

## 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	30/09/2020 11:36
Date Of Accident	29/09/2020 02:55
Exact Location Of Accident	TELOK BLANGAH WAY TOWARDS BUKIT PURMEI
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBF6250A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	DHANARAJU DHEVASAKAYAM
NRIC No	SXXXX482I
Email Address	DHEVA11@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-98754730
Alternative Phone No	OTHERS-98754730

### Vehicle Particulars

Manufacturer	HONDA
Model	CB400SF-399CC REVO
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	MOTORCYCLE

### Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	MSD/VMS/20-417545-CA
Cover Note Number	

### Driver

Name of Driver	DHANARAJU DHEVASAKAYAM
NRIC No	SXXXX482I
Date Of Birth	21/11/1979
Occupation	OUTDOOR
Date Of Driving Pass	21/07/2017
Driving Experience	3 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98754730
Fax Number	
Contact Number	OTHERS-98754730
EEmail Address	DHEVA11@HOTMAIL.COM

Address	BLK 115 BUKIT PURMEI ROAD #06-256
Postcode	090115
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 - CROSS JUNCTION
Weather Conditions	RAINING
Road Surface	WET

#### 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?	YES
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?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT MERAH EAST NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 391 NEW BRIDGE ROAD POLICE CANTONMENT COMPLEX BLOCK A , <b>POSTCODE:</b> 088762 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-2369999 - <b>FAX NO:</b> 62268438
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20200929/7026 AND T/20200930/2029

#### 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	SMC5376M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	98365531
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1	
Name	DHANARAJU DHEVASAKAYAM
Approximate Age	
Injuries Sustain	SLIGHT INJURY
Injured person in which vehicle?	FBF6250A
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

## Accident Sketch Plan

### SKETCH PLAN

#### 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. 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.
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.

D.D 30/09/2020

Policyholder's Signature  
Date & Time:

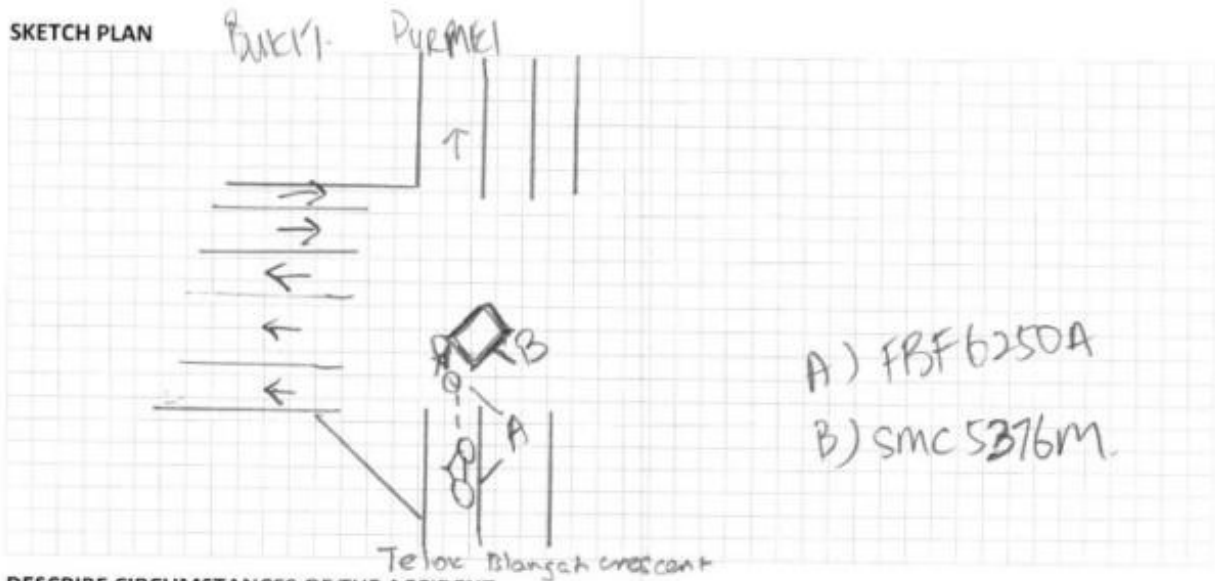
11:17 hrs

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

30/09/2020  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

# Accident Sketch Plan

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO POLICE REPORT T/20200929/7026

## DECLARATION

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

Policyholder's Signature: D-D  
 Date & Time: 30/09/2020  
 Driver's Signature: 11:22 hrs  
 (If driver is not the policyholder)  
 Date & Time:

Reporting Centre Personnel's Signature: [Signature]  
 Name: [Name]  
 NRIC/FIN No.:

# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20200929/7026

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

1 of 3

Report No. T/20200929/7026

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/09/2020 19:48	Vide Report No.:	Station Diary No.:
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### Informant's Particulars

Name of Informant: DHANARAJU DHEVASAKAYAM			Address: 115 BUKIT PURMEI ROAD #06-256 BUKIT PURMEI VILLE SINGAPORE 090115		
ID Type / ID No.: NRIC NO / S79624821			Contact No.: Home/Office: Mobile: 98754730		
Nationality: SINGAPORE CITIZEN			Email: dheva11@hotmail.sg		
Sex: Male	Age: 40	Date of Birth: 21/11/1979	Type of Informant: Rider		
Race: Indian			Language: English		Institution / School Name:
Occupation: Chemical engineering technician (general)			Driving Licence Information: Class: 2B,2A Date of Expiry: 29/09/2020		

### General Information of the Accident

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 29/09/2020 14:55	Type of Location: Straight Road
Location:  Telok Blangah crescent				
Weather: Raining		Road Surface: Wet	Road Speed Limit: 50 Km/h	
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Self skid				Anyone conveyed by ambulance: No

### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
FBF6250A	Motorcycle	A-BIKE	CB-400 Revo	Red	Slightly Damaged	0
SMC5376M	Car	HONDA		Silver	Slightly Damaged	1

# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20200929/7026

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

2 of 3  
Report No. T/20200929/7026

## CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBF6250A	MSIG INSURANCE (SINGAPORE) PTE. LTD.			

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Rider				
Name	DHANARAJU DHEVASAKAYAM		ID No.	S7962482I
Related Vehicle	FBF6250A (Motorcycle)		Contact No.	98754730
Hospital/Clinic	KAO & TAN FAMILY MEDICAL CENTRE & SURGERY PTE LTD		Class of Driving Licence & Expiry	Class: 2B,2A Date of Expiry: 29/09/2020
Date	29/09/2020		Date	29/09/2020
No. of Days granted Medical Leave		03	Degree of	Slight
Passenger				
Name	Unknown Passenger		ID No.	NIL
Related Vehicle	SMC5376M (Car)		Contact No.	98365531
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave		NIL	Degree of	NIL

### Brief Details.

i travelling from telok blangah crescent to bukit purmei, the x junction i have right to go straight still green light on but vehicle taking right turn moving right, so i try to stop my motor bike but skided due to rain.

# POLICE REPORT



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000



T/20200929/7026

3 of 3

Report No. T/20200929/7026

## CONTINUATION OF REPORT

### Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPHQ /  
JUREMAH BINTE AHMAD  
Contact No.: 65476219

Authentication Stamp  
NP168

Signature Of Informant:

The identity of the person making this report has been authenticated by SingPass. No signature is required.

Date/Time:  
29/09/2020 19:48

Classification Of Case:



# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



1/20200930/7029

1 of 3

Report No: 1/20200930/7029

Police Station Of Origin:  
Bukit Merah East N.P.C  
A 391 New Bridge Road Police Cantonment  
Complex SINGAPORE 088762  
Tel No: 1800-2369999

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 30/09/2020 12:42	Vide Report No.: T/20200929/7026	Station Diary No.: 67
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Informant's Particulars			
Name of Informant: DHANARAJU DHEVASAKAYAM		Address: APT BLK 115 BUKIT PURMEI ROAD #06-256 SINGAPORE 090115	
ID Type / ID No.: NRIC NO / S79624821		Contact No.: Home/Office: Mobile: 98754730	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 40	Date of Birth: 21/11/1979	Type of Informant: Rider
Race: Indian		Language:	Institution / School Name:
Occupation: Chemical engineering technician (general)		Driving Licence Information: Class: 2B,2A,3 Date of Expiry: 29/09/2020	

