

# 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 Submission ..... 22/12/2020 10:26 (SGT)  
Date of Accident ..... 19/12/2020 18:52 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... BAYSHORE ROAD TO UPPER EAST COAST ROAD  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SKB5655L

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... BALBINDER KAUR MRS KETANKUMAR GODA  
NRIC No ..... SXXXX703F  
Email Address ..... aakashgoda@gmail.com  
Mobile Phone No ..... (Phone) +65-97123172  
Alternative Phone No ..... +65-90036646

### VEHICLE PARTICULARS

Manufacturer ..... Audi  
Model ..... A5  
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 ..... Great Eastern  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... 2020-V0112434-VDP-E001  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... AAKASH KETANKKUMAR GODA  
NRIC No ..... SXXXX181B  
Date Of Birth ..... 17/12/1991  
Occupation ..... Indoor

|  |                            |
|--|----------------------------|
| Date Of Driving Pass .....   | 20/04/2010                 |
| Driving experience .....   | 10 YEARS AND 8 MONTHS      |
| Gender .....   | Male                       |
| Mobile Number .....  | (Phone) +65-90036646       |
| Alt. Phone Number .....  | -                          |
| Email Address .....  | aakashgoda@gmail.com       |
| Address .....  | 8D TANJONG RHU ROAD #13-02 |
| Address complement .....   | -                          |
| Postcode .....   | 436892                     |
| Is the driver the policyholder? .....                              | No                         |
| If No, Relationship of the Driver with the Insured .....           | Child                      |
| Does Driver Own Other Vehicles? .....                              | No                         |
| 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 ..... | Clear                         |
| Road Surface .....       | Dry                           |

#### OTHER INFORMATION

|   |     |
|---|-----|
| Was any foreign vehicle involved in the accident? .....   | No  |
| Number of vehicles involved in the accident .....   | 2   |
| 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) .....   | 2   |
| Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? ..... | No  |

#### PASSENGER 1

|              |               |
|--------------|---------------|
| Name .....   | NICHOLAS TEOH |
| Gender ..... | Male          |

#### DETAILS OF POLICE ACTION

|   |   |
|---|---|
| Was the accident reported to the police? .....  | Yes                                     |
| Police Station Name .....                       | Bedok North Neighbourhood Police Centre |
| Police Station Phone No .....                   | (Phone) +65-18002449999                 |
| Alt. Police Station Phone No .....              | (Fax) +65-62447258                      |
| Police Station Address .....                    | 30 Bedok North Road Singapore 469676    |
| Was notice of intended Prosecution given? ..... | No                                      |
| If yes, against whom? .....                     | -                                       |

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO POLICE REPORT

#### ATTACHMENT(S)

|   |     |
|---|-----|
| Are accident photos available for attachment? ..... | Yes |
| Was there any video captured by Car Camera? .....   | Yes |
| Was there any audio recorded? .....                 | No  |

#### DETAILS OF OTHER VEHICLE PROPERTY 1

|                                   |          |
|-----------------------------------|----------|
| Vehicle Registration Number ..... | SKT4380R |
| Vehicle Manufacturer .....        | Subaru   |
| Vehicle Model .....               | Forester |
| Vehicle Variant .....             | -        |

|   |             |
|---|-------------|
| Vehicle Colour .....                          | White       |
| 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**

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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.

COMFORTDELGRO ENGINEERING PTE LTD  
320 UBI ROAD 3  
SINGAPORE 408649

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.:

SHABRE SKAT, 409, Singapore 408649

B = SUSPECT

The diagram shows a four-way intersection on a grid background. Arrows indicate traffic flow: straight, left, and right turns for each direction. Six accident markers, labeled A through F, are placed at various points within the intersection and along the approach roads. Marker A is at the bottom left, B is at the bottom center, C is at the top center, D is at the top right, E is at the center, and F is at the center-right. Dashed lines represent the paths of the vehicles involved in the accident.

