# **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.

- 4. The issue and acceptance of this is form by instrained 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 22/09/2021 11:01 (SGT) Date of Accident 21/09/2021 07:30 (SGT) Exact Location of Accident Pepys Rd, Singapore Additional Location Information Country/State of Loss Singapore

## **DETAILS OF OWN VEHICLE**

Renault

Vehicle Registration Number SGG1958K

#### INSURED/POLICYHOLDER

Is company? Name Of Registered Owner MUTHU RAMAN MURUGAN NRIC No. SXXXX918C Email Address murugandeiva@gmail.com Mobile Phone No (Phone) +65-91050499 Alternative Phone No +65-91050499

#### VEHICLE PARTICULARS

Manufacturer

Model Scenic 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 1461

#### **INSURANCE COMPANY**

Name of Insurance Company United Overseas Insurance Ltd Type of Coverage Comprehensive Fleet Policy Policy Number DHOM120051732000 Cover Note Number

#### DRIVER

Name of Driver MUTHU RAMAN MURUGAN NRIC No. SXXXX918C

Date Of Birth 17/01/1969 Occupation Indoor Date Of Driving Pass 21/10/2000 Driving experience 20 YEARS AND 11 MONTHS Gender Mobile Number (Phone) +65-91050499 Alt. Phone Number +65-91050499 Email Address murugandeiva@gmail.com Address BLK 984D BUANGKOK LINK #18-33 Address complement Postcode 537984 Is the driver the policyholder? Yes If No. Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Nο 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 - Major/Minor Rd Weather Conditions Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? Nο Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No **DETAILS OF POLICE ACTION** Was the accident reported to the police? Nο Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT ON THE 21ST SEPTEMBER 2021 AT ABOUT 07:30AM I WANTED TO DRIVE OUT MY CAR OUT OF THE PARKED LOCATION IN A

ON THE 21ST SEPTEMBER 2021 AT ABOUT 07:30AM I WANTED TO DRIVE OUT MY CAR OUT OF THE PARKED LOCATION IN A PARKING (LOT 19) ON PEPYS ROAD OPPOSITE TO THE ENTRANCE OF WEST POINT CONDOMINIUM. I HAD SEEN BOTH LEFT AND RIGHT AND IT WAS CLEAR FOR ME TO DRIVE OUT. SO I DROVE OUT AND CAME OUT ALMOST HALF MY CAR LENGTH. THERE WAS THIS CAR (SLU9909S) WHICH WAS STOPPED AND HAZARD LIGHT BLINKING ON THE ROAD TO MY RIGHT ABOUT 2 CAR DISTANCE AWAY. I THINK THE DRIVER INTENDED TO PARK IN ON LOT TO MY LEFT WHEN THERE WAS A CAR GOING OUT OF THE LOT. WHEN I WAS COMING OUT OF THE CARPARK THIS CAR (SLU9909S) SUDDENLY REVERSED VERY FAST. I THINK TO PARK ON THE EMPTY LOT TOWARDS MY LEFT VACATED BY AN EXITING CAR. I HAD NO REACTION TIME BEFORE I COULD REALISE THAT CAR'S SIDE PORTION OF BODY NEXT TO DRIVER SEAT AND FRONT BUMPER RIGHT SIDE PORTION SCRATCHED MY CAR FRONT SIDE PORTION ON THE RIGHT INCLUDING UP TO HALF OF MY NUMBER PLATE. I HAD ACTUALLY HONKED TO STOP THE CAR BUT IT WAS IN VAIN. THE PERSON ALSO DID NOT SEE HIS DRIVER SEAT WING MIRROR (I SUPPOSE) OTHERWISE HE COULD HAVE STOPPED.

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

No
Was there any audio recorded?

No

# **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number SLU9909S

Vehicle Manufacturer	Mercedes
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)	-

#### SKETCH PLAN

## **IMPORTANT NOTICE**

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

Lunderstand, 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

Witnessed by Reporting Centre Personnel

Sketch Plan

my can cut of the parked location in a car park lot #19 on Pepys Road opposite to the entrance of west fount Condominium.  I had seen both left and right and it was clear for me to drive out. So I drove out and Cameont almost half my car length.  There was this card # SLU 9909 S which was Stopped and hazard light blinking on the road to my right about 2 car distance away. I think the driver intended to park in an lot to my left when there was a car going out of the lot.  Can SLU 9909 S suddenly reversed very fast (I think to park on the sumpty blot towards my left vacated by an exited card I had no reachion time Before I could realize that car's side postion of the body next to driver seat and front bumper properties on the right including upto half of my humber plate I had achilally honked to lotop the car but it was in vain. The person also	Describe Circumstances of the Accident	
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# Declaration

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature / Date & Time

02:25 pm

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

Witnessed by Reporting Centre

Personnel













































