

## 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	08/08/2020 10:22
Date Of Accident	07/08/2020 18:40
Exact Location Of Accident	PAYA LEBAR RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMH9940G
<b>Insured/Policyholder</b>	
Name Of Registered Owner	S GUNASAGAR
NRIC No	SXXXX784J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97692765
Alternative Phone No	OFFICE-97692765
<b>Vehicle Particulars</b>	
Manufacturer	NISSAN
Model	-
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
<b>Insurance Company</b>	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5107761129-01
Cover Note Number	
<b>Driver</b>	
Name of Driver	S GUNASAGAR
NRIC No	SXXXX784J
Date Of Birth	28/03/1965
Occupation	INDOOR
Date Of Driving Pass	17/11/1993
Driving Experience	26 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97692765
Fax Number	
Contact Number	OFFICE-97692765
Email Address	NOEMAIL

Address	BLK 25 FERNVALE CLOSE #14-14
Postcode	797462
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 STATEMENT.

#### 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	SMQ4940S
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)	

### Sketch Plan

1. The first step in the process of the investigation is the identification of the subject of the investigation. This is done by the investigator who is assigned to the case. The investigator will then conduct a preliminary investigation to determine the scope of the investigation and the resources required. This may involve interviewing witnesses, reviewing documents, and conducting field research.

2. The second step is the collection of evidence. This is done by the investigator who is assigned to the case. The investigator will collect all relevant evidence, including documents, photographs, and physical evidence. This evidence will then be analyzed and compared to the evidence collected in other cases.

3. The third step is the analysis of the evidence. This is done by the investigator who is assigned to the case. The investigator will analyze the evidence to determine its significance and to identify any patterns or trends. This may involve using statistical analysis, forensic science, and other techniques.

4. The fourth step is the reporting of the results. This is done by the investigator who is assigned to the case. The investigator will prepare a report detailing the findings of the investigation and the conclusions reached. This report will then be submitted to the appropriate authorities for review and action.

5. The fifth step is the follow-up. This is done by the investigator who is assigned to the case. The investigator will monitor the situation to ensure that the investigation has been completed and that the appropriate actions have been taken. This may involve conducting further investigations, providing ongoing support, and maintaining communication with the relevant parties.

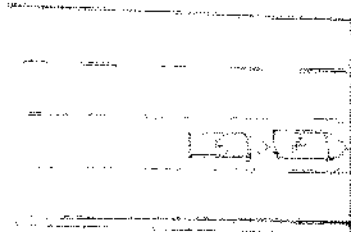
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... ..

DATE: 11/11/1971  
 TIME: 10:00 AM  
 FROM: [illegible]  
 TO: [illegible]  
 SUBJECT: [illegible]

# Accident Sketch Plan

REPORT NO.



2.20483009  
E. 0001-47002

10/10/10 10:00 AM

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

MY VEHICLE WAS STATIONARY SUDDELY I FELT MY VEHICLE  
FROM MY VEHICLE REAR PORTION

DECLARATION

I hereby declare that the information furnished on this report is true and correct to the best of my knowledge and belief.

*[Signature]*  
Date & Time

*[Signature]*  
Date & Time

*[Signature]*  
Date & Time

Accident Photo



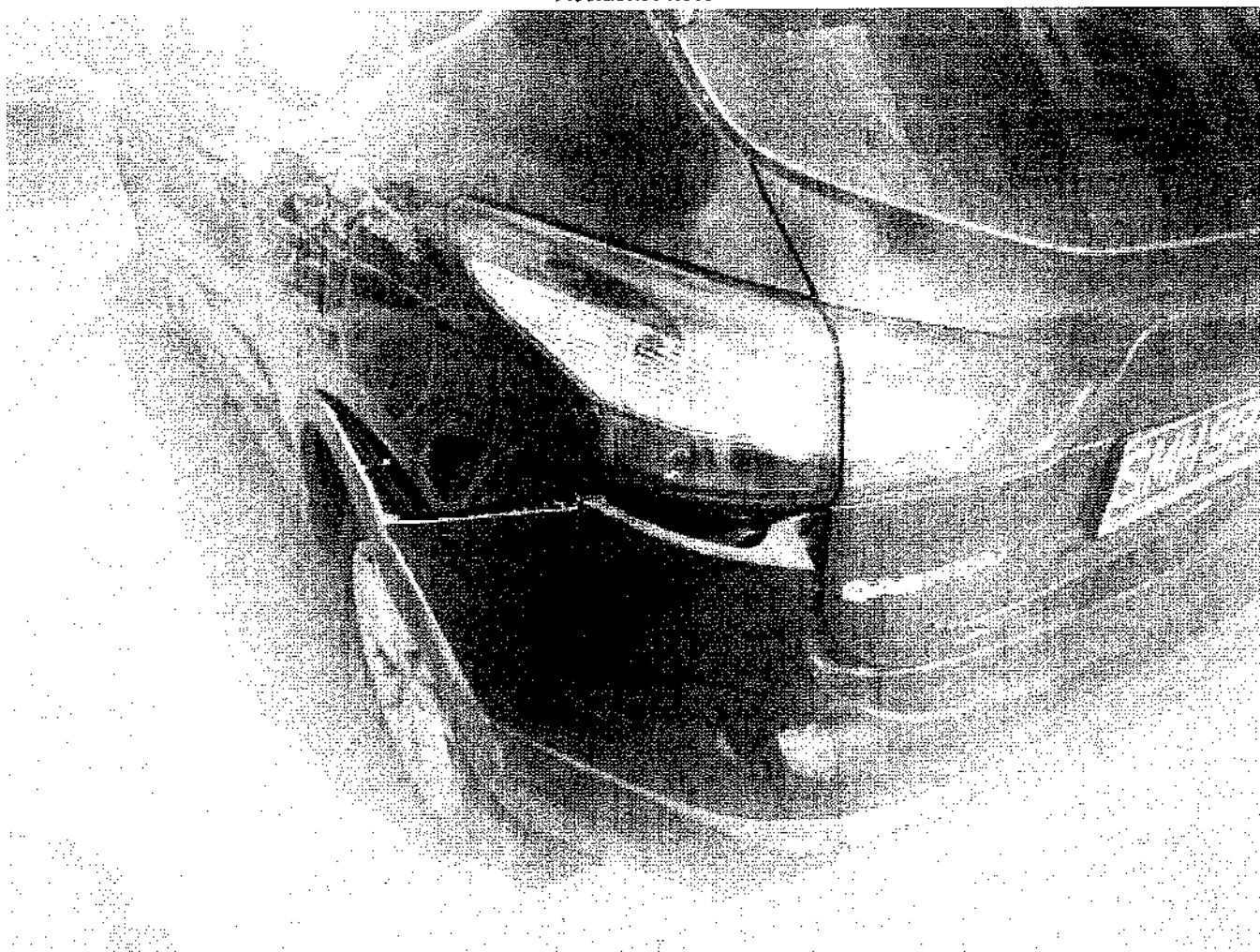
Accident Photo



Accident Photo



Accident Photo

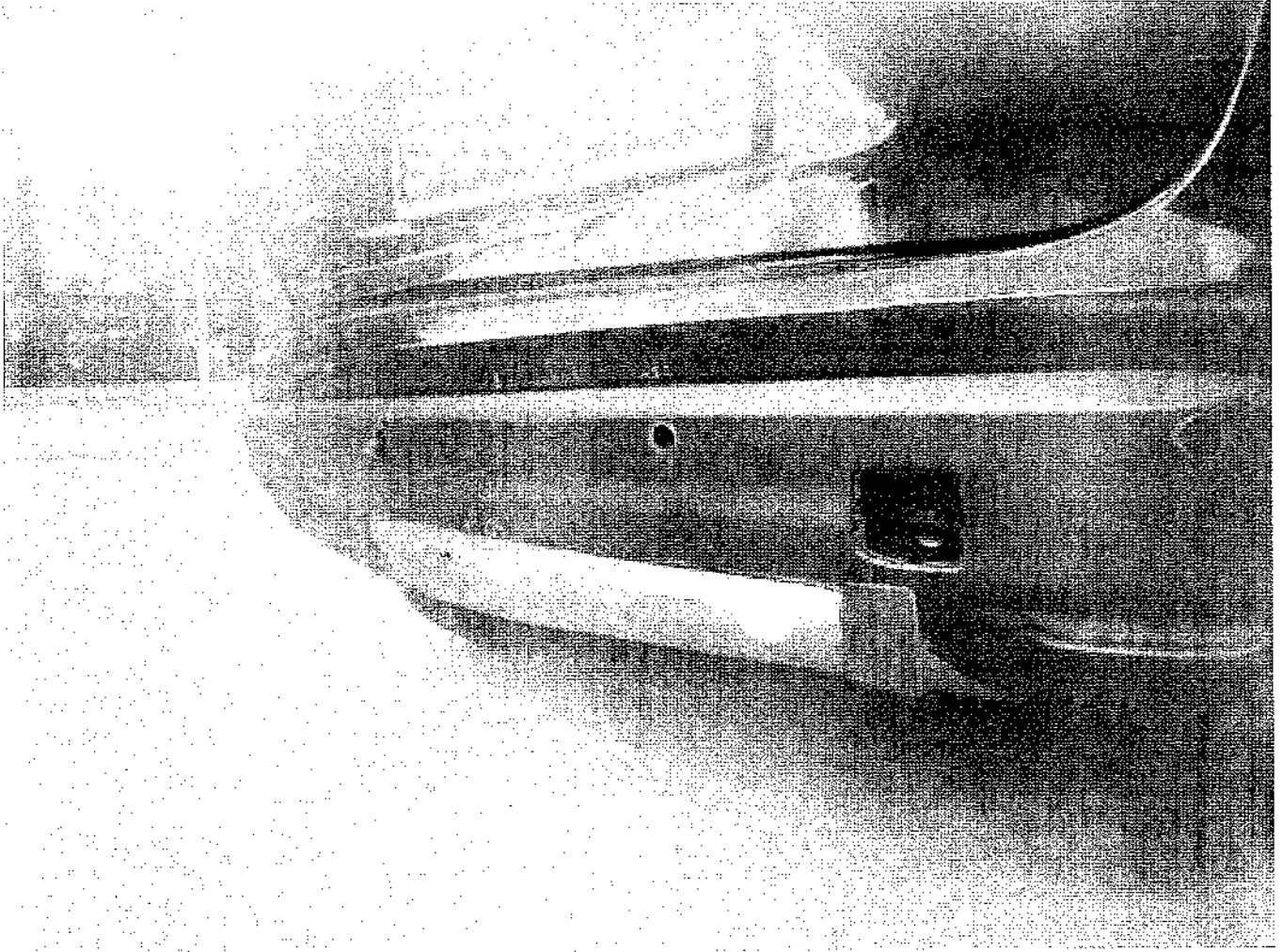




Accident Photo



Accident Photo



Accident Photo