Refer to Police Report

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

Date & Time: 21/12/20, 1830hrs

Date & Time: 21/12/20, 1830hrs

NRIC/FIN No.:

320 UBI ROAD 3  
SINGAPORE 408649



For Customer Service please visit  
1 Pickering Street  
#01-01 Great Eastern Centre  
Tel: +65 6248 2888 Fax: +65 6327 3080



## Certificate of Insurance

ORIGINAL

The Motor Policy to which this Certificate relates is issued in accordance with the provisions of the following Legislation:  
Motor Vehicles (Third-Party Risks and Compensation) Act (Cap.189 of the Revised Edition) (Singapore)  
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1996 Edition (Singapore)  
Motor Vehicles (Third-Party Risks) Rules, 1959 (of Federation of Malaya)  
Road Transport Act 1987 (of Malaysia)  
Road Transport (Amendment) Act 2019 (of Malaysia)

FORM MX1

Policy No. : 2020-V0112434-VDP-E001 Risk# : 0001  
Policy Type : Drive And Save Plus Cover : Comprehensive any Workshop

**DESCRIPTION OF VEHICLES:**

Vehicle Registration : SKB5655L  
Vehicle Make & Model : AUDI A5 SB 2.0 TFSI S TRONIC (DESIGN)

Name of Insured : BALBINDER KAUR MRS.KETANKUMAR GODA

Period of Insurance : 31-05-2020 (0000HRS ) to 30-05-2021

**PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE \***

(a) The Policyholder.

The Policyholder may also drive a motor car not belonging to or hired (under a hire purchase agreement or otherwise) to him/her or his/her employer or his/her partner.

(b) Any other person who is driving on the Policyholder's order or with his/her permission.

(c) In the event of the death of the Policyholder; i) any member of the Policyholder's family, or a paid driver who has been driving the car during the lifetime of the Policyholder & permission to drive had not been withdrawn prior to the death of the Policyholder; (ii) any other person who has been given permission to drive the vehicle prior to the death & such permission had not be withdrawn by the Policyholder.

\* Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

**LIMITATIONS AS TO USE**

Use for social domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover use for hire or reward, racing, pace-making, reliability trial, speed-testing or the carriage of goods (other than samples) in connection with any other trade or business or use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (of Malaysia) are not to be included under these headings.

Signed for and on behalf of the Company

Authorized Signature

GPGTCSL

27-05-2020

Great Eastern General Insurance Limited (Reg. No. 1920 00003W)  
(A wholly-owned subsidiary of Great Eastern Holdings Limited)  
1 Pickering Street, #01-01 Great Eastern Centre, Singapore 048659  
Tel +65 6248 2000 Fax +65 6532 2214, [greateasterngeneral.com](http://greateasterngeneral.com)





































SKT 4380R

Confidence in Motion

SUBARU  
HYBRID

FORESTER  
HYBRID





**SINGAPORE  
POLICE FORCE**



G/20201220/7010

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**POLICE REPORT (NP299)**

Report No. G/20201220/7010

Police Station Of Origin  
Bedok Division HQ  
30 Bedok North Road SINGAPORE 469676  
Tel No:1800-2440000

|  |  |                     |
|--|--|---------------------|
| Date/Time Report Made<br>20/12/2020 12:41                    | Vide Report No.  | Station Diary No.   |
| Name Of Informant<br>AAKASH KETANKUMAR GODA                  | Address<br>8D TANJONG RHU ROAD #13-02 SINGAPORE 436892                                     |                     |
| ID Type / ID No.<br>NRIC NO / S9148181B                      | Contact No.<br>Home/Office:  | Mobile:<br>90036646 |
| Nationality<br>SINGAPORE CITIZEN                             | Email Address<br>AAKASHGODA@GMAIL.COM  |                     |
| Occupation<br>Administration manager                         | Sex<br>Male  | Age<br>29           |
| Institution/School Name                                      | Date of Birth<br>17/12/1991  | Race<br>Indian      |
| Date/Time Of Incident<br>19/12/2020 18:50 - 19/12/2020 19:15 | Location Of Incident<br>482 UPPER EAST COAST ROAD #Nil-Nil BALCON<br>EAST SINGAPORE 466519 |                     |

**Brief details.**

On 19 December 2020 6:52pm, I was driving with a passenger who is my witness. I exited ECP highway (bayshore exit) turning towards upper east coast road. When the traffic turned green, I was turning right keeping in my lane. This white Subaru of car plate number SKT4380R was on the lane on my right turning the same way as well. After turning, the driver drove into my lane, taking up almost half of it, causing me to swerve towards my left to avoid an accident. While I was being squeezed out of my lane, my car hit the kurb on the left, causing my left rims, tyres and suspension to be damaged badly. She did not plan to stop so I had to chase after her car, and when finally stopped, we got down and I showed her

|  |  |
|--|--|
| Signature Of Officer Recording The Report:<br>Not applicable | Signature Of Informant:<br>The identity of the person making this report has been authenticated by SingPass. No signature is required. |
| Signature Of Interpreter:<br>Not applicable                  | Date/Time:<br>20/12/2020 12:41   |
| Officer In-Charge Of Case:                                   | Classification Of Case:  |

Authentication Stamp



**SINGAPORE  
POLICE FORCE**



G/20201220/7010

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20201220/7010

the damage. She came down saying she did no wrong and she did not swerve into my lane. I asked her if she wants to settle privately but she was hostile. I told her if that's the case let's exchange particulars and get insurance to settle this and she started shouting at me and not willing to provide any form of her identity. She didn't want to show her driver's license, nor provide any form of contact. I told her let's call the police and while I was calling the police, she just went into her car drove off together with her passenger while I waited for the police. I obtained a case number afterwards and it is G/20201219/0245. I have a witness in my car who is my friend, his name is Nicholas Teoh, S9107672A. I suspect she was driving without a license or consumption of alcohol which is why she did not want to show her driver's license, nor did she want to wait for the police. I have video evidence and photos of the whole incident.

| Subjects Involved |   |                       |           |
|-------------------|---|-----------------------|-----------|
| Suspect           |   |                       |           |
| Person Name       | Unsure                                  |                       |           |
| ID Type           | OTHERS / Unsure                         | ID No                 | UNSURE    |
| Gender            | Female                                  | Age                   | 40-60     |
| Race              | Chinese                                 | Language              | English   |
| Occupation        | Other accounting clerks (eg cost clerk) | Relation To Informant | Suspect   |
| Victim            |   |                       |           |
| Person Name       | AAKASH KETANKUMAR GODA                  |                       |           |
| ID Type           | NRIC NO                                 | ID No                 | S9148181B |
| Gender            | Male                                    | Age                   | 29        |
| Race              | Indian                                  | Language              | English   |

|  |  |
|--|--|
| Signature Of Officer Recording The Report:<br>Not applicable | Signature Of Informant:<br>The identity of the person making this report has been authenticated by SingPass. No signature is required. |
| Signature Of Interpreter:<br>Not applicable                  | Date/Time:<br>20/12/2020 12:41   |
| Officer In-Charge Of Case:                                   | Classification Of Case:  |

Authentication Stamp



**SINGAPORE  
POLICE FORCE**



G/20201220/7010

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20201220/7010

|             |                                    |                        |   |
|-------------|------------------------------------|------------------------|---|
| Occupation  | Administration manager             | Address                | 8D TANJONG RHU ROAD #13-02 SINGAPORE 436892 |
| Mobile No   | 90036646                           | Is Informant A Victim? | Yes   |
| Person Name | AAKASH KETANKUMAR GODA (Informant) |                        |   |

Signature Of Officer Recording The Report:

Not applicable

Signature Of Interpreter:

Not applicable

Officer In-Charge Of Case:

Authentication Stamp

Signature Of Informant:

The identity of the person making this report has been authenticated by SingPass. No signature is required.

Date/Time:

20/12/2020 12:41

Classification Of Case:



10 Kaki Bukit Road 1 #01-41 Singapore 416175  
Tel: 6342 2328 Fax: 6747 5586 Email: Raysportrim@hotmail.com

*Breyton*  
Breyton Authorised Distributor

GST Reg No : 200918160 K

Cash

DATE: 28/11/2020

Co. Reg No : 200918160K

RECEIVED BY



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