 16:35
Exact Location Of Accident	CAIRNHILL CIR TOWARDS CAIRNHILL ROAD ERP 27
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJH5750A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	RAMASAMY BOOMICHELVI
NRIC No	S7870949I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93519035
Alternative Phone No	OFFICE-93519035

### Vehicle Particulars

Manufacturer	TOYOTA
Model	ALLION-1.5 (A)
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	PRIVATE CAR

### Insurance Company

Name of Insurance Company	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MT/00621488
Cover Note Number	

### Driver

Name of Driver	NAGANDRAN S/O LETCHUMANAN
NRIC No	S8112175C
Date Of Birth	22/04/1981
Occupation	INDOOR
Date Of Driving Pass	08/06/2000
Driving Experience	19 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92376368
Fax Number	
Contact Number	
Email Address	NAGEN@EUROSAFE.COM.SG

Address	BLK 16 TELOK BLANGAH CRESCENT #12-336
Postcode	090016
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	FRIEND
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 REFER TO 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	SKR5405H
Vehicle Make/Model/Colour	TOYOTA COROLLA ALTIS 1.6L CVT
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	KOH YING JIE, ESTHER
NRIC/Passport Number	S9049634D
Contact Number	90255532
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## Sketch Plan

### SKETCH PLAN

#### IMPORTANT NOTICE

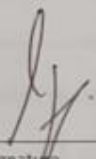
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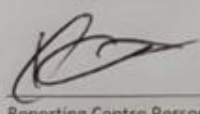
#### 8. Consent under the Personal Data Protection Act (PDPA)

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.

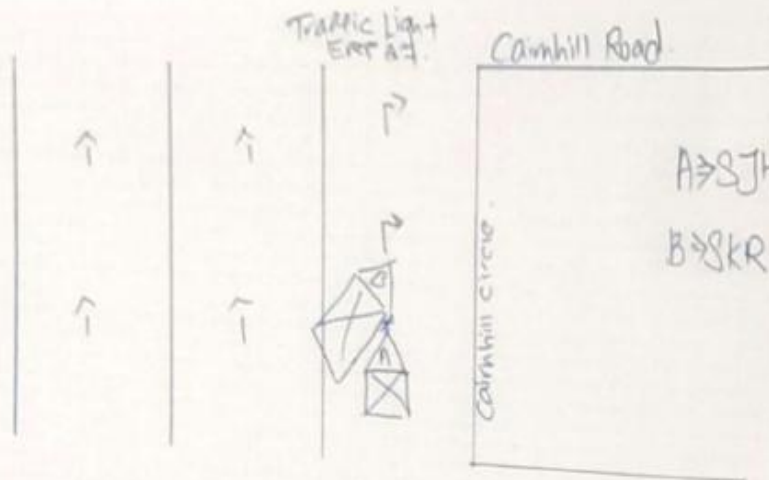
Policyholder's Signature  
Date & Time:

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

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

# Accident Sketch Plan

## SKETCH PLAN



A → SJH 5750A  
B → SKR 5405H

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

While Travelling along Cairnhill Circle, I stopped at the utmost right lane waiting to make a right turn into Cairnhill road, when Vehicle B (SKR 5405 H) Squeezed into my lane and hit me on my front left left hand bumper. I have photos of the incident.

## DECLARATION

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

Policyholder's Signature  
Date & Time:

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

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



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Accident Photo





Accident Photo



**Accident Photo**



Accident Photo



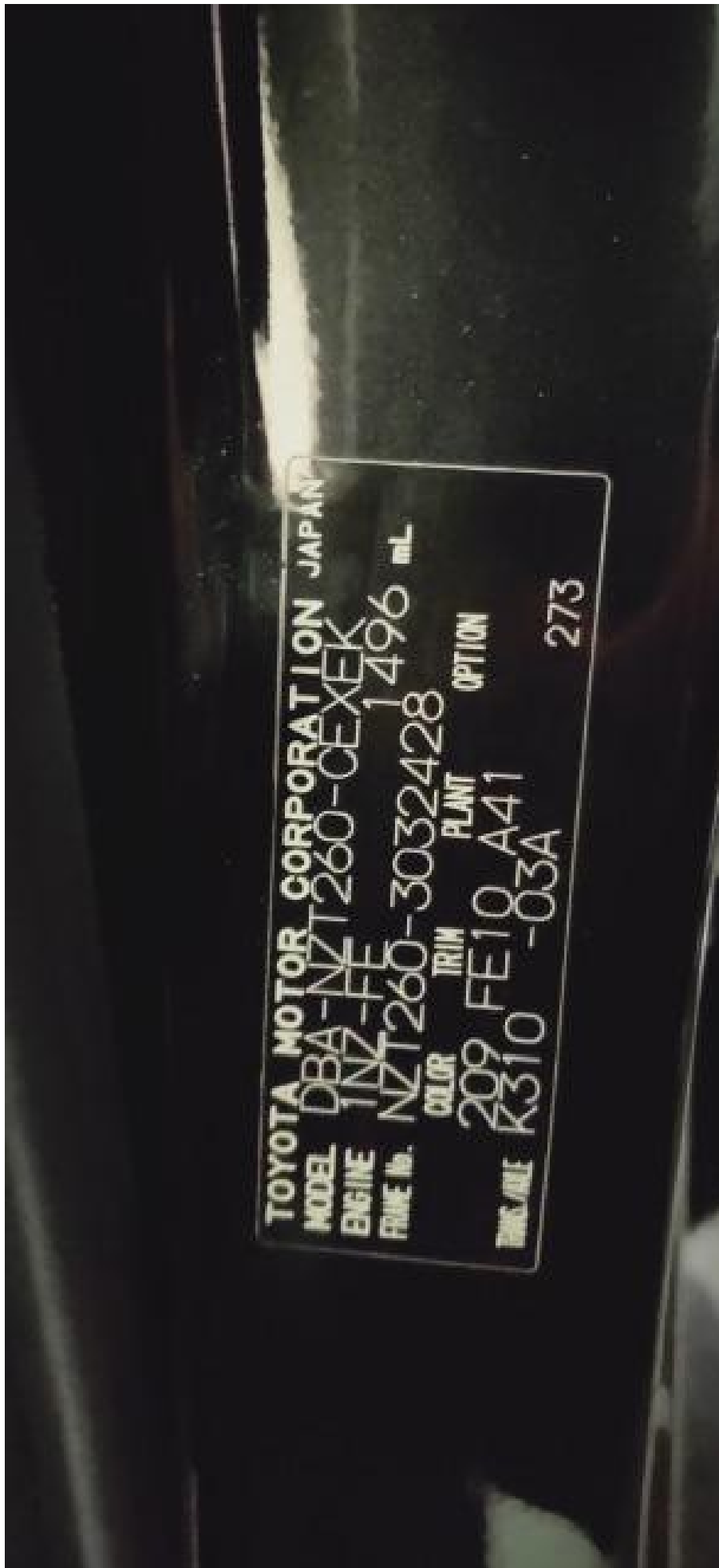


Accident Photo



Accident Photo





Accident Photo



**Accident Photo**





Identification Card

**REPUBLIC OF SINGAPORE**  
**IDENTITY CARD NO. S8112175C**



  
Name  
**NAGANDRAN S/O LETCHUMANAN**

Race  
**INDIAN**

Date of birth  
**22-04-1981**

Sex  
**M**

Country/Place of birth  
**SINGAPORE**



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Identification Card

5537866



NRIC No. **S8112175C**



Date of issue

**17-11-2015**

Address

**APT BLK 16 TELOK BLANGAH CRESCENT  
#12-336  
SINGAPORE 090016**




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Driving License

**REPUBLIC OF SINGAPORE** **DRIVING LICENCE**

Licence Number: **S 8 1 1 2 1 7 5 C**  
Name: **NAGANDRAN S/O LETCHUMANAN**

Birth Date: **22 Apr 1981**  
Issue Date: **04 Apr 2019**



 002920020H

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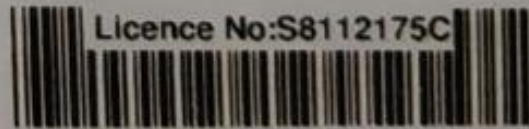
Driving License

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

EFFECTIVE DATE

Class 2B	Motorcycles =< 200 cc	21 Jul 2008
Class 3	Motor cars with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg	08 Jun 2000

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Licence No: S8112175C



Contact us at  
 Hotline: (65) 6532 2888  
 E-mail: CustomerService@DirectAsia.com

## CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act")  
 Motor Vehicles (Third-Party Risks and Compensation) Rules, 1968 (Singapore)  
 Road Transport Act, 1987 (Malaysia)  
 Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

Certificate No.	NT/00621488
Type of Coverage / Driver Plan	Car Comprehensive (Value Plus Plan)
1) Vehicle Registration No.	5JH5750A
Chassis No.	K2T3603032428
2) Name of Policy Holder	RAHASAMY, BOOMICHELVI
3) Effective Date / Time of Commencement of Insurance for the Purpose of the Act	03/04/2019 16:57
4) Date/Time of Expiry of Insurance	04/04/2020 23:59
5) Persons or Classes of Persons Entitled to Drive	<p>(a) Any named person under the policy who is driving on the Policyholder's permission.</p> <p>(b) Any authorized person, provided such person is aged 30 and above and holds a valid driving licence of 2 years or more, who is driving on the Policyholder's permission.</p> <p>The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.</p>
6) Limitations as to use*	<p>Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business. Private car-pooling arrangements where you commute with passengers and split the fuel expense is covered under the standard policy. Grab Match will only be covered if this is the declared usage stated on your Policy Schedule. Only two rides are permitted a day. Other forms of commercial car-pooling or any ride hailing services (e.g. Grab, Go-Jek etc.) are not allowed.</p> <p>*Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.</p>
Sum Insured	Market Value
Own Damage Excess	S\$ 800.00 (before any applicable GST)
Windscreen Excess	S\$ 100.00 (before any applicable GST)
Choice of workshop	DirectAsia approved workshops
Finance company / Hire Purchase	
Main driver	SANKARAN GOKUL
Named driver	None
Important Note: This policy does not cover the Policyholder/drivers below the age of 30 and Policyholder/drivers who hold a valid driving licence of less than 2 years with the exception of the main/named drivers above.	

I/we hereby certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and the Road Transport Act, 1987 (Malaysia).

Direct Asia Insurance (Singapore) Pte. Ltd.

Issued on: 05/04/2019

  
 Edip Okur (Chief Underwriting Officer)

Direct Asia Insurance (Singapore) Pte Ltd  
 25 Anson Road #08-01 Twenty Anson Singapore 079912  
[www.DirectAsia.com](http://www.DirectAsia.com)





**GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE**  
6 Raffles Quay #18-00 Singapore 048580  
Tel (65) 6224 0010 Fax (65) 6224 0030  
Operating Hours : Monday to Friday, 09:00 - 17:00  
UEN: S46550020G / GST Reg. No.: M400017735

**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

### ADDENDUM

#### (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MG 8319128301 Vehicle Registration No: SJH 5750 A  
Name (as shown in NRIC) : Nagandran S/O Letchumanan NRIC/FIN/Passport No : S 8112175C  
(\*Vehicle Driver / ~~Vehicle Owner~~ (\*) Please delete as appropriate  
Address : B1K 16 Telok Blangah crescent #12-336 Singapore (090016)  
Contact (Tel) : — Mobile No.: 9237 6368  
Email Address : nagen@eurosale.com.sg  
Date of Accident : 22-09-2019 Time of Accident: 16:35  
Place of Accident : Cairnhill Cir Towards Cairnhill Road ERP 27  
Insurance Company: Direct Asia Insurance (Singapore) Pte Ltd

#### (B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

\* Amend claim from OO to Third Party.

Policyholder / Driver's Signature  
Date:

Reporting Centre Personnel's Signature  
Name: Carla P.S.  
NRIC/FIN No.: S 8721 506 A  
Date:



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