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Owner / Driver: (.) Cover Typo: (
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SN0821300001 / National Assessment Centre Services [159721] ENTRY DATE & TIME: 24/03/2021 12:06 (SGT)
SUBMITTED BY: Rosli Bin Abdul Wahab VERSION: 1 (24/03/2021 12:06 (SGT))



SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Please report correctly the details of the accident to speed up the claims process.

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.

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. Any false reporting may be referred to the Police for investigation.

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 Date of Accident Exact Location of Accident Additional Location Information Country/State of Loss

24/03/2021 12:06 (SGT) 18/12/2020 11:30 (SGT) Jin Pelikat, Singapore

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SKT9918H

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner NRIC No

Email Address Mobile Phone No Alternative Phone No No

AKHILESH SINGH SETHI SXXXX741F radhikasathaye@gmail.com (Phone) +65-98348416

VEHICLE PARTICULARS

Manufacturer

Model

Variant

Exact purpose for which vehicle was being used at time of

accident

Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category Transmission

CC

Audi

Q3

Private use

+65-98348416

No - Reporting only

Private car

Auto

1395

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage

Fleet Policy

Policy Number

Cover Note Number

DRIVER

Name of Driver NRIC No.

NTUC Income Insurance Co-operative Ltd Comprehensive

No

5101586033-02

RADHIKA SATHAYE SETHI @ RADHIKA VILAS SATHAYE SXXXX703D

Date Of Birth Occupation Date Of Driving Pass Driving experience

Gender Mobile Number Alt. Phone Number Email Address

Address

Address complement

Postcode

Is the driver the policyholder?

If No, Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

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 Weather Conditions Road Surface

OTHER INFORMATION

Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other material or property damaged? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?

DETAILS OF POLICE ACTION

Was the accident reported to the police? Police Station Name Police Station Phone No Alt. Police Station Phone No Police Station Address Was notice of intended Prosecution given?

If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour

Vehicle Category

PLEASE REFER TO POLICE REPORT T/20210107/2046

ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera? Was there any audio recorded?

No No

SMH1242R

DETAILS OF OTHER VEHICLE PROPERTY 1

Yes

Private car

Accident report SN08213O0001

23/10/1983 Indoor 02/06/2011

9 YEARS AND 6 MONTHS

Female

(Phone) +65-98348416

radhikasathaye@gmail.com 40 KEPPEL BAY DRIVE #04-98

098655

No

Spouse

No

Collided into Parked Vehicle

Raining Wet

No

2 No

> Yes 1

> > No

Yes

Bukit Merah West Neighbourhood Police Centre (Phone) +65-18003779999

(Fax) +65-63773923

500 Bukit Merah View #01-01 Singapore 159682

Page 2 of 15

No

Name of Driver	2
Contact Number	-
Address	_
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	#0
Details of property damaged in accident	*
No. Of Passenger (Including Driver)	0

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
- 2. This Formmust 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.
- 5. 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 (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 &

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

ALDON

Witnessed by Reporting Centre Personnel

Sketch Plan

B) SMH 1242R

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Declaration

We declare the foregoing particulars are true in every respect.

prote

24 MARCHE 11.50 AM

Witnessed by Reporting Centre Personnel

Policyholder's Signature / Date & Time

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

REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$8362703D



RADHIKA SATHAYE SETHI @RADHIKA VILAS SATHAYE



INDIAN Date of birth

23-10-1983

Country/Place of birth INDIA

FOR LIKE NACUSE

REPUBLIC OF SINGAPORE DRIVING LICENCE



LIMITE S 8 3 6 2 7 0 3 D

RADHIKA SATHAYE SETHI @RADHIKA VILAS SATHAYE

e: 23 Oct 1983 Issue Date: 05 Jul 2017



9332877





INDIAN Date of lease 02-06-2014

40 KEPPEL BAY DRIVE #04-98 SINGAPORE 098855

NRIC No: \$8362703D

Date: 03/06/2016

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 3 Motor cars with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg

02 Jun 2011



NP 428A

ACCIDENT STATEMENT

ACCIDENT DATE: (18, 1866) 20	(DD/MM/YYYY), TIME: (16 : 50)(HH:MM)
LOCATION: JAVAN PEC	MAT @ PROMENADE
1. DETAILS OF VEHICLE DIVEHICLE NUMBER: 5 DINSURANCE COMPANY:	KT9918 H
d)POLICY TYPE: (COMPREH	1586033-02 IENSIVE / THIRD PARTY / THÏRD PARTY FIRE &THEFT)
f)TYPE((SALOON) COUPE /	MPV /VAN / LORRY / MOTORCYCLE / OTHERS) VATE / COMMERCIAL / MOTORCYCLE)
h)PURPOSE OF USING AT AC	R YOUP OWN INSURANCE (YES/NO) PARTY CLAIM / REPORTING ONLY)
2. INSURED / POLICY HOLDER	
C) ADDRESS: CARIBRE : BOOK 40	c s- 098655.
CIncluding driver) DRIVER CINCLUDING driver) DINRIC/FIN/PASSPORT: S CIADDRESS: CARTEEL	SATHAUR SETHI (MALE / FEMALE) 8 36 2 70 3 D CONTACT: 9 83 4 8 4 1 6 2 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
*d)DATE OF BIRTH: (24/ e)OCCUPATION: (INDOOR) f)DATE OF DRIVING PASO 4. WAS DRIVER AN EMPLOYE	OUTDOOR)
IF NO, RELATIONSHIP OF T 5. a) WEATHER CONDITION: (CL	HE DRIVER WITH INSURED: 5 10 05 6
b)ROAD SURFACE: (DRY / WE 6. WAS ANYBODY INJURED (YES 7. a)REPORTED TO POUCE (YES) IF YES, PLEASE STATE WHICH	(NO)
He of passenger of VEHICLE NUMBER: 5M4 Including driver) b) DRIVER'S NAME:	11242R MODEL:
(,) 9. THIRD, PARTY VEHICLE	CONTACT:
Including driver O) VEHICLE NUMBER: O) DRIVER'S NAME: O) DRIVER'S NAME: O) NRIC/FIN/PASSPORT:	MODEL:
(

email = RADHIKASATHAUR@ GMAIL: WM VIDRO





1 of 3 Report No. T/20210107/2046

Police Station Of Origin: Bukit Merah West N.P.C 500 Bukit Merah View #01-01 SINGAPORE 159682

Tel No: 1800-3779999

REPORT OF A TRAFFIC ACCIDENT	REPORT	OF A	TRAFFIC	ACCIDENT
------------------------------	--------	------	---------	----------

Date/Tim 07/01/20	e Report 21 12:30	Made:	Vide Report No.:	Station Diary No.:	
Informar	nt's Partic	ulare		25	
Name of RADHIKA	Informant	/E SETHI	Address: 40 KEPPEL BAY DRIVE #04	OR SINCAPORE PROPER	
ID Type / NRIC NO	ID No.: / S83627	03D	Contact No.: Home/Office:		
Nationality: INDIAN			Email:	Mobile: 98348416	
Sex: Female	Age:	Date of Birth: 23/10/1983	Type of Informant:		
Race: Indian		SC WAR IN CO.	Language:	Institution / School Name:	
Occupation: SELF-EMPLOYED			Driving Licence Information: Class: 3	Date of Expiry:	

Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident:	Type of Location Car Park	
Location:	·	INU	18/12/2020 11:30		
JALAN PELIK Weather: Raining	, .	Road Surface: Dry	F	Road Speed Limit:	
Traffic Flow: Traff Two Way Not		Traffic Control: Not Controlled		Traffic Volume:	
Type of Collisi				Anyone conveyed by	

Details of V	The second secon	lved			Elbu Mile La Se	
Vehicle No.		Make	Model	Color	Condition	No of Passenger
SKT9918H	Car	AUDI		White	Slightly	0
					Damaged	

· · · · · · · · · · · · · · · · · · ·
edestrian Crossing: NA
P





T/20210107/2046

- 2 of 3

Report No. T/20210107/2046

Police Station Of Origin: Bukit Merah West N.P.C 500 Bukit Merah View #01-01 SINGAPORE 159682

Tel No: 1800-3779999

CONTINUATION OF REPORT

Driver						
Name	RADHIKA SATHAY	RADHIKA SATHAYE SETHI				S8362703D
Related Vehicle	SKT9918H (Car)		Conta	ct No.	98348416	
Hospital/Clinic	NIL		Class Drivin Licend Expiry	g	Class: 3 Date of Expiry: NIL	
Date Treatment	NIL		Date Disc	charge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree o	f Injury	NIL	

Brief Details.

On the 18/12/2020 at about 1130hrs, I arrived at The Promenade @ Pelikat basement carpark. I was driving my car bearing plate number SKT9918H and at that time, I was in the building to drop off some items. As I was parking my car at one of the parking lots I noticed an empty lot beside a white color car. I parked my car head in and as I was turning to park my car, my car had collided with gently with the car on the left which was the said white car. As soon as I realized the collision I stopped my car and got down. I noticed my car's front left bumper had collide with the parked car's right front door. There was a small scratch on the parked car therefore I used a tissue to wipe it off. After wiping it off there was only a small scratch on the car. I wanted to leave a note but I was too afraid to leave my particulars behind. I also feared that driver of the parked car would be aggressive towards me if he had found out. I then moved to another empty lot and parked my car. I noticed my left front bumper also sustained some scratches. I admitted that it was my mistake to not have left my particulars.

On the 07/01/2021 when I opened the letter box I noticed that there was a letter from Traffic Police. I called the officer in-charge namely Affendy and he informed me to lodge a Road Traffic Accident report at any police station. I came down to Bukit Merah West NPC as soon as I left the line with Affendy. That is all.





T/20210107/2046

3 of 3 Report No. T/20210107/2046

Police Station Of Origin: Bukit Merah West N.P.C 500 Bukit Merah View #01-01 SINGAPORE 159682

Tel No: 1800-3779999

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 Red D /		Signature Of Informant:	
Sgt 3 MUHAMMAD HAI	QAL BIN AZMAN	the production	
Signature Of Interpreter: Not applicable		Date/Time:	
The applicable		07/01/2021 12:30	
Officer In Charge Of Cas	se:	Classification Of Case:	
SI NOR AFFENDY BIN Contact No.: 65476368	JAFFAR	Landa and the same of the same	
	SINGAPORE .	SN 45	
Authentication Stamp	POLICE PONCE		
	SIGNAT	(1) 12	

