

## 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	07/10/2019 13:28
Date Of Accident	05/10/2019 14:15
Exact Location Of Accident	ALONG PIE TOWARDS AIRPORT BEFORE EXIT 11A
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLP8208P
<b>Insured/Policyholder</b>	
Name Of Registered Owner	RENGARAJ RANGANATHAN
NRIC No	S7684710Z
Email Address	RANGASG@GMAIL.COM
Mobile Phone No	(LOCAL) +65-81574100
Alternative Phone No	OFFICE-81574100

### Vehicle Particulars

Manufacturer	AUDI
Model	Q2 1.0 TFSI S TRONIC
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?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1700018472-02
Cover Note Number	

### Driver

Name of Driver	RENGARAJ RANGANATHAN
NRIC No	S7684710Z
Date Of Birth	02/11/1976
Occupation	INDOOR
Date Of Driving Pass	17/07/2008
Driving Experience	11 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81574100
Fax Number	
Contact Number	OFFICE-81574100
Email Address	RANGASG@GMAIL.COM

Address	103 HILLVIEW RISE #09--18
Postcode	667982
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	CHAIN COLLISION
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	6
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	TOA PAYOH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 93 TOA PAYOH CENTRAL TOA PAYOH COMMUNITY BUILDING , <b>POSTCODE:</b> 319194 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-2519999 - <b>FAX NO:</b> 63548749
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT NO : T/20191005/2088

#### 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	SHC7918L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SMK9424P

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SJU4920P

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number SKZ1075K

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 5

Vehicle Registration Number SKD319E

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name  
Approximate Age  
Injuries Sustain  
Injured person in which vehicle? SJU4920P  
Were seat belts worn?  
Was this injured conveyed to hospital by ambulance? YES  
Address  
Postcode

## Sketch Plan

### SKETCH PLAN

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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: 07/10/14

Driver's Signature

(If driver is not the policyholder)  
Date & Time:



Reporting Centre Personnel's Signature

Name: Tony Pang  
NRIC/FIN No.: 65040197A

# Sketch Plan #2

## SKETCH PLAN

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please Refer to the Police

Report : NO : T/20191005/2088

## DECLARATION

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

Policyholder's Signature

Date & Time: 7/10/19

GIARMC SketchPlanForm\_V3

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name: Tony Foo

NRIC/FIN No.: G2040197



Accident Photo





Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



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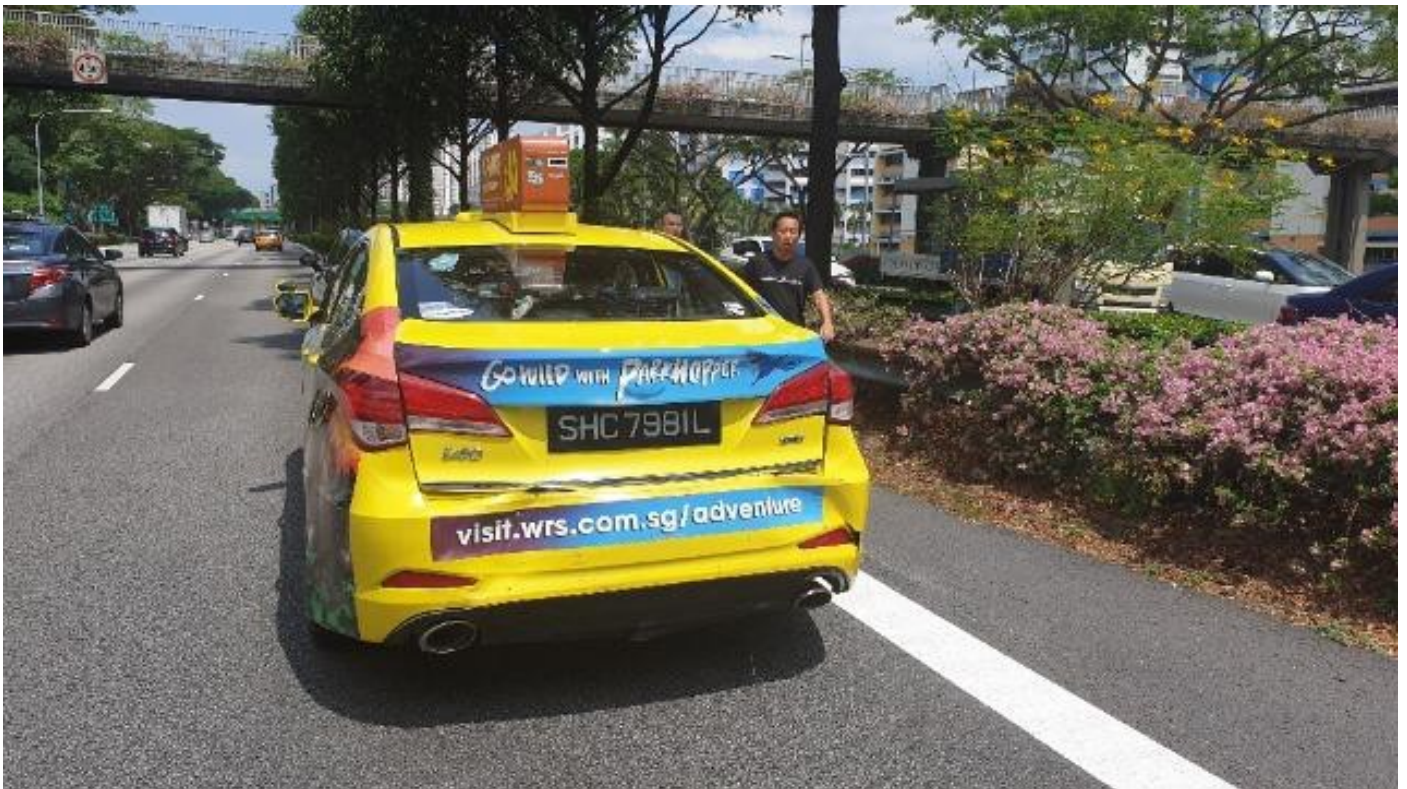


Accident Photo





Accident Photo





Accident Photo



# Police Report



**SINGAPORE  
POLICE FORCE**



TJ20191005/2085

1 of 5

Police Station Of Origin:  
Toa Payoh N.P.C  
93 Toa Payoh Central #01-02 Toa Payoh  
Community Building SINGAPORE 319194  
Tel No: 1800-2519999

Report No. TJ20191005/2088

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/10/2019 17:28		Vide Report No.: E/20191005/0113		Station Diary No.: 141	
<b>Informant's Particulars</b>					
Name of Informant: RENGARAJ RANGANATHAN			Address: 103 HILLVIEW RISE #09-18 SINGAPORE 667982		
ID Type / ID No.: NRIC NO / S7684710Z			Contact No.: Home/Office: Mobile: 81574100		
Nationality: INDIAN			Email:		
Sex: Male	Age: 42	Date of Birth: 02/11/1978	Type of Informant: Driver		
Race: Indian			Language: English		Institution / School Name:
Occupation: SENIOR MANAGER			Driving Licence Information: Class: 3A		Date of Expiry:

## General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 05/10/2019 14:15	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 PAN ISLAND EXPRESSWAY KIM KEAT LINK Along PIE towards Airport before Exit 18A Kim Keat Link and Lorong 6 Toa Payoh				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

## Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
SHC7981L	Car	HYUNDAI		Yellow	Seriously Damaged	1
SJU4820P	Car	HYUNDAI	AVANTE	White	Seriously Damaged	1
SKD319E	Car	TOYOTA	COROLLA	Grey	Seriously Damaged	0
SKZ1075K	Car	HONDA	VEZEL	White	Seriously Damaged	4
SLP8208P	Car	AUDI	Q2 1.0 TFSI S TRONIC	White	Seriously Damaged	0

# Accident Photo



**SINGAPORE  
POLICE FORCE**



T/20191005/2088

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Report No. T/20191005/2088

Police Station Of Origin:

Toa Payoh N.P.C

93 Toa Payoh Central #01-02 Toa Payoh

Community Building SINGAPORE 319194

Tel No: 1800-2519889

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SMK9424P	Car	HYUNDAI	AVANTE	Black	Seriously Damaged	3

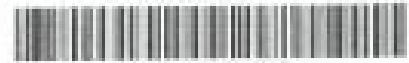
Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLP8208P	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1700018472-02	19/08/2019	18/06/2020

Details of Person Involved					
Any Pedestrian Involved: No					
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA		
Driver					
Name	TAY		ID No.	NIL	
Related Vehicle	SHC7981L (Car)		Contact No.	97735867	
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	
Driver					
Name	CHU		ID No.	S9573068Z	
Related Vehicle	SJU4920P (Car)		Contact No.	84880548	
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	

# Police Report



**SINGAPORE  
POLICE FORCE**



T/20191005/2088

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Report No. T/20191005/2088

Police Station Of Origin:

Toa Payoh N.P.C

93 Toa Payoh Central #01-02 Toa Payoh

Community Building SINGAPORE 319194

Tel No: 1800-2519989

CONTINUATION OF REPORT

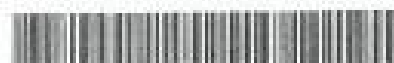
<b>Driver</b>			
Name	Unknown Driver		ID No. NIL
Related Vehicle	SKD319E (Car)		Contact No. NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
<b>Driver</b>			
Name	Unknown Driver		ID No. NIL
Related Vehicle	SKZ1075K (Car)		Contact No. NIL
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
<b>Driver</b>			
Name	RENGARAJ RANGANATHAN		ID No. S7684710Z
Related Vehicle	SLP8208P (Car)		Contact No. 81574100
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3A 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	EUGENE		ID No. NIL
Related Vehicle	SMK9424P (Car)		Contact No. 87528712
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



## Police Report



**SINGAPORE  
POLICE FORCE**



T/20191005/2068

4 of 5

Police Station Of Origin:

Toa Payoh N.P.C

83 Toa Payoh Central #01-02 Toa Payoh

Community Building SINGAPORE 319194

Tel No: 1800-2519999

Report No. T/20191005/2068

CONTINUATION OF REPORT

### Brief Details.

On 05/10/2019 at about 14:15hrs, I was alone driving my car (white Audi Q2, bearing vehicle registration number SLP8208P) along PIE towards Airport on the 1st lane from the most right. Before the Exit 18A to Kim Keat Link and Lorong 6 Toa Payoh, I noticed that a car (black Hyundai Avante, bearing vehicle registration number SMK9424P) which was 2 cars in front of mine applied sudden brakes.

Initially, a black car was in front of me and managed to swerve to the 2nd lane to avoid colliding with the said black Hyundai Avante. Thereafter it drove off. As the said Hyundai Avante came to a stop, I also applied my brakes to avoid collision and stopped. After a few seconds, I noticed from my rear mirror that the car (black Hyundai Avante, bearing vehicle registration number SJU4820P) behind me was nearing me very quickly hence I slowly inched forward to give him more space to brake. However, the car collided into the rear of my car. The force caused my car to move forward and I collided into the rear of the car in front (SMK9424P).

Subsequently, I heard and felt 2 other collisions from the rear. I alighted from my vehicle and realised that it was a chain collision between 5 cars and 1 taxi. I was the 3rd vehicle in the chain. Soon after, Traffic Police and ambulance came. The car driver behind me was conveyed by ambulance.

I have a front and rear camera installed in my car which recorded the incident. I then handed over the memory card for my camera to the TP officer. I was given an acknowledgement slip and a case card (E/20191005/0113, IO Chain tel: 65476187). I was advised to lodge a Police report.

The chain collision was in this order (SHC7981L, SMK9424P, SLP8208P, SJU4820P, SKZ1075K, SKD319E). There was a 7th vehicle (black Lexus, bearing vehicle registration number SDQ8484X) who stopped behind the chain collision but I am unsure if it was involved in the accident.

After the accident, I drove the car myself to the nearest carpark at Toa Payoh Stadium. Due to the accident I did not sustain any injuries and do not feel any pain except for a bit of soreness on my left calf.

Due to the accident, my car's front bumper was dented in and out of alignment. The 2 front bottom lights came out. The front licence plate and the front hood was dented. The right portion of the car covering my tire came out. The rear bumper was dented and came out. The boot was dented in and out of alignment. The rear licence plate was dented.

# Police Report



**SINGAPORE  
POLICE FORCE**



T/2019/005/2088

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Police Station Of Origin:  
Toa Payoh N.P.C  
93 Toa Payoh Central #01-02 Toa Payoh  
Community Building SINGAPORE 319194  
Tel No: 1800-2519999

Report No: T/2019/005/2088

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 3 WEE SHUN QIANG, JOSEPH

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

05/10/2019 17:29

Officer In Charge Of Case:

TP / GIT /

Classification Of Case:

Contact No.:

Authentication Stamp  
NP168



**SINGAPORE  
POLICE FORCE**  
COMMUNITY POLICE

SN 168

ALPHATTS 180C

## Addendum Sheet



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: S68000285 / GST Reg. No.: M409017785

**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 : MPA119132455 Vehicle Registration No: SLP8208P  
Name (as shown on NRIC) : RENGARAJ RANGANATHAN NRIC/FIN/Passport No : S7684710Z  
(\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
Address : \_\_\_\_\_ Singapore ( )  
Contact (Tel) : \_\_\_\_\_ Mobile No. : 81574100  
Email Address : \_\_\_\_\_  
Date of Accident : 05/10/2019 Time of Accident : 14:15  
Place of Accident : ALONG PIE TOWARDS AIRPORT BEFORE EXIT 11A  
Insurance Company : AIG ASIA PACIFIC INSURANCE 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:

CONVERT REPORT TO CLAIM OWN INSURANCE

Policyholder / Driver's Signature

Date: 09/10/19



Reporting Centre Personnel's Signature

Name: Tony Foo

NRIC/FIN No.: G20401622

Date: 9/10/19

## Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE  
6 Raffles Quay #18-00 Singapore 048580  
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Date: 9/10/19