

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	05/10/2020 16:31
Date Of Accident	03/10/2020 12:00
Exact Location Of Accident	ALONG PIE TOWARDS CHANGI
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMF8094R
Insured/Policyholder	
Name Of Registered Owner	VENDAR KON KOLANHAVELU@VENDER KON S/O KOLANDHAVELU
NRIC No	SXXXX982D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97812735
Alternative Phone No	OTHERS-97812735

Vehicle Particulars

Manufacturer	RENAULT
Model	SCENIC IV-1.5 D L DCI SR EU6 (A)
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

Insurance Company

Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SD18V14399/VPC2/R00
Cover Note Number	

Driver

Name of Driver	KISHENDRAN VENDAR KON @KISHENDRAN S/OVENDAR KON
NRIC No	SXXXX867B
Date Of Birth	15/02/1999
Occupation	INDOOR
Date Of Driving Pass	24/12/2019
Driving Experience	0 YEAR AND 9 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-97812735
Fax Number	
Contact Number	OTHERS-97812735
EMail Address	NOEMAIL

Address	8B JALAN BILAL MAHMOOD JOHOR BAHRU
Postcode	80100
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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	3
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)	2
Passenger 1	NAME: : VENDOR KON KOLANHAVELU@VENDER KON S/O KOLANDHAVELU
	GENDER: : MALE

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

PLEASE REFER TO SKETCH PLAN

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	SJN3868B
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 2

Vehicle Registration Number SMC1883S
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 KISHENDRAN VENDAR KON @KISHENDRAN S/OVENDAR KON
Approximate Age
Injuries Sustain SLIGHT INJURY
Injured person in which vehicle? SMF8094R
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

DETAILS OF INJURED PERSON 2

Name VENDAR KON KOLANHAVELU@VENDER KON S/O KOLANDHAVELU
Approximate Age
Injuries Sustain SLIGHT INJURY
Injured person in which vehicle? SMF8094R
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

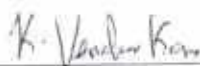
SKETCH PLAN


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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:


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


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

SKETCH PLAN

(A) SMF 8094R
(B) SJN 3868B
(C) SMC 1883S

P12 TWD5 CHANGI

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 20/03/2020 @ 1200HRS, I WAS DRIVING ALONG P12 TWD5 CHANGI AS THE FRONT VEHICLE STOPPED, I STOPPED TOO SUDDENLY AFTER A FEW SECONDS, I FELT AN STRONG IMPACT FROM THE BACK AND PUSHED MY VEHICLE FWD. I ALIGHTED AND FOUND THAT I WAS INVOLVED IN A THREE VEHICLE COLLISION.

DECLARATION

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

K. Vender Ka
Policyholder's Signature
Date & Time:

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

awen 05/10/2020
Reporting Centre Personnel's Signature
Name: Rashid
NRIC/FIN No.: 123456789

SINGAPORE ACCIDENT STATEMENT

ACCIDENT DATE: 03-Oct-2020

ACCIDENT TIME: 1200

LOCATION: PIE TWDS ~~TUAS~~ *Chanel*

VEHICLE NUMBER: SMF8094R

INSURED NAME: VENDAR KON KOLANDHAVELU@VENDAR KON S/O KOLANDHAVELU

NRIC / FIN: S2505982D

CONTACT: 97812735

MAKE: RENAULT

MODEL: SCENIC IV 1.5L DCI AT EU6

Are you claiming under your own insurance policy for repair to your vehicle?

() Yes, If No, Pls Select: (☒) Third Party () Reporting Only

INSURANCE COMPANY: LIBERTY

TYPE OF POLICY: Comprehensive

POLICY NUMBER: SD18V14399/VPC2/R00

EXPIRY DATE: 25-Nov-2020

NAME DRIVER: KISHENDRAN VENDAR KON@KISHENDRAN S/O
VENDAR KON

NRIC / FIN: S9974867B

CONTACT: 97812735

DATE OF BIRTH: 15-Feb-1999

DRIVING PASS DATE: 24-Dec-2019

OCCUPATION: Indoor

GENDER: Male

EMAIL ADDRESS:

ADDRESS OF DRIVER: 64 UPPER SERANGOON VIEW #10-04 KINGSFORD WATERBAY SINGAPORE 533886

Relationship Of The Driver With The Insured: Employee

Number Of Passenger Include Driver: 1 Driver + 1 Passenger(s)

NAME	NRIC/FIN/BC	GENDER	INJURED
KISHENDRAN VENDAR KON@KISHENDRAN S/O S9974867B VENDAR KON		Male	<input checked="" type="checkbox"/>
VENDAR KON KOLANDHAVELU@VENDAR KON S2505982D		Male	<input checked="" type="checkbox"/>

INJURY DETAILS: 1 Driver, 1 Passenger(s)

Insurance Company Of Driver's Own Vehicle:

Weather Conditions: Clear

Road Surface: Dry

Was Any Foreign Vehicle Involved In This Accident? No

Convey By Ambulance: No

Was There Any Video Capture By Car Camera? No

Was There Accident Reported To The Police? No

Police Report Number: NIL

Details Of 3rd Party	Name	NRIC	Contact	No.of Paxs(incl' driver)
Veh B SJN3868B				Not Sure
Veh C SMC1883S				Not Sure

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	982D
Vehicle Details	
Vehicle No.:	SMF8094R
Vehicle to be Exported:	Yes
Intended Deregistration Date:	03 Oct 2020
Vehicle Make:	RENAULT
Vehicle Model:	SCENIC IV 1.5L DCI AT EU6
Primary Colour:	Red
Manufacturing Year:	2018
Engine No.:	K9KF649D057347
Chassis No.:	VF1RFA00861137071
Maximum Power Output:	81.0 kW (108 bhp)
Open Market Value:	\$23,315.00
Original Registration Date:	26 Nov 2018
First Registration Date:	26 Nov 2018
Transfer Count:	0
Actual ARF Paid:	\$14,641.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	25 Nov 2028
PARF Rebate Amount:	\$10,980.00
Intended COE Rebate Details	
COE Expiry Date:	25 Nov 2028
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$25,000.00
COE Rebate Amount:	\$20,000.00
Total Rebate Amount:	\$30,980.00

The information contained herein is correct as at 03 Oct 2020

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**Liberty
Insurance.**

Liberty Insurance Pte Ltd
Registration no. 199002791D
51 Club Street
#03-03 Liberty House
Singapore 069426
Tel: (65) 6221 8611 Fax: (65) 6225 6890
Website: <http://www.libertyinsurance.com.sg>

THE SCHEDULE

PTE CAR - STANDARD PLAN 2YP (Comprehensive)
Policy Number SD18V14399 / VPC2 / R00

Name and Address of Insured
VENDAR KON S/O KOLANDHAVALU
101 JALAN BAHAR
SINGAPORE 649734

Replacing No.
Account No. A1716 (RNT)
Registration No. SMF8094R
Type of Body HATCHBACK
Capacity/Tonnage 1461 C.C
Engine No. K9KF649D057347
Chassis No. VF1RFA00861137071
Seating Capacity 5 Including driver
Year of Mfg/Reg 2018/2018
Make / Model RENAULT SCENIC 1.5T DCI

Profession or Business
INDOOR - OTHERS

Hire Purchase Owner/Leasing Company
DBS BANK LTD

Period of Insurance (Both Dates Inclusive)
From 26-NOV-18 To 25-NOV-20

Sum Insured
Market value at the time of loss

Named Drivers:
VENDAR KON S/O KOLANDHAVALU

Excess
Section I - SGD 800, Additional Excess for Young & Inexperienced Drivers - SGD 3000, Windscreen Excess - SGD 100

Extra Coverage
Unlimited Windscreen

Subject to the following Operative Endorsement attached:

V0001, V0002, V0009, V0010, V0011, V0012, V0013, V0095, V0097, V0152, V0225, V0233, V0276A, V0281, V0302, V0308B, V0313C, V0314, V0315, V0316, V0317B, Z011


THE POLICY'S PREMIUM (IN SINGAPORE DOLLAR)

Basic Premium 4,151.19	NCD 2,075.60 (50%)	Fleet / Other Discounts 0.00	Good Driver Discount 103.78 (5%)
Extra Premium 0.00	Sub Total 1,971.81	GST 138.03 (7.00%)	Total Premium Payable 2,109.84

This Schedule replaces any previous Schedule.
This Schedule and Policy are to be read together as one contract.
Person or classes of persons entitled to drive and limitation as to use, are as specified in the Certificate of Insurance issued in relation to this policy.

SCHEME: RNT

SINGAPORE
For and on behalf of
LIBERTY INSURANCE PTE LTD
Approved Insurers


Authorised Signature

PLMJ/PLMJ/13-DEC-18

S1_TEMPLATE 13-DEC-18

Motor Cover Note

Name of Producer: WEARNES AUTOMOTIVE PTE LTD (A1716)		Cover Note No.: C0089891
Date of Issue: 26 Nov 2018		Quotation/ Proposal/ Policy No.:

The Insured mentioned in the Schedule, having proposed for Insurance in respect of the Motor Vehicle described in the Schedule, is hereby HELD COVERED under the terms of the Company's usual form of Motor Policy applicable thereto for the period mentioned in the Schedule unless the cover be terminated by the Company by notice in writing in which case the insurance will thereupon cease and a proportionate part of the annual premium payable for such insurance will be charged for the time the Company has been on risk.

Details of Schedule

Name of Insured:	VENDAR KON KOLANDHAVALU @ VENDOR KON S/O KOLANDHAVALU ✓	
Period of Insurance:	From: 26 Nov 2018 09:32	To: 25 Nov 2020 23:59
Registration No.:	SMF 8094 R	
Make and Model:	RENAULT SCENIC 1.5T DCI ✓	
Type of Body:	MPV	
Capacity/Tonnage:	1451 ✓	
Year of Manufacture/Registration:	2016/2016 ✓	
Chassis No.:	VF1RFA00861137071 ✓	
Engine No.:	K9KF649D057347 ✓	
Sum Insured:	MARKET VALUE AT TIME OF LOSS	
Name of Finance Company:	DBS BANK LTD ✓	
Type of Plan:	Comprehensive	
Excess:	AS AGREED	

The Motor Vehicle (Third Party Risks and Compensation) Act (Cap 189), Motor Vehicles (Third Party Risks and Compensation) Rules, 1960, Road Transport Act, 1987 (Malaysia), Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia), and any subsequent revisions to the above Acts and Agreements.

We hereby certify that this Cover Note is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Not valid unless counter-signed by authorized person.



Date: 26 Nov 2018 09:32



For and on behalf of
LIBERTY INSURANCE PTE LTD

IMPORTANT NOTICE

Administrative Charge is payable for Cover Note issued and Policy not taken up.
Subject to Premium Payment Warranty Clause.

This Cover Note is issued for TEMPORARY USE only and is valid for 30 days from the date of issue, unless replaced by a Certificate of Insurance issued by the Company.