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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	08/01/2020 09:44
Date Of Accident	21/12/2019 17:30
Exact Location Of Accident	TECK WHYE AVE
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLJ4326P
Insured/Policyholder	
Name Of Registered Owner	ROSET LIMOUSINE SERVICES PTE LTD
Co Reg No	-
Email Address	KHIERTHII@ROSETAUTOCARE.COM
Mobile Phone No	
Alternative Phone No	OFFICE-68445225
Vehicle Particulars	
Manufacturer	TOYOTA
Model	ALTIS
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SD19V13180/VPZ/R01
Cover Note Number	
Driver	

Name of Driver KANNAN S/O KONASAGARAN

NRIC No SXXXX640H

Date Of Birth 04/04/1987

Occupation OUTDOOR

Date Of Driving Pass 31/10/2012

Driving Experience 7 YEARS AND 1 MONTH

Gender MALE

Mobile Number (LOCAL) +65-94849427

Fax Number

Contact Number

EMail Address NOEMAIL

BLK 9 TECK WHYE LANE Address

#10-244

Postcode 680009

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - HIRER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

General Information of the Accident

SIDE SWIPE Type Of Accident 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

NO

4

YES Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) Passenger 1

NAME: : ANITHRA

GENDER: : FEMALE

Passenger 2 NAME: : LAKSMII

> GENDER: : FEMALE

Passenger 3 NAME: : JANANI

> **GENDER:** : FEMALE

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name JURONG DIVISION HQ

ROAD: 2 JURONG WEST AVENUE 5, POSTCODE: 649482, COUNTRY: Police Station Address

SINGAPORE

Police Station Contact TEL NO: 18007910000 - FAX NO:

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

PLS REFER TO RHE POLICE REPORT: J/20191222/7013

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

SDH8108G

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

PRIVATE CAR

Accident Sketch Plan

SKETCH PLAN

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- 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.
- 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 :
 - 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.

Driver's Signature

(If driver is not the policyholder) Date & Time: 22/n/19

14-4

Ayun 08/01/20
Report to Centre Personnel's Signature

Name: NRIC/FIN No.:

Policyholder's Signa

Accident Sketch Plan

TCH PLAN	A	TECK	WHYE AVE
		3	
13		2	
:1/1:	A-	SLJ 4326P	
	8-	5048108G	

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

- Was	de	rivins	alons	Tecl	k hls	re Aver	ne ul	con a	Car	CSOF	810	86)
came	into	my	lane	25	(was	driving	and	sen	uped	the s	ide	d
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										_		

DECLARATION

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

Policyholder

Driver's Signature
(if driver is not the policyholder)
Date & Time: 23/12/19

Ayun as lor /20
Reporting Centre Personnel's Signature

Name

NRIC/FIN No.:

Individual Statement





1 of 2

POLICE REPORT (NP299)

Police Station Of Origin Jurong Division HQ 2 Jurong West Avenue 5 SINGAPORE 649482

Tel No:1800-7910000

Report No. J/20191222/7013

Date/Time Report Made 22/12/2019 14:27	Vide Re	port No.		Station Diary No.
Name Of Informant KANNAN S/O KONASAGARAN	Address APT BLK 9 TECK WHYE LANE #10-244 SINGAP 680009			
ID Type / ID No. NRIC NO / S8709640H	Contact No. Home/Office: Mobile: 94849427			
Nationality SINGAPORE CITIZEN	Email Address kannan.k4487@gmail.com			
Occupation	Sex	Age	Date of Birth	Race
Self-employed	Male	32	04/04/1987	Indian
Institution/School Name	Language English			
Date/Time Of Incident 21/12/2019 17:30 - 21/12/2019 17:45	Location Of Incident TECK WHYE AVENUE			
Brief details.	***************************************			

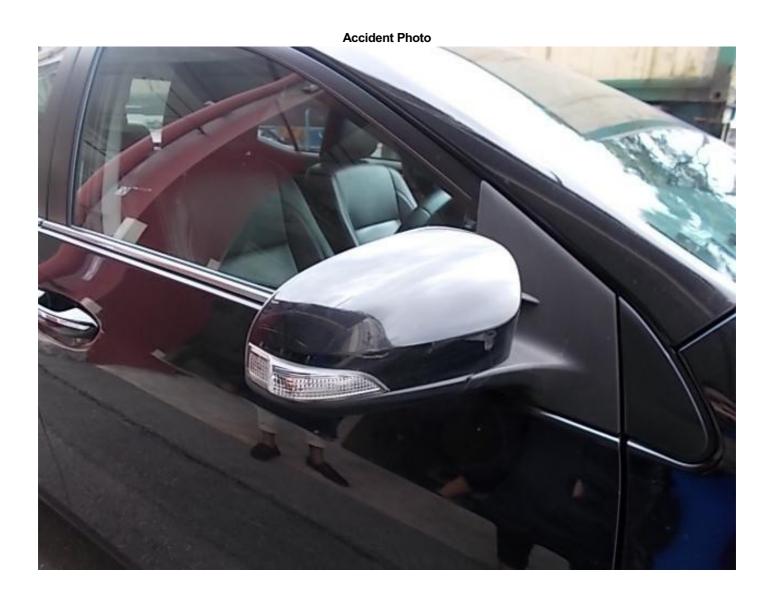
I was driving along Teck Whye Avenue when a car (SDH8108G) came into my lane as I was driving and scraped the side of my car with his. We both immediately stopped our cars in front of the bus stop (bet Blks 13/14) and I asked him for his particulars and he refused to exchange particulars with me. The driver who was an elderly Chinese male told me that he cannot give me his details so I proceeded to call the police hotline and the officer informed me that since there was no damage to public property and if the driver refused to give his particulars I should take down his car plate details and make a police report.

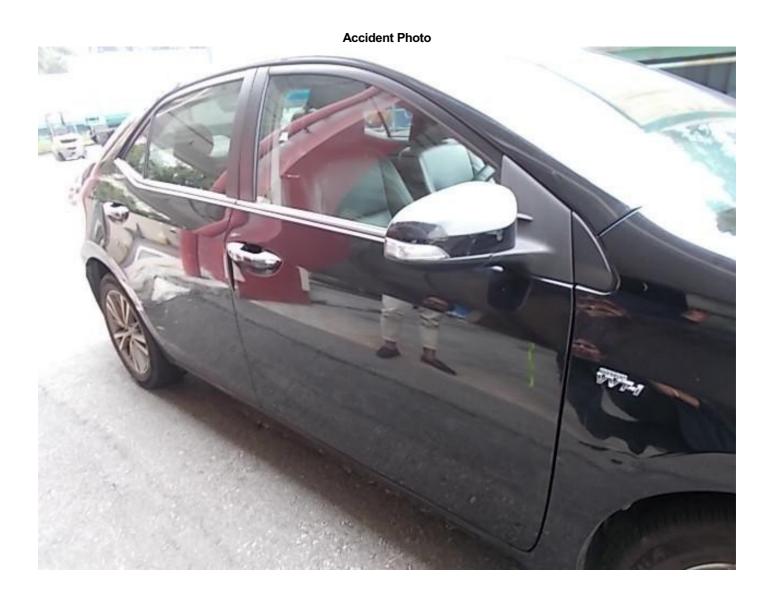
Signature Of Officer Recording The Report:	Signature Of Informant: The identity of the person making this		
Not applicable	report has been authenticated by SingPass. No signature is required.		
Signature Of Interpreter: Not applicable	Date/Time: 22/12/2019 14:27		
Officer In-Charge Of Case:	Classification Of Case:		
Authentication Stamp			





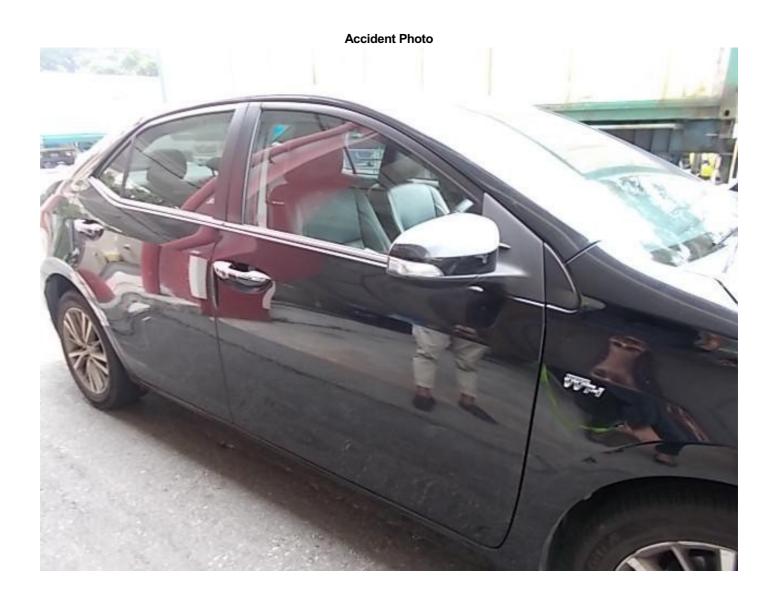






Accident Photo

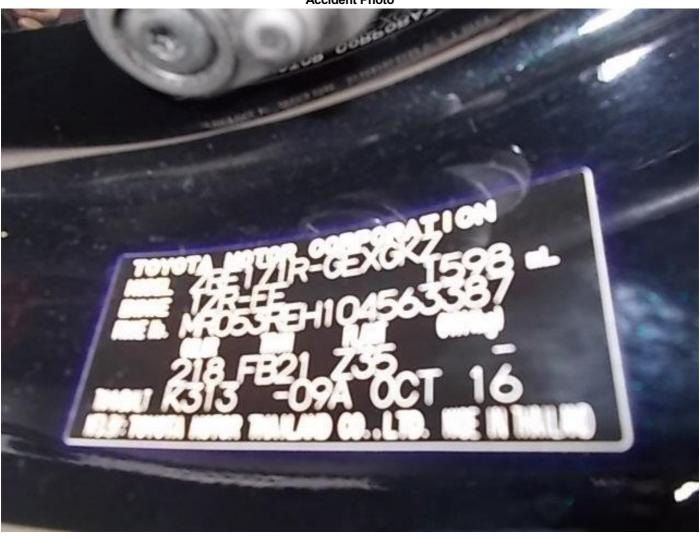




Accident Photo



Accident Photo



Police Report





1 of 2

POLICE REPORT (NP299)

Police Station Of Origin Jurong Division HQ 2 Jurong West Avenue 5 SINGAPORE 649482 Tel No.1800-7910000 Report No. J/20191222/7013

Date/Time Report Made 22/12/2019 14:27	Vide Re	port No.		Station Diary No.
Name Of Informant KANNAN SIO KONASAGARAN	Address APT BLK 9 TECK WHYE LANE #10-244 SINGAPO 680009			
ID Type / ID No. NRIC NO / \$8709640H	Contact No. Home/Office Mobile: 94849427			
Nationality SINGAPORE CITIZEN	Email Address kannan k4487@gmail.com			
Occupation	Sex	Age	Date of Birth	Race
Self-employed	Male	32	04/04/1987	Indian
Institution/School Name	Language English			
Date/Time Of Incident 21/12/2019 17:30 - 21/12/2019 17:45 Brief details.	Location Of Incident TECK WHYE AVENUE			

I was driving along Teck Whye Avenue when a car (SDH8108G) came into my lane as I was driving and scraped the side of my car with his. We both immediately stopped our cars in front of the bus stop (bet Blks 13/14) and I asked him for his particulars and he refused to exchange particulars with me. The driver who was an elderly Chinese male told me that he cannot give me his details so I proceeded to call the police hottine and the officer informed me that since there was no damage to public property and if the driver refused to give his particulars I should take down his car plate details and make a police report.

Signature Of Informant. The identity of the person making th report has been authenticated by SingPass. No signature is required.			
Date/Time: 22/12/2019 14:27			
Classification Of Case:			

Authentication Stamp

Police Report





1222/7013 2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20191222/7013

Victim	Land of the Control o		
Person Name	KANNAN S/O KONASAGARAN		WORLDS STORY
ID Type		ID No	S8709640H
Gender	Male	Age	32
Race	Indian	Language	English
Occupation	Self-employed	Address Type	
Address	APT BLK 9 TECK WHYE LANE #10-244 SINGAPORE 660009	Mobile No	94849427
ts Informant A Victim?	Yes		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter. Not applicable	Date/Time: 22/12/2019 14:27
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	