SN0920CL0005 / National Assessment Centre Services [408933] ENTRY DATE & TIME: 21/12/2020 11:16 (SGT) SUBMITTED BY: Chew Hsiao Tong VERSION: 1 (21/12/2020 11:16 (SGT))

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 witholding 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.

- 4. The issue and acceptance of this is form by instrained 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 Submission 21/12/2020 11:16 (SGT) Date of Accident 10/12/2020 11:55 (SGT) Exact Location of Accident Cairnhill Rd, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMJ8317C

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner MANALI ASHOK SABNIS NRIC No. SXXXX969B Email Address sabnismanali@gmail.com Mobile Phone No (Phone) +65-98262549 Alternative Phone No +65-98262549

VEHICLE PARTICULARS

Manufacturer Toyota Model Harrier Variant 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 - Claiming third party Vehicle Category Private car

INSURANCE COMPANY

Name of Insurance Company **MSIG** Type of Coverage Comprehensive Fleet Policy Policy Number A 29143220 AT2 Cover Note Number

DRIVER

Name of Driver MANALI ASHOK SABNIS NRIC No SXXXX969B Date Of Birth 04/04/1988 Occupation Indoor

Date Of Driving Pass 07/10/2013 Driving experience 7 YEARS AND 2 MONTHS Gender Female Mobile Number (Phone) +65-98262549 Alt. Phone Number +65-98262549 Email Address sabnismanali@gmail.com Address 21 ANGSANA AVE Address complement Postcode 349979 Is the driver the policyholder? Yes If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Nο Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver GENERAL INFORMATION OF THE ACCIDENT Type of Accident Collision - Change/cross lane Weather Conditions **DRIZZLING** Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? Was any other material or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? Nο PASSENGER 1 Name **MOTHER** Gender Female **DETAILS OF POLICE ACTION** Was the accident reported to the police? Yes Police Station Name Potong Pasir Neighbourhood Police Post Police Station Phone No (Phone) +65-18002829999 Alt. Police Station Phone No (Fax) +65-62815964 Police Station Address Blk 142 Potong Pasir Avenue 3 #01-240 Singapore 350142 Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT REFER TO POLICE REPORT T/20201218/2129 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 SKN6443L

Vehicle Model

Vehicle Manufacturer

Vehicle Variant

Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	_
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

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 <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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 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.
- 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 shall be collectively referred to as the "Insurers"), the Insurers' law yers/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")

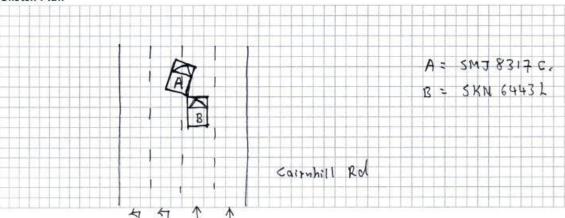
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' law yers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

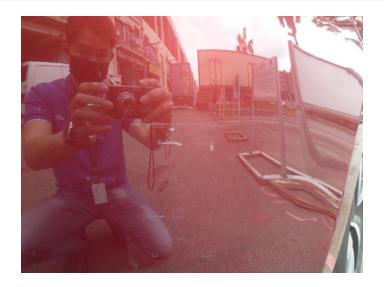


Refer to	Police	Report	7/2020	1218/2129	
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der's Signature / Date &	Driver's Signature (If driv	or ic not the notice	(holder) / Data	Witnessed by Reporting (Contro
		er is not the bolic	(noider) / Date	/vitnessed by Reporting (entre























Police Station Of Origin: Potong Pasir NPP 142 Potong Pasir Avenue 3 #01-240 SINGAPORE 350142 Tel No: 1800-2829999

1 of 3 Report No. T/20201218/2129

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/12/2020 19:37		Made:	Vide Report No.:	Station Diary No.: 31	
Informan	t's Partic	ulars			
Name of Informant: MANALI ASHOK SABNIS			Address: 21 ANGSANA AVENUE SINGAPORE 349979		
ID Type / ID No.: NRIC NO / S8872969B		69B	Contact No.: Home/Office:	Mobile: 98262549	
Nationalit SINGAPO	y: DRE CITIZ	EN	Email:		
Sex: Female	Age: 32	Date of Birth: 04/04/1988	Type of Informant:		
Race: Indian			Language:	Institution / School Name:	
Occupation: Advocate/Solicitor			Driving Licence Information: Class: 3A Date of Expiry:		

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 10/12/2020 11:55	Type of Location X-Junction	
Location: CAIRNHILL F Weather: Drizzling	ROAD	Road Surface:	F	load Speed Limit:	
Traffic Flow: Traf		Wet Traffic Control:	Т	Traffic Volume: Heavy	
		Traffic Light - Wor	200000		

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SMJ8317C	Car	TOYOTA	HARRIER	Red	Slightly	1



T/20201218/2129

Police Station Of Origin: Potong Pasir NPP 142 Potong Pasir Avenue 3 #01-240 SINGAPORE 350142 Tel No: 1800-2829999

2 of 3 Report No. T/20201218/2129

CONTINUATION OF REPORT

Brief Details.

On the above date and time, I was driving along Cairnhill Road and was on the third lane. I had the intention of going straight, however as I got nearer to the junction, I realized that the lane is a left turn only lane. As such I had signaled my intention of changing to the second lane. The traffic light was red at the point in time. I noticed that there was another White Mercedes (???8443L), on the second lane as well.

When the light turned green, I then lane changed to the second lane, infront of the said White Mercedes. I would like to state that there was ample space for me to turn into the lane, however I can see from my rear and side view mirror, that the said White Mercedes kept inching forward on purpose, as such when I was in the process of lane changing, I felt a light impact coming from my rear right. I immediately stopped my vehicle and realized that the White Mercedes had bumped into my vehicle. I then went to the driver's side window to explain the chain of events that happened earlier however the driver just kept pointing to her in-car camera and told me that I should have waited. The driver did not even get down of her vehicle to have a discussion on the accident.

As I did not want to hold up the traffic any further, I then went back to my vehicle and drove off. Me and my passenger was not injured in the accident. There was a few scratches at the rear right bumper of my vehicle. I would like to state that I was not aware that I am required to lodge/a police report as I was not injured in the accident and there wasn't any serious damage to my vehicle.





Police Station Of Origin: Potong Pasir NPP 142 Potong Pasir Avenue 3 #01-240 SINGAPORE 350142 Tel No: 1800-2829999 3 of 3 Report No. T/20201218/2129

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 / Staff Sgt MUHAMMAD ALIMOON BIN MOHAMED JUBERI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 18/12/2020 19:37
Officer In Charge Of Case: TP / GIA / Staff Sqt WONG SIEU LUI Contact No. 2065476151 SN 57	Classification Of Case:
Authentication Stamp NP168 SIGNATURE	