

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 15/03/2021 19:25 (SGT)
Date of Accident 13/03/2021 09:45 (SGT)
Exact Location of Accident Syed Alwi Rd, Singapore
Additional Location Information CARPARK LOT NO 2
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number FY9429K

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner JAYAPAL UMA SANKAR
NRIC No SXXXX150H
Email Address UMASANKARSNJ@YAHOO.COM
Mobile Phone No (Phone) +65-94742202
Alternative Phone No +65-94742202

VEHICLE PARTICULARS

Manufacturer Honda
Model PHANTOM
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 Motorcycle

INSURANCE COMPANY

Name of Insurance Company NTUC
Type of Coverage ThirdParty
Fleet Policy No
Policy Number 5078383913-04
Cover Note Number -

DRIVER

Name of Driver JAYAPAL UMA SANKAR
NRIC No SXXXX150H
Date Of Birth 26/10/1976
Occupation Outdoor

Date Of Driving Pass	14/03/2008
Driving experience	13 YEARS
Gender	Male
Mobile Number	(Phone) +65-94742202
Alt. Phone Number	+65-94742202
Email Address	UMASANKARSNJ@YAHOO.COM
Address	BLK 289 CHOA CHU KANG AVE 3
Address complement	#03-264
Postcode	680289
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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	Hit and run / Vandalism / Damaged whilst parked
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	Yes
Number of vehicles involved in the accident	8
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)	0
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

FOREIGN VEHICLE 1

Vehicle Registration Number	JSK5919
Vehicle Category	Motorcycle

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

PLS REFER TO THE POLICE REPORT:T/20210314/7000

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	SKG479K
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	DEEPAK KUMAR CHOUDHARY
NRIC No	SXXXX949I
Contact Number	(Phone) +65-96387309
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	SLW3958D
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 3

Vehicle Registration Number	FBG8961M
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Motorcycle
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 4

Vehicle Registration Number	JSK5819
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Motorcycle
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 5

Vehicle Registration Number UNKNOWN
Vehicle Manufacturer -
Vehicle Model -
Vehicle Variant -
Vehicle Colour -
Vehicle Category Motorcycle
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 6

Vehicle Registration Number UNKNOWN
Vehicle Manufacturer -
Vehicle Model -
Vehicle Variant -
Vehicle Colour -
Vehicle Category Motorcycle
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 7

Vehicle Registration Number UNKNOWN
Vehicle Manufacturer -
Vehicle Model -
Vehicle Variant -
Vehicle Colour -
Vehicle Category Motorcycle
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.
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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)**

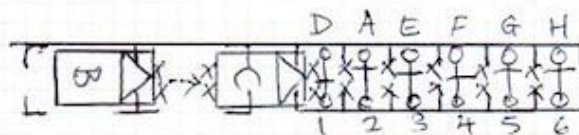
I understand, acknowledge, agree and consent that:

- (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 (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.


Policyholder's Signature / Date & Time


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

 15/03/21
Witnessed by Reporting Centre Personnel

Sketch Plan

Syed Alwi Road


A: FY9429K
B: SKG479K
C: SLW3958D
D: FBG8961M
E: JSK5819
F: Unknown
G: Unknown
H: Unknown


Describe Circumstances of the Accident


On 13/03/2021 at about 09:45 hrs, my motorcycle (F19429K) was parked along Syed Alwi Road on Parking lot 2. I came back and noticed my motorcycle was involved in an accident. I realised that Veh B (SKG479K) had collided into Veh C (SLW3958D) which is stationary in parking lot 14. Veh C then move forward and collided into Veh D (FBG8961M). Veh D then fall to the right and collided into my vehicle. My vehicle then fall to the right and hit Veh E (JSK5919). However, As a result, a total of 8 motor vehicles inclusive of 2 cars and 6 motorcycle was involved in the accident but i did not manage to take down some of the motorcycle carplate number. I was given a report no. A/20210313/0069 to file a police report. After the accident, i realise that my motorcycle helmet and Seat was damaged.

Declaration

We declare the foregoing particulars are true in every respect.


Policyholder's Signature / Date & Time


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

 15/03/21
Witnessed by Reporting Centre Personnel



**SINGAPORE
POLICE FORCE**



T/20210314/7000

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

2 of 4

Report No. T/20210314/7000

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SLW3958D	Car					0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FY9429K	NTUC Income Insurance Co-Operative Limited	5078383913-04	17/04/2020	16/04/2021

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	JAYAPAL UMA SANKAR	ID No.	S7667150H
Related Vehicle	FY9429K (Motorcycle)	Contact No.	94742202
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL
Vehicle Owner			
Name	DEEPAK KUMAR CHOUDHARY	ID No.	S2655949I
Related Vehicle	SKG479K (Car)	Contact No.	96387309
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

On 13/3/2021 about 9.45 am my motorcycle FY9429K was parked along the syed alwi road on the parking lot 2. I came back and noticed my motorcycle was involved in an accident. I realised that vehicle SKJ 479K was collided into the vehicle SW3958D which is stationary in the parking lot 14. The vehicle SW3958D then moved forward collided into vehicle FB8961M then fall into the right and collided into my vehicle. My vehicle then fall to the right and hit vehicle JSK5919. As a result a total of 8 motor vehicles inclusive of 2 cars and 6 motorcycles involved in an accident. But i didn't managed to take down some of the motorcycle name plate numbers. I was given a report number A/20210313/0069 to file a police report. After the accident i realised that my motorcycle got damaged.







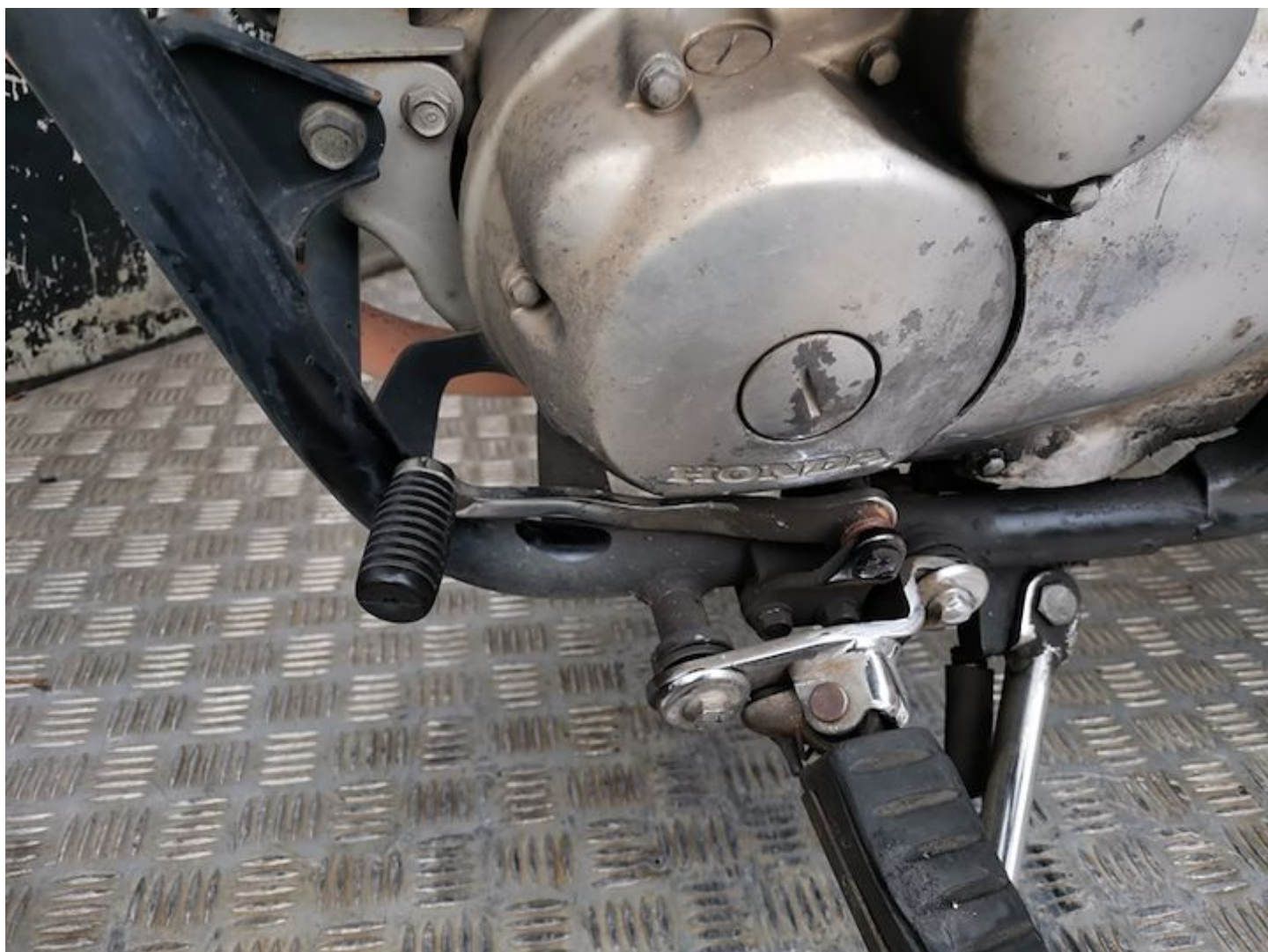














SINGAPORE POLICE FORCE



T/20210314/7000

1 of 4

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

Report No. T/20210314/7000

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 14/03/2021 00:00		Vide Report No.: A/20210313/0069		Station Diary No.:	
Informant's Particulars					
Name of Informant: JAYAPAL UMA SANKAR			Address: 289 CHOA CHU KANG AVENUE 3 #03-264 SINGAPORE 680289		
ID Type / ID No.: NRIC NO / S7667150H			Contact No.: Home/Office: Mobile: 94742202		
Nationality: INDIAN			Email: UMASANKAR_SNJ@YAHOO.COM		
Sex: Male	Age: 44	Date of Birth: 26/10/1976	Type of Informant: Rider		
Race: Indian			Language: English		Institution / School Name:
Occupation: Quality control/assurance engineer			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 13/03/2021 09:45	Type of Location: Car Park
Location: SYED ALWI ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
FBG8961M	Motorcycle					0
FY9429K	Motorcycle	HONDA	PHANTOM2 00 M	Black		0
JSK5919	Motorcycle					0
SKG479K	Car					0



**SINGAPORE
POLICE FORCE**



T/20210314/7000

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

2 of 4

Report No. T/20210314/7000

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SLW3958D	Car					0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FY9429K	NTUC Income Insurance Co-Operative Limited	5078383913-04	17/04/2020	16/04/2021

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Rider				
Name	JAYAPAL UMA SANKAR		ID No.	S7667150H
Related Vehicle	FY9429K (Motorcycle)		Contact No.	94742202
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave		NIL	Degree of	NIL
Vehicle Owner				
Name	DEEPAK KUMAR CHOUDHARY		ID No.	S2655949I
Related Vehicle	SKG479K (Car)		Contact No.	96387309
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave		NIL	Degree of	NIL

Brief Details.

On 13/3/2021 about 9.45 am my motorcycle FY9429K was parked along the syed alwi road on the parking lot 2. I came back and noticed my motorcycle was involved in an accident. I realised that vehicle SKJ 479K was collided into the vehicle SW3958D which is stationary in the parking lot 14. The vehicle SW3958D then moved forward collided into vehicle FB8961M then fall into the right and collided into my vehicle. My vehicle then fall to the right and hit vehicle JSK5919. As a result a total of 8 motor vehicles inclusive of 2 cars and 6 motorcycles involved in an accident. But i didn't managed to take down some of the motorcycle name plate numbers. I was given a report number A/20210313/0069 to file a police report. After the accident i realised that my motorcycle got damaged.



**SINGAPORE
POLICE FORCE**



T/20210314/7000

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

3 of 4

Report No. T/20210314/7000

CONTINUATION OF REPORT



**SINGAPORE
POLICE FORCE**



T/20210314/7000

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

4 of 4

Report No. T/20210314/7000

CONTINUATION OF REPORTSketch 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 /
PHUA TIAK YEE
Contact No.: 65472077

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:
14/03/2021 00:00

Classification Of Case: