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.

- 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 03/05/2021 17:00 (SGT) Date of Accident 03/05/2021 14:05 (SGT) Exact Location of Accident Orchard Rd, Singapore Additional Location Information ORCHARD ROAD, HANDY ROAD TURNING Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

+65-98255956

BMW

216i

Private use

Private car

Auto

1499

Vehicle Registration Number SMF7197J INSURED/POLICYHOLDER Is company? No Name Of Registered Owner PADMANABHAN RANGAPPA NRIC No SXXXX673C **Email Address** PADDY.RANGAPPA@GMAIL.COM Mobile Phone No (Phone) +65-98255956

VEHICLE PARTICULARS

Alternative Phone No

Manufacturer Model Variant Exact purpose for which vehicle was being used at time of Are you claiming under your own insurance policy for repair to your vehicle? Vehicle Category Transmission CC

INSURANCE COMPANY

Name of Insurance Company Type of Coverage Fleet Policy Policy Number Cover Note Number

Liberty Insurance Pte Ltd Comprehensive

No - Claiming third party

Νo

SD21V06406/VPC/R00

DRIVER

Name of Driver NRIC No

SIDHARTH DOKANIA SXXXX041D

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?

PASSENGER 1

Name Gender

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

REFER TO ATTACH.

ATTACHMENT(S)

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

No No

DETAILS OF OTHER VEHICLE PROPERTY 1

Yes

Vehicle Registration Number Vehicle Manufacturer

SMC4487H Toyota

Accident report SP0121530008

Page 2 of 22

2 No Yes 2 No

Collision - Change/cross lane

05/11/1992

26/02/2021

3 MONTHS

(Phone) +65-97843725

SIDHARTH.DOKANIA@GMAIL.COM

9 GEYLANG EAST AVENUE 1 #10-15

Indoor

Male

389783

No

Nο

Other

Clear

Dry

Nο

NITUA PADMANABHAN

Yes

Female

Tanglin Division Headquaters (Phone) +65-18003910000 (Fax) +65-63964900

21 Kampong Java Road Singapore 228892

Vehicle Model		-
Vehicle Variant		-
Vehicle Colour		Gray
Vehicle Category		Private hire
Name of Driver		YONG AH NIEW
NRIC No		SXXXX391F
Contact Number		-
Address		-
Address complement		-
Postcode	** ****	-
Insurance Company Name		China Taiping Insurance (Singapore) Pte. Ltd.
Nature Of Damage		FRONT
Details of property damaged in accident		.
No. Of Passenger (Including Driver)		3

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the Garns process
- 2. This form must be completed by the Policyholder and/or the Authorised Driver
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- 5. Any take 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 pacies
- 7. By the ladgment of this report to the insurers, you hereby consent to the archiving of this report is the centre and to copies of the report being made available aforesaid.
- & Consent under the Personal Data Protection Act (PDPA)

Lunderstand, acknowledge, agree and consent that:

- [a] My insurer, my workshop and the General Insurance Association of Singapore ("6:A") may/ere permitted to to bet, asc, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by the or possessed by thy insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehiclers) involved in this accident (of insurers) who have insured vehicless) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' lawyers/law firms, the Monetary Authority of Engapore and any relevant government agency/authority (such as the ponce), for the purpose(s)
 - by processing, handling above meaning with my claims populating the scatterion of the crains and any necessary investigations relating to the claims;
 - (d) investigating the accident and/or my claims,
 - (iii) carrying out and/or dealing with my instructions or responding to any engages by our
 - (by administraing my claims (including the mailing of correspondence, statements, invokes, reports of notices to me, which could involve disclosure of collain 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 admitratering, processing, handling and/or dealing with my claims trollectively the Purposes !
- (b) all insurer(s) who have insured vehicle(s) an alved in this accident and the insurers' lawyers/law firms, may/are permitted to collect, use, discince 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 for CSA to their third party service providers or agent fundading their lawyers figur funds, which may be said outsion of Singapore, for one or more of the above Purposes
- [6] my Personal Information will also be collected and used to compile claims factory for the purpose of traded detection, investigation and management in present and pilifuture claims
- $\{\epsilon\}$. The information so collected under (d) above may be shared ℓ disclosed
 - (i) to all insuress ane/or any other traid parties that assist in evaluating, investigating, controlling or manage a freed. regulators, law enforcement and government agencies as reasonably required for the purposes statud, or
 - (ii) for complying with requirements about any regulations, laws or court orders

Policyholder's Signature Dany & Turns

Histories softhe policinalities Date & 1 me. 65. 65 - 2671

Joseph Yaguel Maic/Reidermance Motors Limited

303 Alexandra Road Sime Darby Performance Centre

Singapore 159941

SKETCH PLAN	HUNDA	
	Commercial	
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DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

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I was in the left must lane, tunning left onto liverly read
The Toyola (as was on the third lane going
Straight. The driver aid but put the indicator
and probably realized he had to turn left, so
he proceeded to turn quickly all the hay from
lare 3 to kno 1, even though lane 2 was
empty. I was keeping to land 1 and 1 mccodin
and thought the other can would turn into lane
2, es give way, but instead be accelerated and
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but my cas in the right side from its
from left section. The domage to my can was
much mixe
DECLARATION

Fibricy'nd'der's Signiciand Cate & Tane.

Date of Signature

(If this exist not the posityholder) Cate & Lime: Carr US + 3v 21

Region Tose by Yaguel
Ferformance Motors Limited
MRE 303 Alexandra Road
Sime Darby Performance Centre
Singapore 159941





02 10503/7032

1 of 3

POLICE REPORT (NP299)

Police Station Of Origin Tanglin Division HQ 21 Kampong Java Road SINGAPORE 228892

Tel No:1800-3910000

Report No. E/20210503/7032

Date/Time Report Made	Vide Report No.		Station Diary No.		
03/05/2021 18:25					
Name Of Informant	Address				
SIDHARTH DOKANIA	9 GEYLANG EAST AVENUE 1 #10-15 SINGAPORE			5 SINGAPORE	
	389783				
ID Type / ID No.	Contact No.				
NRIC NO / S9278041D	Home/O	ffice:	Mobile:		
			97843725		
Nationality	Email Address				
INDIAN	SIDHAR	SIDHARTH.DOKANIA@GMAIL.COM			
Occupation	Sex	Age	Date of Birth	Race	
Advertising/Public relations manager	Male	28	05/11/1992	Indian	
Institution/School Name	Languaç	Language			
	English				
Date/Time Of Incident	Location Of Incident				
03/05/2021 14:00 - 03/05/2021 14:10	ORCHARD ROAD				

Brief details.

I was driving my father in law's car this afternoon and was heading to Plaza Singapura, with my wife seated next to me. We were on Orchard Road, in the left most lane turning onto Handy Road. The Toyota car (SMC 4487 H) was on the third lane going straight. The driver did not put the indicator and probably realized that he had to turn left, so he proceeded to turn quickly all the way from lane 3 to lane 1, even though lane 2 was empty (and also turned left). I was keeping to lane 1 and proceeding, and thought the other car would either turn into lane 2, or give way, but instead he accelerated and hit my car on the right side, from its front left section, completely scratching it up and denting it. The damage to our car was

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass No signature is required.		
Signature Of Interpreter: Not applicable	Date/Time: 03/05/2021 18:25		
Officer In-Charge Of Case:	Classification Of Case:		
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Authentication Stamp





02.10303/7032

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. E/20210503/7032

much more substantial than his. We exchanged details and I informed him that I would be proceeding with insurance claims given he was at fault.

Subjects Involved			age biggs		
Suspect					pro EA State of Constant Const
Person Name	Yong Ah Niew				
ID Type	NRIC NO	ID No			S2573391F
Gender	Male	Age			71-73
Race	Chinese	Language		e	Chinese
Occupation	Taxi driver	Complexion		cion	Fair
Build	Slim	Hair	Col	our	Grey
Hair Style	Short-Straight	Rela	ation	То	N/A
		Infor	rmar	nt	
Victim					
Person Name	SIDHARTH DOKANIA		····		
ID Type	NRIC NO	ID N			S9278041D
Gender	Male	Age			28
Race	Indian		Language		English
Occupation	Advertising/Public relations	Add	ress		9 GEYLANG EAST AVENUE 1
	manager				#10-15 SINGAPORE 389783
Mobile No	97843725	ls In	form	nant A	Yes
		Victi	im?		
Person Name	Nitya Padmanabhan				
ID Type	NRIC NO	ID N	10	······································	S9275398J
Signature Of Office	or Deporting The Deport		1	Cianatura	Office
Signature of Office	er Recording The Report:			The identi	Of Informant: ity of the person making this
Not applicable				report has been authenticated by Singpass.	
			Į	No signat	ure is required.
Signature Of Interpreter:				Date/Time:	
Not applicable				03/05/202	21 18:25
Officer In-Charge Of Case:				Classifica	tion Of Case:
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3 of 3

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. E/20210503/7032

Gender	Female	Age	28
Race	Indian	Language	English
Occupation	Business consultant	Address	9 Geylang East Avenue 1 #10- 15 Tre Residences SINGAPORE 389783
Mobile No	93824238	Relation To Informant	Spouse
Person Name	SIDHARTH DOKANIA (Inf	ormant)	

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.			
Signature Of Interpreter: Not applicable	Date/Time: 03/05/2021 18:25			
Officer In-Charge Of Case:	Classification Of Case:			

Authentication Stamp