

## 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	15/11/2020 19:44
Date Of Accident	25/10/2020 12:25
Exact Location Of Accident	IN RAFFLES BOULEVARD, IN FRONT OF MARINA SQUARE ,
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMT2661U
<b>Insured/Policyholder</b>	
Name Of Registered Owner	RAMANARAYANAN MAHADEVAN
NRIC No	S6861926B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98182123
Alternative Phone No	OFFICE-98182123

### Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	BENZ S320L SEDAN
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2070061993
Cover Note Number	

### Driver

Name of Driver	RAMANARAYANAN MAHADEVAN
NRIC No	S6861926B
Date Of Birth	08/10/1968
Occupation	INDOOR
Date Of Driving Pass	29/04/2004
Driving Experience	16 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98182123
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	73 MEYER ROAD HAWAII TOWER #1803 SINGAPORE
Postcode	437898
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	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?	NO
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	2
Passenger 1	NAME: : HARSHAVARDHAN RAMANARAYANAN 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

Blue Car SMT2661U White Car SHC7126P I turned left from Temasek Boulevard into Raffles boulevard. I was moving to the right most lane as I was turning when the taxi coming straight on raffles boulevard in the same direction hit mildly. The collision was very mild and was at the area of the front tyre (right side) of my car

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

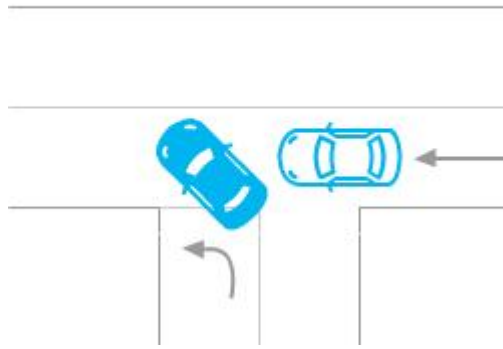
#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC7126P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

## Sketch Plan



Accident Photo



Accident Photo





Accident Photo



Accident Photo







Driving License

**REPUBLIC OF SINGAPORE** **DRIVING LICENCE**

Licence Number: **S6861926B**  
Name: **RAMANARAYANAN MAHADEVAN**

Birth Date: **08 Oct 1968**  
Issue Date: **29 Apr 2004**






Driving License

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

	PASS DATE
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	29 Apr 2004

NP 428A


Licence No: S68619263



Identification Card

**REPUBLIC OF SINGAPORE**  
**IDENTITY CARD NO. S6861926B**



 Name  
**RAMANARAYANAN MAHADEVAN**

 Race  
**INDIAN**

Date of birth  
**08-10-1968**

Sex  
**M**

Country/Place of birth  
**INDIA**



Identification Card

5677160



NRIC No. **S6861926B**



Date of issue

**02-12-2016**

Address

**73 MEYER ROAD  
#18-03  
SINGAPORE 437898**

