

## 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	21/06/2021 19:14 (SGT)
Date of Accident	19/06/2021 19:40 (SGT)
Exact Location of Accident	ECP, Singapore
Additional Location Information	ALONG ECP NEAR EXIT 14 B, TOWARDS MCE
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMH7604R
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	BANERJI SUBROTO
NRIC No	SXXXX754Z
Email Address	SUBROTO80@YAHOO.CO.IN
Mobile Phone No	(Phone) +65-96554566
Alternative Phone No	(Office) +65-96554566

### VEHICLE PARTICULARS

Manufacturer	Skoda
Model	Octavia
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
Transmission	Auto
CC	1395

### INSURANCE COMPANY

Name of Insurance Company	Auto & General Insurance (Singapore) Pte. Limited.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	P10512189R00
Cover Note Number	-

### DRIVER

Name of Driver	BANERJI SUBROTO
NRIC No	SXXXX754Z

Date Of Birth	22/10/1980
Occupation	Indoor
Date Of Driving Pass	14/10/2018
Driving experience	2 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96554566
Alt. Phone Number	(Office) +65-96554566
Email Address	SUBROTO80@YAHOO.CO.IN
Address	808 THOMSON ROAD
Address complement	#03-19
Postcode	298190
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	Collision - Head to Rear
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)	4
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### PASSENGER 1

Name	MALOBICA BANERJI
Gender	Female

#### PASSENGER 2

Name	MADAN MOHAN
Gender	Male

#### PASSENGER 3

Name	ANOOP JAYARAJ
Gender	Male

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE SKETCH PLAN & ACCIDENT STATEMENT.

#### 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	SKL2298B
Vehicle Manufacturer	Mitsubishi
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)	-



**Describe Circumstances of the Accident**

On 19<sup>th</sup> June around 7:40pm I was driving on the left-most lane on the ECJ I was heading towards Exit 14B when a car (SKL 2298B) cut into my lane and rear-ended my car. It hit the right hand side of the rear wheel. I stopped the car and took pictures of the damage and exchanged particulars with the other driver (Philip Loh). Philip asked me to settle the matter privately by taking my car to his workshop. Given my car is relatively new, I told him that I would take it to my authorized workshop i.e. Skoda Centre. Philip asked me to give him the quote, upon which he would decide how to settle the matter. Given Sunday (20<sup>th</sup> June) was a holiday I could only bring in my car on Monday (21<sup>st</sup> June) to Skoda Centre. Skoda gave me a quote for repairs of approximately S\$2,000. I showed the quote to Philip and he asked me if I would be willing to go to his workshop as the quote was high in his opinion. I refused to go to his workshop as I have no visibility on the quality of repairs which will be done there. We then agreed to file insurance claim.


**Declaration**

We declare the foregoing particulars are true in every respect.

  
Policyholder's Signature / Date & Time

21/06/21  
4:03 pm

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

  
Witnessed by Reporting Centre Personnel