Claim Handling

	0000 PERSONAL DES	Makisla Ne	ev70016H	GST Registration No.
licy No. 5	5101586033-02	Vehicle No.	SKT9918H	ear regionation do.
rtificate No.				Policyholder NRIC
	KHILESH SINGH SETHI	20123		Loading
oduct Code F	PRIVATE CAR INSURANCE	Cover Type	4117	Contact No.(Home)
ontact No.(Mobile)	NA .	Contact No.(Office)		eCode
nail Address		Special Remark		eCode Reason
'K	No Yes	TCA	100	Private Hire
CD Protection	No -	NCD Entitlement(%)	30	Private inte
Accident Details			6.038	A COLUMN TOWNS
eport Date	24/02/2021 14:05	Accident Report Within 24 hrs	Yes	Accident Type
ate of Accident	18/12/2020	Time of Accident hh:mm	10:30	Country of Accident
eporting Centre		Orange Force		ICM No.
ccident Location	183 Jalan Pelikat BZ carpark			
→ Total Excess Applicable				
xcess Type	Per Accident	Windscreen Excess	100.00	
		TO Chandard Evenes	0.00	
D Standard Excess	600.00	TP Standard Excess YIED TP Excess	2.50	Driver is Covered?
IED OD Excess	8d	TIED IF EXCESS		NOT THE WATER AND THE STATE OF
dditional Excess	o		0.00	
otal OD Excess Applicable	600.00	Total TP Excess Applicable	0.00	
▽ Benefits				
GST Registered Informat	ion		222 20 va man 4200	
ST Registered	No		GST Registration Date GST Status Verified	Yes
ST Registration No.			GST Status Verifica	
Iodification History				
	2			
→ Policyholder Mailing Add		Address 2	#04-98 CARIBBEAN AT KEPPEL	Address 3
Address 1	40 KEPPEL BAY DRIVE	Address Type	Singapore address	Post Code
Address 4		Related Policy Number	5101586033-02	
Unit No.	04-98	Related Policy Worlder	310130023 46	
		Park of Table		
Driver Name		Driver Type		Driver DOB
Unnamed driver Name		Driver NRIC Driver Age		Driving Experience
Register Date of Driver License				Contact No.(Home)
Contact No.(Mobile)		Contact No.(Office) Address 2		Address 3
Address 1		Address Type	Foreign address	Post Code
Address 4		Address Type		
Unit No.		D. J. a. Makirla No.		Oriver Insurer Company
	Million Blan	Driver Vehicle No.		
Does he own a Singapore Registered car?	Yes No			
	res No			
Registered car?	res. No			
Registered car? Modification History	res. No	at development gades virtualists		
Registered car? Modification History Claim 002 New	OD-MX	Insured Name	AKHILESH SINGH SETHI	Insured NRIC
Registered car? Modification History Claim 002 New Claim Type *		Insured Name Contact No.(Home)	AKHILESH SINGH SETHI	Contact No.(Office)
Registered car? Modification History Claim 002 New Claim Type * Contact No.(Mobile)	OD-MX Y			Contact No.(Office) TP Vehicle Number
Registered car? Modification History Claim 002 New Claim Type * Contact No.(Mobile) Email Address	OD-MX ▼ 91765606 AKHISETHIФGMAIL_COM	Contact No.(Home)	NIL	Contact No.(Office) TP Vehicle Number
Registered car? Modification History Claim 002 New Claim Type * Contact No. (Mobile) Email Address Claim Description	OD-MX	Contact No.(Home) OI Vehicle Number	NIL	Contact No.(Office) TP Vehicle Number
Registered car? Modification History Claim 002 New Claim Type * Contact No.(Mobile) Email Address Claim Description Preferred Workshop Contact No.	OD-MX 91765606 AKHISETHI⊕GMAIL_COM SKT9918H / SMH1242R ON 18 Dec 2020	Contact No.(Home) OI Vehicle Number Insured Liability •	NIL SKT9918H Partially at Fault	Contact No.(Office) TP Vehicle Number
Registered car? Modification History Claim 002 New Claim Type * Contact No. (Mobile) Email Address Claim Description Preferred Workshop Contact	OD-MX	Contact No.(Home) OI Vehicle Number Insured Liability * Preferered Repair Option	NIL SKT9918H Partially at Fault	Contact No.(Office) TP Vehicle Number Name of Preferred Works
Registered car? Modification History Claim 002 New Claim Type * Contact No.(Mobile) Email Address Claim Description Preferred Workshop Contact No.	OD-MX 91765606 AKHISETHI⊕GMAIL_COM SKT9918H / SMH1242R ON 18 Dec 2020	Contact No.(Home) OI Vehicle Number Insured Liability •	NIL SKT9918H Partially at Fault	Contact No.(Office) TP Vehicle Number Name of Preferred Worksl GIA report
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eBaoTech GeneralClaim Hello, NAC_BUKIT_MERAH_800676 · Change Language Change Password Log Out My Desktop **Policy Query** Notice of Loss Policy No. Date of Accident 18/12/2020 11:50 Vehicle No.(For Motor) SKT9918H Certificate Number Search Policyholder Name Policyholder NRIC Certificate Vehicle No. Insured Object Commence Select Policy No. Product Cover Type Expiry Date Number Date 5101586033-AKHILESH drivo CLASSIC S8187741F GPC SKT9918H SKT9918H 26/06/2020 25/06/2021 02 SINGH SETHI