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 29/09/2020 14:55	Type of Location: Straight Road
Location: TELOK BLANGAH WAY				
Weather: Raining		Road Surface: Wet	Road Speed Limit: 50 Km/h	
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working	Traffic Volume: Moderate	
Type of Collision: Self Skid			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBF6250A	Motorcycle	HONDA	CB400	Red	Slightly Damaged	0
SMC5376M	Car				Slightly Damaged	1

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBF6250A	MSIG INSURANCE (SINGAPORE) PTE. LTD.	72269870	28/09/2020	27/09/2021

# POLICE REPORT



SINGAPORE  
POLICE FORCE



1/20200930/2020

Police Station Of Origin:  
Bukit Merah East N.P.C  
A 391 New Bridge Road Police Cantonment  
Complex SINGAPORE 088762  
Tel No: 1800-2369999

2 of 3

Report No: 1/20200930/2020

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	DHANARAJU DHEVASAKAYAM	ID No.	S7962482I
Related Vehicle	FBF6250A (Motorcycle)	Contact No.	98754730
Hospital/Clinic	KAO & TAN FAMILY MEDICAL CENTRE & SURGERY PTE LTD	Class of Driving Licence & Expiry Date	Class: 2B,2A,3 Date of Expiry: 29/09/2020
Date Treatment	29/09/2020	Date Discharge	29/09/2020
No. of Days granted Medical Leave	03	Degree of Injury	Slight

## Brief Details.

With reference to my previous report I wish to state that the incident happened at the junction of Telok Blangah way and lower Delta road while I was going towards the direction of Bukit Puri. I was going straight at the traffic light junction green light when I saw the car(SMC5376M) as such I applied the brakes trying to stop my motorcycle(FBF6250A) but skidded due to the rain and hit on to the front of the car. The car had also tried to stop when the driver saw me coming.

# POLICE REPORT



SINGAPORE  
POLICE FORCE



1/202009307029

Police Station Of Origin:  
Bukit Merah East N.P.C  
A 391 New Bridge Road Police Cantonment  
Complex SINGAPORE 088762  
Tel No: 1800-2369999

3 of 3

Report No: T/202009307029

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:  
A /  
Sgt 2 PANG LIN TONG

Signature Of Informant:

D.D

Signature Of Interpreter:  
Not applicable

Date/Time:  
30/09/2020 12:42

Officer In Charge Of Case:  
TP / AEIT /  
SSI 2 JUREMAH BINTE AHMAD  
Contact No.: 65476219

Classification Of Case:

Authentication Stamp  
NP168



Signature

Singapore Police Force

Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo



# Addendum Sheet

**GENERAL  
INSURANCE  
ASSOCIATION**  
RECORDS MANAGEMENT CENTRE

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: S665500206 / 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 : MNAY20005133 Vehicle Registration No: FBF 6250A  
Name (as shown in NRIC) : DHANARAJN DEIVASAKAVAN NRIC/FIN/Passport No : SXX/XX4821  
(\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
Address : \_\_\_\_\_ Singapore ( )  
Contact (Tel) : \_\_\_\_\_ Mobile No. : 98754730  
Email Address : \_\_\_\_\_  
Date of Accident : 29/09/2020 Time of Accident : 02:55  
Place of Accident : TRUCK BLONGAH CRASHED TOWARDS BUKIT PURMAZ  
Insurance Company: \_\_\_\_\_

### (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:

- ① to UPWARD NEW POLICE REPORT 7/2020 5931/2029
- ② LOCATION OF ACCIDENT TRUCK BLONGAH WAY TOWARDS BUKIT PURMAZ

Policyholder / Driver's Signature  
Date:

30/09/2020  
Reporting Centre Personnel's Signature  
Name: Paul Walter  
NRIC/FIN No.:  
Date: