

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	15/05/2019 20:45
Date Of Accident	15/05/2019 08:20
Exact Location Of Accident	ALONG BRADDELL RD TOWARDS WOODLEIGH UNDERPASS
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJF5697G
Insured/Policyholder	
Name Of Registered Owner	RAMESH KHALAYANA KRISHNA
NRIC No	S7914015E
Email Address	FINDRAMESH@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-91887655
Alternative Phone No	OFFICE-91887655

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	SCIROCCO-1.4 TSI (A)
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	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	VPA/P1262732
Cover Note Number	

Driver

Name of Driver	RAMESH KHALAYANA KRISHNA
NRIC No	S7914015E
Date Of Birth	13/05/1979
Occupation	INDOOR
Date Of Driving Pass	05/11/2001
Driving Experience	17 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	+65-91887655
Fax Number	
Contact Number	OFFICE-91887655
Email Address	FINDRAMESH@HOTMAIL.COM

Address	10G BRADDELL HILL #12-27
Postcode	579726
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	VAY2308 (PRIVATE CAR)
Number of vehicles (including own vehicle) involved in the accident	3
Was any body injured in the Accident?	NO
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	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

Refer to attachment

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	VAY2308
Vehicle Make/Model/Colour	BMW
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)	1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	EN3288J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MR GOH
NRIC/Passport Number	
Contact Number	92995951
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

Sketch Plan

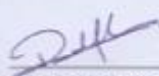
SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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.


Policyholder's Signature
Date & Time:

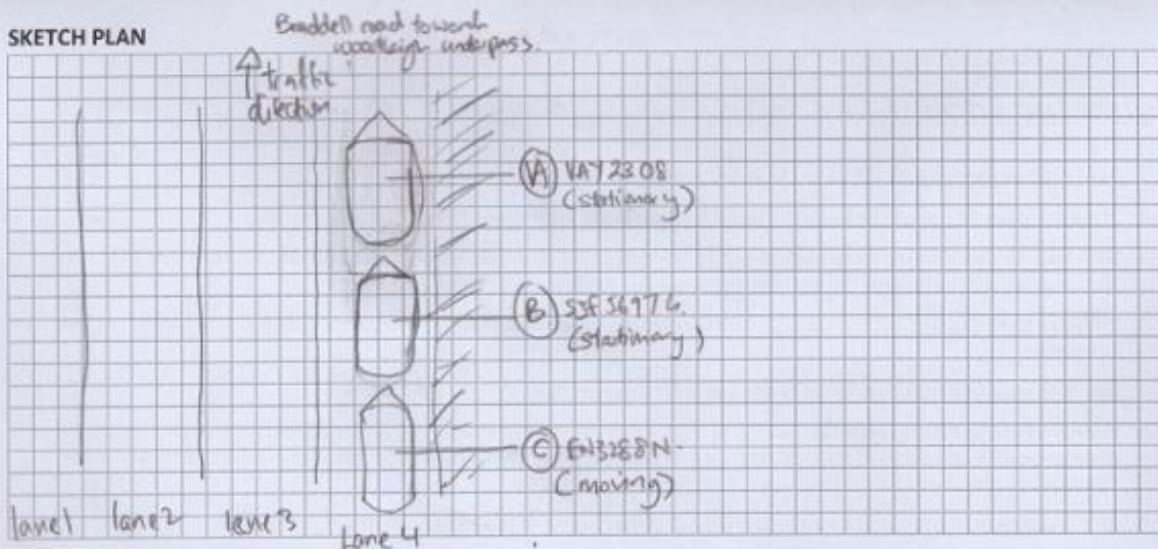
17/5/2019 17:15 HRS

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

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

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 15/05/2019 at about 0820hrs, I was driving my vehicle (SF5697G) along Braddell Road towards Woodleigh underpass. I was in the extreme right lane and I was slowing down due to traffic ahead. I then slowed down to a complete stop behind a Malaysian vehicle (VA12308). Subsequently, another vehicle behind me (EN3288J) collided into the rear of my vehicle. As a result, my vehicle surged forward and collided into the rear of the Malaysian vehicle.

Upon collision, all drivers came out of the vehicles to take photos and exchange contact details. All parties informed that no injuries were sustained by them ^{nor their} passengers. As such we did not call for police or ambulance assistance. All parties agreed to a private settlement approach at that time. The vehicle behind me (EN3288J) agreed to settle for the damages for all parties. By the afternoon, the approach taken by all parties was to file the necessary reports and settlement via insurance as per ^{the} request ^{of} the Malaysian vehicle driver.

DECLARATION

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


 Policyholder's Signature
 Date & Time:
 15052019 1715 HRS.
 G:\BAC SketchPlan\form_V3

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

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

Police Report



**SINGAPORE
POLICE FORCE**



T201905152119

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529899

Report No: T201905152119

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 15/05/2019 15:09		Vide Report No.:		Station Diary No.: 59	
Informant's Particulars					
Name of Informant: RAMESH KHALAYANA KRISHNA			Address: 10G BRADDELL HILL #12-27 SINGAPORE 579728		
ID Type / ID No.: NRIC NO / S7914015E			Contact No.: Home/Office: Mobile: 91887655		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 40	Date of Birth: 13/05/1979	Type of Informant: Driver		
Race: Indian			Language:		Institution / School Name:
Occupation: BUSINESS DEVELOPMENT DIRECTOR			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 15/05/2019 08:20	Type of Location: Straight Road
Location: Along Road 1 BRADDELL ROAD				
Braddell Road towards Woodleigh underpass				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Heavy
Type of Collision: CHAIN COLLISION				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
EN3288J	Car				Slightly Damaged	2
SJF5697G	Car				Slightly Damaged	0
VAY2308	Car				Slightly Damaged	2

Police Report



**SINGAPORE
POLICE FORCE**



T/20190515/2119

2 of 3

Police Station Of Origin:

Bishan N.P.C

20 Bishan Street 23 SINGAPORE 579757

Tel No: 1800-5529999

Report No: T/20190515/2119

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	MR GOH	ID No.	NIL
Related Vehicle	EN3288J (Car)	Contact No.	92995951
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	RAMESH KHALAYANA KRISHNA	ID No	S7914015E
Related Vehicle	SJF5897G (Car)	Contact No.	91887655
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 15/05/2019 at about 0820hrs, I was driving my vehicle (SJF5897G) along Braddell Road towards Woodleigh underpass. I was on the extreme right lane and I was slowing down due to the traffic ahead. I then slowed down to a complete stop behind this Malaysian vehicle (VAY2306). Subsequently, another vehicle behind me (EN3288J) collided onto the rear of my vehicle and as a result, my vehicle surged forward and collided onto the rear of the Malaysian vehicle.

Upon collision, all drivers came down to take photos and also to exchange particulars. All parties then informed that no injuries sustained. As such, we did not call for police or any ambulance assistance as all parties agreed for private settlement at that point of time. The vehicle behind me also agreed to settle for the damages for both parties. We then proceeded on with our journey. I wish to state that my vehicle has an in-built car camera installed. However, I have not viewed the camera yet as of now.

I am lodging this report for record purposes.

Police Report



SINGAPORE
POLICE FORCE



T/201905152119

Police Station Of Origin:
Bishan N.P.C
30 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5528989

3 of 3

Report No: T/201905152119

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:

E /

Sgt 2 HO BOON KIAT, DARON

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time

15/05/2019 15:09

Officer In Charge Of Case:

TP / AEIT /

Sr Staff Sgt MOHAMAD ZULFAZDLI BIN

ABDULLAH

Contact No: 65476264

SN 041

Authentication Stamp

NP188

Classification Of Case:

SIGNATURE

Police Report



T/20190515/2130

1 of 3

Report No. T/20190515/2130

Case Summary Form (CSF For NP168)

Manual NP168 Form Serial No 1

Report Number T/20190515/2130

Vide Report Number T/20190515/2119

Date/Time of Report Made 15/05/2019 15:28

Place Report Lodged Traffic Police

Type of Informant Driver

Name of Informant RAMESH KHALAYANA KRISHNA

ID Type / ID No. NRIC NO / S7914015E

Home/Office

Mobile 91887655

BISHAN NPC
30 BISHAN STREET
SINGAPORE 579137
TEL: 1800-5519995

Email

Type of Accident Non-Injury / Foreign Vehicle

Drink Drive No

Anyone conveyed by ambulance No

Date/Time of Accident 15/05/2019 08:20

Details of Vehicle Involved

Vehicle No	Type	Make	Model	Color	Condition	No of Passenger
EN3288J	Car				Slightly Damaged	1
SJF5697G	Car	VOLKSWAGO N	SCIROCCO 1.4L AT TS 1372Q5	Black	Slightly Damaged	0
VAY2308	Car				Slightly Damaged	1

Police Report



T/20190515/2130

2 of 3

Report No. T/20190515/2130

Continuation of CSF For NP168

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Name	mr goh	ID No.	NIL
Related Vehicle	EN3288J (Car)	Contact No.	92995951
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	RAMESH KHALAYANA KRISHNA	ID No.	S7914015E
Related Vehicle	SJF5697G (Car)	Contact No.	91887655
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Facts.

I wish to add on that at that point of time, no private settlements or any transactions took place. I also wish to amend the number of passengers in the vehicles involved.

Police Report



T/20190515/2130

1 of 1

Report No. T/20190515/2130

Continuation of CSF For NP168

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.

Case Sensitivity No

Officer-In-Charge of Case TP / AEIT /
 MOHAMAD ZULFAZDEI BIN ABDULLAH

Classification of Case 1) NON-INJURY / FOREIGN VEHICLE

Identification Card



The image displays two official Singaporean identification documents for Ramesh Khalayana Krishna. The top document is an Identity Card (ID Card) issued by the Republic of Singapore. It features a pink background and includes a color portrait photograph of the holder. The card number is S7914015E. The holder's name is RAMESH KHALAYANA KRISHNA, born on 13-05-1979, and is a citizen of Singapore. The bottom document is a Driving License, also issued by the Republic of Singapore. It has a green background and includes the same color portrait photograph. The license number is S7914015E. The holder's name is RAMESH KHALAYANA KRISHNA, born on 13 May 1979, and the license is valid until 17 Dec 2005. A barcode is visible at the bottom of the license card.

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7914015E

Name
RAMESH KHALAYANA KRISHNA

Religion
INDIAN

Date of birth
13-05-1979

Gender
M

Country of birth
SINGAPORE

REPUBLIC OF SINGAPORE **DRIVING LICENSE**

License Number S7914015E

Name
RAMESH KHALAYANA KRISHNA

Date of birth 13 May 1979

Valid Until 17 Dec 2005

Barcode: S7914015E

Accident Photo

SKETCH PLAN

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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:

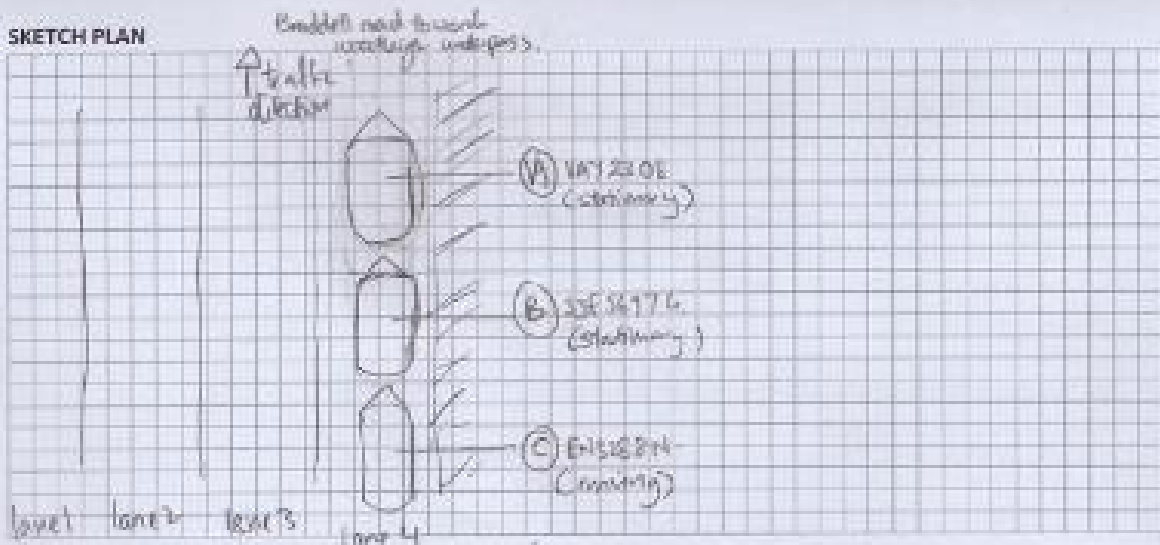
17/05/2017 17:05:43

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

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

Accident Photo

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 15/05/2019 at about 0820hrs, I was driving my vehicle (SFF569TG) along Braddell Road towards Woodleigh underpass. I was in the extreme right lane and I was slowing down due to traffic ahead. I then slowed down to a complete stop behind a Malaysian vehicle (VAY2308). Subsequently, another vehicle behind me (EN 828FI) collided into the rear of my vehicle. As a result, my vehicle surged forward and collided into the rear of the Malaysian vehicle.

Upon collision, all drivers came out of the vehicles to take photos and exchange contact details. All parties informed that no injuries were sustained by them ~~and~~ ^{and their} passengers. As such we did not call for police or ambulance assistance. ~~All~~ All parties agreed to a private settlement approach at that time. The vehicle behind me (EN33885) agreed to settle for the damages for all parties. By the afternoon, the approach taken by all parties was to file the necessary reports and settlement via insurance as per request ~~by~~ ^{of} the Malaysian Vehicle driver.

DECLARATION

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

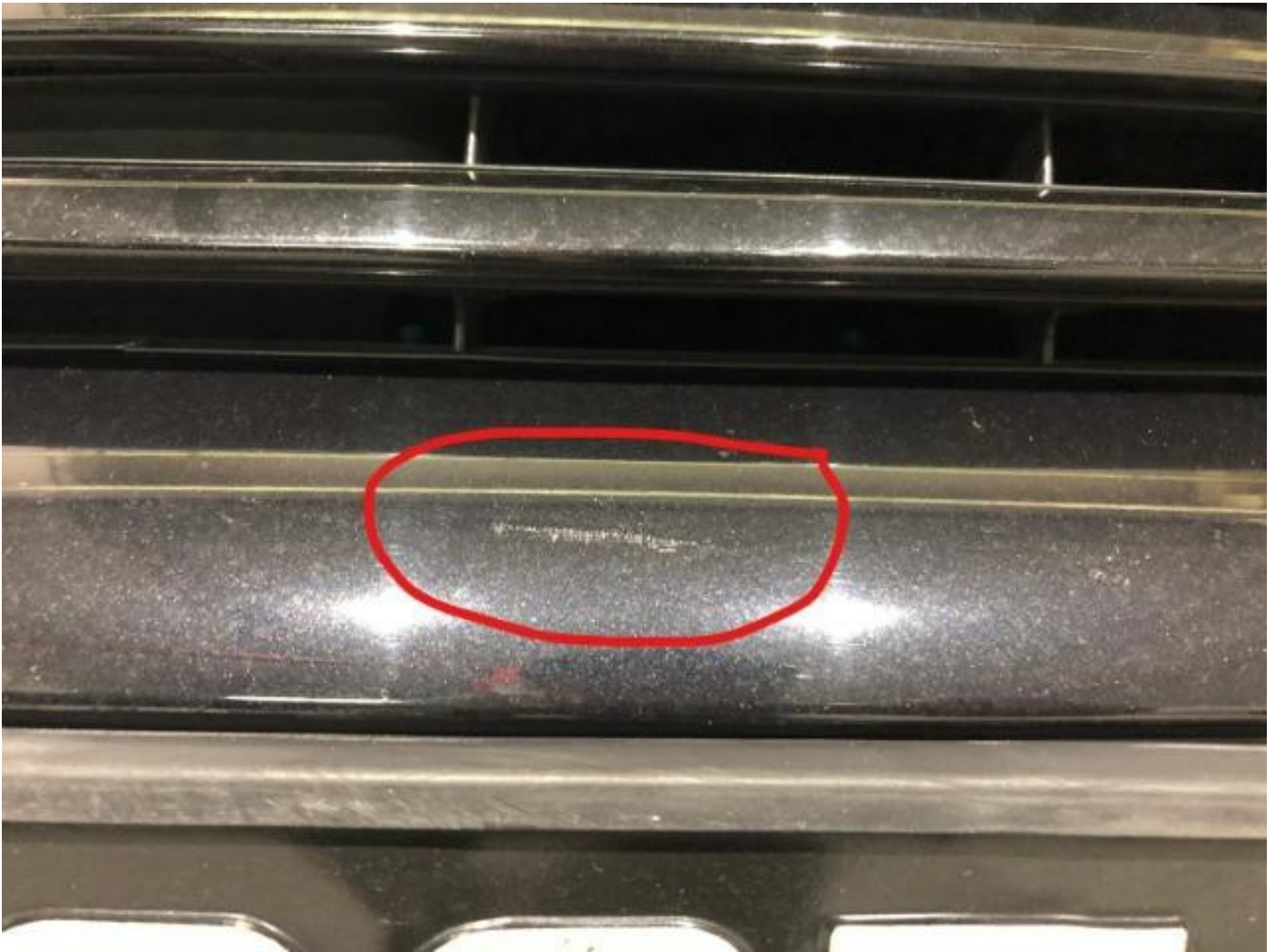

Policeholder's Signature

Order & Total: 1509.0000 1115.0000

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

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

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



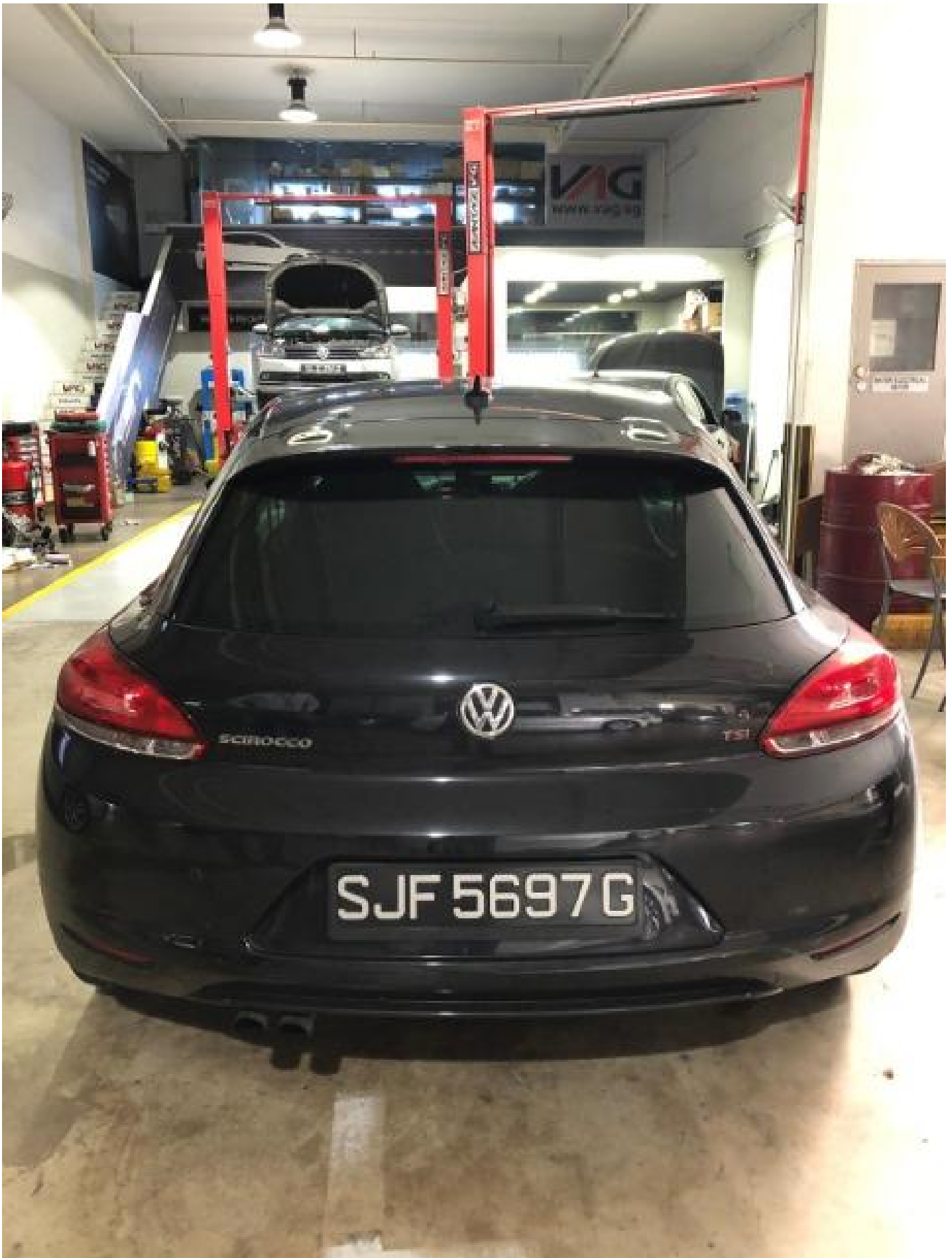
Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
 6 Raffles Quay #12-02 Singapore 048606
 Tel: 655 4334-4335 Fax: 655 4334-4336
 E-mail: gias@iasa.org.sg Website: www.gias.org.sg

REPORTING CENTRE: (To be filled in by the Reporting Centre)
 Name: _____ Address: _____

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENT:

Original Report No.: MVAG19063451 Vehicle Registration No.: SJF 5697G
 Name (as shown in NRIC): Ramesh Khelayana Krishna NRIC/FIN/Passport No.: S7914015E
 (*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
 Address: 1061 Braddell Hill #12-27 Singapore (S79726)
 Contact (Tel): _____ Mobile No.: 9188 7655
 Email Address: _____
 Date of Accident: 15/05/2014 Time of Accident: 0820 Hrs.
 Place of Accident: Along Braddell Rd towards Woodleigh underpass
 Insurance Company: AXA Insurance PTE LTD.

(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:

To add in photos of vehicle and accident.

Policyholder / Driver's Signature
 Date: 16052014 1000425.

Reporting Centre Personnel's Signature
 Name: Ang Jie Ren
 NRIC/FIN No.: S45026007.
 Date: 16/5/2014.