

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 22/11/2019 10:32
 Date Of Accident 15/11/2019 09:40
 Exact Location Of Accident LORNIE RD TWDS JURONG NEAR ANDREW RD
 Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJL2360R
Insured/Policyholder
 Name Of Registered Owner SUNDARA RAJAN RENGARAJAN
 NRIC No S2681974A
 Email Address SRIRENGARAJ@YAHOO.COM
 Mobile Phone No (LOCAL) +65-91448177
 Alternative Phone No Office-NOPHONE

Vehicle Particulars

Manufacturer TOYOTA
 Model COROLLA AXIO-1.5 (A)

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 ERGO INSURANCE PTE. LTD.
 Type Of Coverage COMPREHENSIVE
 Fleet Policy NO
 Policy Number DMPG18005236
 Cover Note Number

Driver

Name of Driver SUNDARA RAJAN RENGARAJAN
 NRIC No S2681974A
 Date Of Birth 11/07/1964
 Occupation INDOOR
 Date Of Driving Pass 27/08/2008
 Driving Experience 11 YEARS AND 2 MONTHS
 Gender MALE
 Mobile Number (LOCAL) +65-91448177
 Fax Number
 Contact Number OFFICE-NOPHONE
 Email Address SRIRENGARAJ@YAHOO.COM
 Address BLK 284 TOH GUAN RD \$17-267
 Postcode 600284

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: 15/11/2019
5:26 PM

Driver's Signature

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

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

224115

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Accident Vehicles: SJL2360R (Client) & SLF9260H
 Date of Accident: 15/11/2019
 Time of Accident: At about 9.40am
 Location: Along Lornie Road towards Jurong near Andrew Road

BRIEF FACTS OF ACCIDENT CASE

On 15/11/2019 at about 0940Hours, I was driving personal Car Reg No: SJL2360R on the extreme right lane of this 4 lane traffic.

Suddenly, the Car Reg No: SLF9260H which was behind me; collided onto the rear portion of my Car Reg No: SJL2360R.

My car rear portion, reverse sensor and camera damaged.

On impact of the collision, I and my car passengers felt bodily pain.

At the time of the accident, weather was fine and the road surface dry.

☐ Claim own policy	
☐ Claim third party	
☒ Claim OD / TP at other workshop	CL Auto
☐ For record purposes only	
Policy No	DM PG 18005236
Insurer	GULC
Veh No.	SJL2360R

DECLARATION

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

Policyholder's Signature
 Date & Time: 15/11/2019

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

Reporting Centre Personnel's Signature
 Name:
 NRIC/EPN No.: 221119

Lorne Rd

Vehicle (A) SJL 2360R

Vehicle (B) SLF 9260H

