

## 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	27/11/2020 10:56
Date Of Accident	26/11/2020 17:20
Exact Location Of Accident	ALEXANDRA RD MERGING LANE TO TELOK BLANGAH RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKF1350X
<b>Insured/Policyholder</b>	
Name Of Registered Owner	YASH MUKESHKUMAR GUPTA
NRIC No	SXXXX346J
Email Address	PRACHI@AMROSE.SG
Mobile Phone No	(LOCAL) +65-81133136
Alternative Phone No	OTHERS-81133136

### Vehicle Particulars

Manufacturer	ROLLS-ROYCE
Model	PHANTOM-(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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 300307574 MPQ
Cover Note Number	

### Driver

Name of Driver	PRACHI GUPTA BADIGAR
NRIC No	SXXXX462A
Date Of Birth	26/05/1991
Occupation	INDOOR
Date Of Driving Pass	22/07/2011
Driving Experience	9 YEARS AND 4 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-81133136
Fax Number	
Contact Number	OTHERS-81133136
EEmail Address	PRACHI@AMROSE.SG

Address	7 KEPPEL BAY VIEW #04-25
Postcode	098405
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SIBLING
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	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?	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?	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	SJR103Z
Vehicle Make/Model/Colour	MAZDA 2
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	GOH ANN TAT
NRIC/Passport Number	SXXXX435I
Contact Number	96948748
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

## Accident Sketch Plan

### SKETCH PLAN

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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:

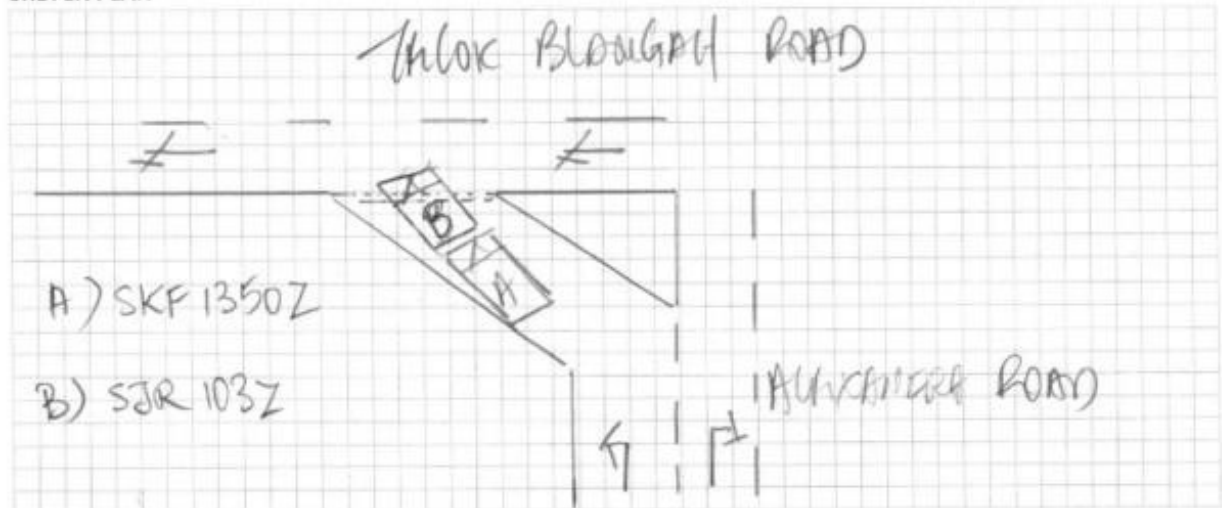
Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 27 Nov 2020

10:10 AM

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

# Accident Sketch Plan

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

TP vehicle was in front of me. We were stationary at a merging junction at between Alexandra Road and Telok Blangah Road. The road on Telok Blangah was clear. Approaching vehicles had stopped at a Red Traffic light. TP vehicle started moving. I followed. He suddenly stopped and before I could react and/or stop, our cars made contact.

I am pregnant at the moment.

## DECLARATION

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

Policyholder's Signature

Date & Time: 27 Nov 2020

ISARMC SketchPlan Form\_V3

Driver's Signature

(If driver is not the policyholder)

Date & Time: 27 Nov 2020

10:10 AM

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

**LETTER**

Dated this 28th day of September 2020

**Prachi Gupta Badigar**

.....

**DEED POLL**

.....

**M/s IRB Law LLP**  
117A Jalan Sultan  
Singapore 199007  
Tel: 6298 2537  
Fax: 6298 2547

LETTER

DEED POLL

BY THIS DEED, I, the undersigned **Prachi Gupta Badigar** holder of NRIC No. S9173462A and residing at Apt Blk 7 Keppel Bay View, #04-25, Singapore 098405, formerly known as **Gupta Prachi Mukeshkumar**, do hereby renounce and abandon the use of my former name **Gupta Prachi Mukeshkumar** and in lieu thereof do assume as from the date hereof the name **Prachi Gupta Badigar**.

AND in pursuance the above renunciation and abandonment of my former name I **HEREBY DECLARE** that I shall at all times hereafter in all records, deeds and instruments in writing and in all actions and proceedings and in all dealings and transactions and upon all occasions whatsoever use and sign the said name **Prachi Gupta Badigar** as my name in lieu of the said name of **Gupta Prachi Mukeshkumar** so renounced as aforesaid.

AND I hereby authorise and request that all persons do designate and address me by such name of **Prachi Gupta Badigar**.

IN WITNESS WHEREOF, I have hereunto signed my assumed name of **Prachi Gupta Badigar** and my relinquished name of **Gupta Prachi Mukeshkumar** and have set my seal here in Singapore this 28th day of September, TWO THOUSAND TWENTY (2020).

**SIGNED SEALED and DELIVERED**

by the above-named **Prachi Gupta Badigar**  
formerly known as **Gupta Prachi Mukeshkumar**  
in the presence of :-

)  
)  
)  
)



Cheong Yan-Wen Jeremy  
Advocate & Solicitor  
Singapore

Accident Photo





Accident Photo





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