

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 06/03/2021 14:48 (SGT)
Date of Accident 05/03/2021 09:45 (SGT)
Exact Location of Accident PIE, Singapore
Additional Location Information TOWARDS AIRPORT DETOUR KALLANG WAY EXIT
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKR3525H

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner SUPERTEC LIMOUSINE PTE LTD
Company Reg No 2XXXXX332H
Email Address SUPERTECLIMO@GMAIL.COM
Mobile Phone No (Phone) +65-97777478
Alternative Phone No +65-97777478

VEHICLE PARTICULARS

Manufacturer Toyota
Model Vios
Variant -
Exact purpose for which vehicle was being used at time of accident Private hire
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Private hire

INSURANCE COMPANY

Name of Insurance Company Axa
Type of Coverage ThirdPartyFireTheft
Fleet Policy No
Policy Number P2385128
Cover Note Number -

DRIVER

Name of Driver VALAM PURI MARAN S/O KRISHNAN
NRIC No SXXXX394A
Date Of Birth 13/02/1962
Occupation Outdoor

Date Of Driving Pass	07/12/1999
Driving experience	21 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97777478
Alt. Phone Number	-
Email Address	MARANVIP3062@GMAIL.COM
Address	436 TAMPINES ST 43 #03-107
Address complement	-
Postcode	520436
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
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	P.TAMILSELVI
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED
STATEMENT RECORDED BY LILY - PROGRESSIVE CAR CARE PTE LTD 67415336

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	SLS5215Y
Vehicle Manufacturer	-
Vehicle Model	-

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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLG2962G
Vehicle Manufacturer	-
Vehicle Model	-
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	VALAM PURI MARAN S/O KRISHNAN
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SKR3525H
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 2

Name of injured person	P.TAMILSELVI
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SKR3525H
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

* Refer to police report : T/20210305/1024

We declare the foregoing particulars are true in every respect.

Policyholder's Signature _____
Time _____

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

Witnessed by Reporting Centre
Personnel















TOYOTA MOTOR CORPORATION
MODEL NCP93R-BEPRKT 1497 mL
ENGINE 1NZ-EE
FRAME No. MR053HY9305077459
COLOR 209 EE10 Z35 GVM(kg)
TRIM U340E -02A AUG 08
PLANT -
TW/BUILT
MFD.BY: TOYOTA MOTOR THAILAND CO., LTD. MADE IN THAILAND







**SINGAPORE
POLICE FORCE**



T/20210305/7024

Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

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Report No. T/20210305/7024

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/03/2021 16:50		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: VALAM PURI MARAN S/O KRISHNAN			Address: 436 TAMPINES STREET 43 #03-107 SINGAPORE 520436		
ID Type / ID No.: NRIC NO / S1538394A			Contact No.: Home/Office: Mobile: 97777478		
Nationality: SINGAPORE CITIZEN			Email: maranvip3062@gmail.com		
Sex: Male	Age: 59	Date of Birth: 13/02/1962	Type of Informant: Driver		
Race: Indian			Language: English		Institution / School Name:
Occupation: Private Vehicle Hirer			Driving Licence Information: Class: 2B,2A,2 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 05/03/2021 09:45	Type of Location: Straight Road
Location: PAN ISLAND EXPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		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
SKR3525H	Car	TOYOTA	Vios	Black	Slightly Damaged	1
SLG2962G	Car				Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



T/20210305/7024

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Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20210305/7024

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SLS5215Y	Car				Slightly Damaged	0

Details of Person Involved					
Any Pedestrian Involved: No					
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA		
Passenger					
Name	P TAMILSELVI		ID No.	S1809164Z	
Related Vehicle	SKR3525H (Car)		Contact No.	NIL	
Hospital/Clinic	24 HOUR WALK-IN CLINIC		Class of Driving Licence & Expiry	Class: 2B,2A,2 Date of Expiry: NIL	
Date	05/03/2021		Date	05/03/2021	
No. of Days granted Medical Leave		03	Degree of		Slight
Driver					
Name	VALAM PURI MARAN S/O KRISHNAN		ID No.	S1538394A	
Related Vehicle	SKR3525H (Car)		Contact No.	97777478	
Hospital/Clinic	24 HOUR WALK-IN CLINIC		Class of Driving Licence & Expiry	Class: 2B,2A,2 Date of Expiry: NIL	
Date	05/03/2021		Date	05/03/2021	
No. of Days granted Medical Leave		03	Degree of		Slight

Brief Details.

I was travelling along PIE towards the direction of Changi Airport. The traffic came to a halt and I also stopped my car. The car behind me (SLS5215Y) did not stop in time and collided into the rear of my car. The impact caused my car to jerk forward and hit the car (SLG2962G) in front of me. All parties exchanged phone details and left.

Subsequently my wife, who is my passenger at the point of accident and I sought medical treatment at Unihealth Clinic (Bedok) and we were given 3 days MC.



**SINGAPORE
POLICE FORCE**



T/20210305/7024

Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

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Report No. T/20210305/7024

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
ANG YI TING, STEPHANIE
Contact No.: 65476414

Authentication Stamp
NP168

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

Date/Time:
05/03/2021 16:50

Classification Of Case:

