

# 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 ..... 22/09/2021 18:45 (SGT)  
Date of Accident ..... 21/09/2021 21:15 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... TAMPINES NORTH DRIVE 2 (GIANT SIDE EXIT)  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SNA563X

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... VICTOR AMALADOSS REEJA VERGIL ROSE  
Work Permit No ..... G5210890Q  
Email Address ..... saurabh.heeja@gmail.com  
Mobile Phone No ..... (Phone) +65-94247478  
Alternative Phone No ..... +65-94247478

### VEHICLE PARTICULARS

Manufacturer ..... LandRover  
Model ..... DISCOVERY SPORT 2.0P SE 7 SEATER  
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? ..... Yes  
Vehicle Category ..... Private car  
Transmission ..... Auto  
CC ..... 2000

### INSURANCE COMPANY

Name of Insurance Company ..... AIG Asia Pacific Insurance Pte. Ltd.  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... 7210054196  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... BHATTACHARYA SAURABH  
Work Permit No ..... G5210677Q

Date Of Birth .....	24/08/1983
Occupation .....	Indoor
Date Of Driving Pass .....	03/07/2019
Driving experience .....	2 YEARS AND 2 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-94247478
Alt. Phone Number .....	-
Email Address .....	saurabh.heeja@gmail.com
Address .....	5000E MARINE PARADE RD. LAGUNA PARK #15-19
Address complement .....	-
Postcode .....	449288
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Spouse
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 .....	Side Swipe
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 vehicle or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### PASSENGER 1

Name .....	WIFE
Gender .....	Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Queenstown Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18004719999
Alt. Police Station Phone No .....	(Fax) +65-64715299
Police Station Address .....	No. 3 Queensway #01-03 Singapore 149073
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO ATTACHMENT

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	Yes
Was there any audio recorded? .....	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SHD1155P
Vehicle Manufacturer .....	Hyundai

Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Taxi
Name of Driver .....	MR. GOH
Contact Number .....	(Phone) +65-94501878
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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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' 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.

*V Reef*

Policyholder's Signature / Date & Time

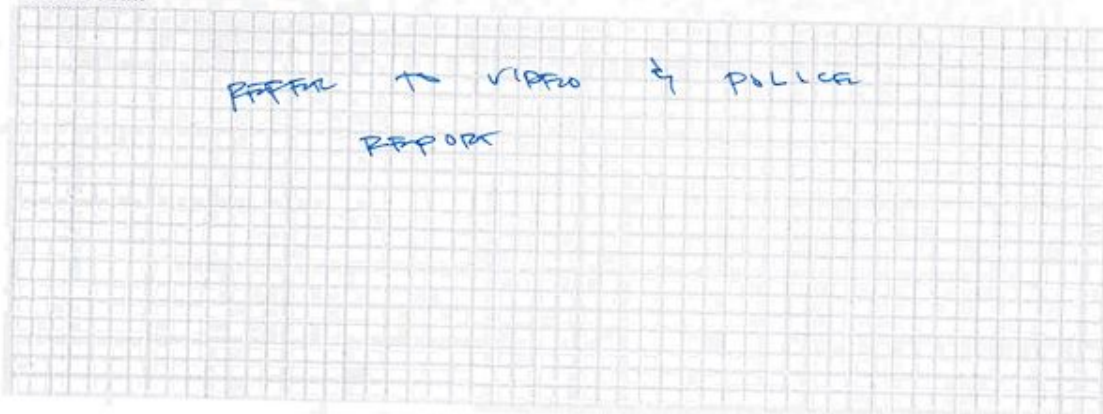
*Saurabh Bhattacharya*

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



Witnessed by Reporting Centre Personnel

## Sketch Plan





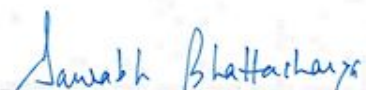
Describe Circumstances of the Accident


I was exiting Giant Tampines side exit around 9:15-9:20pm. As soon as I turned into the yellow box on the main road, I saw the taxi right next to me & I braked hard. By that time both the cars had torched. The driver of the taxi came out & spoke & we exchanged particulars (phone no. & car plate number). When I asked him whether he was ok, he mentioned that he was fine & had no injury. We took the photos & videos before we parked the car at the side of the road. After talking to him for a few more minutes, we left the area & he mentioned he will call me, if he needed any more details from my end.

Declaration

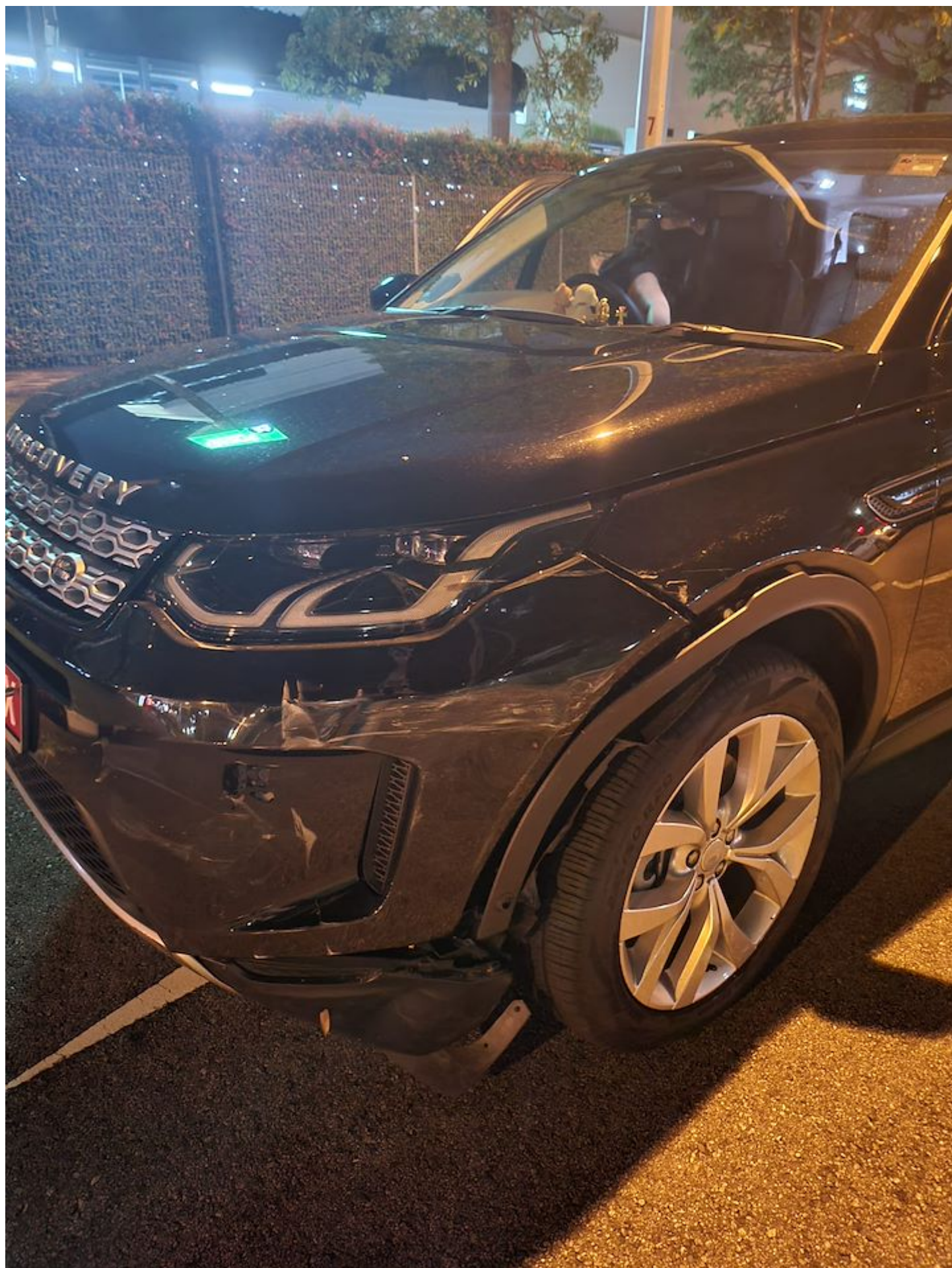
We declare the foregoing particulars are true in every respect.

  
Policyholder's Signature / Date & Time

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

  
Witnessed by Reporting Centre Personnel





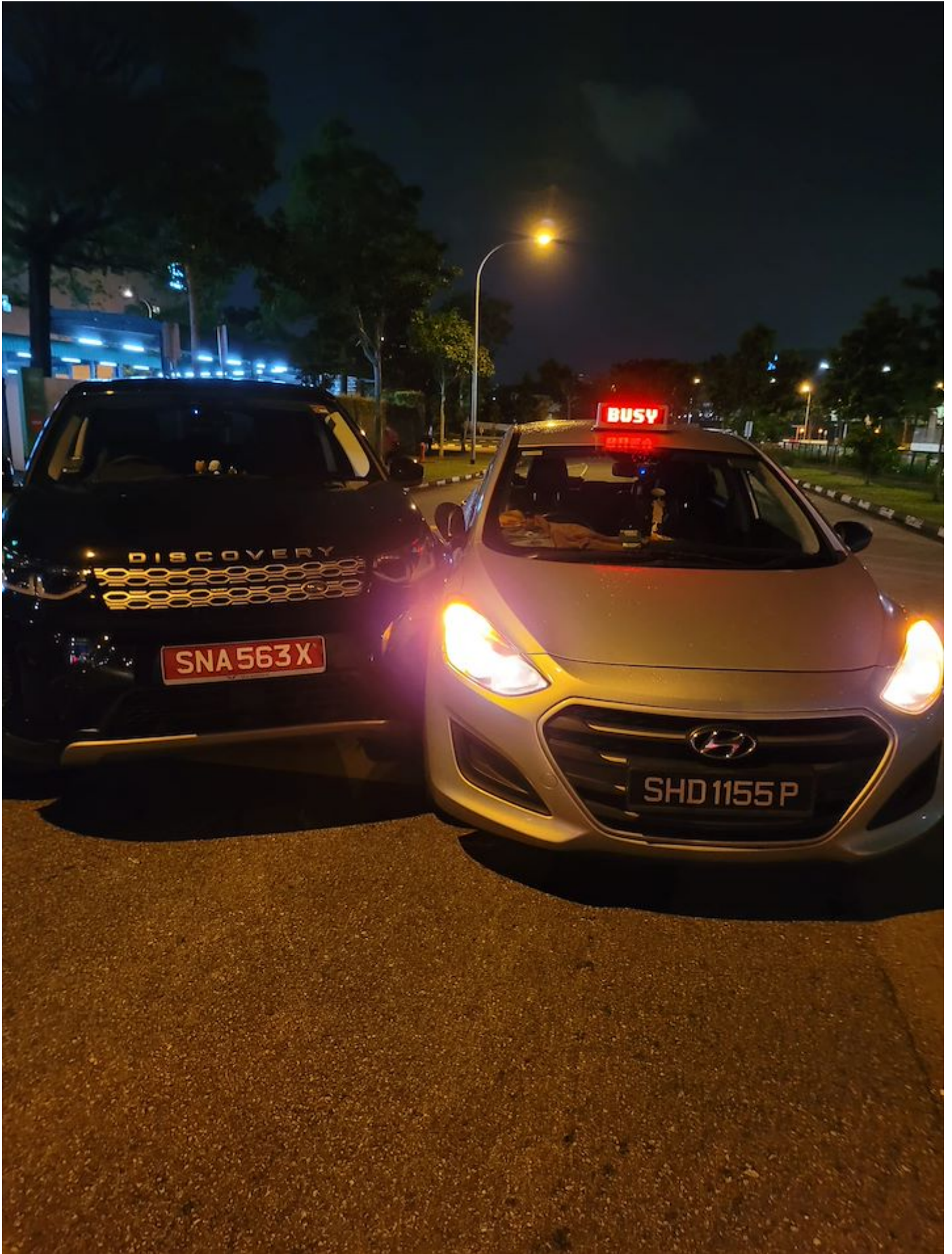




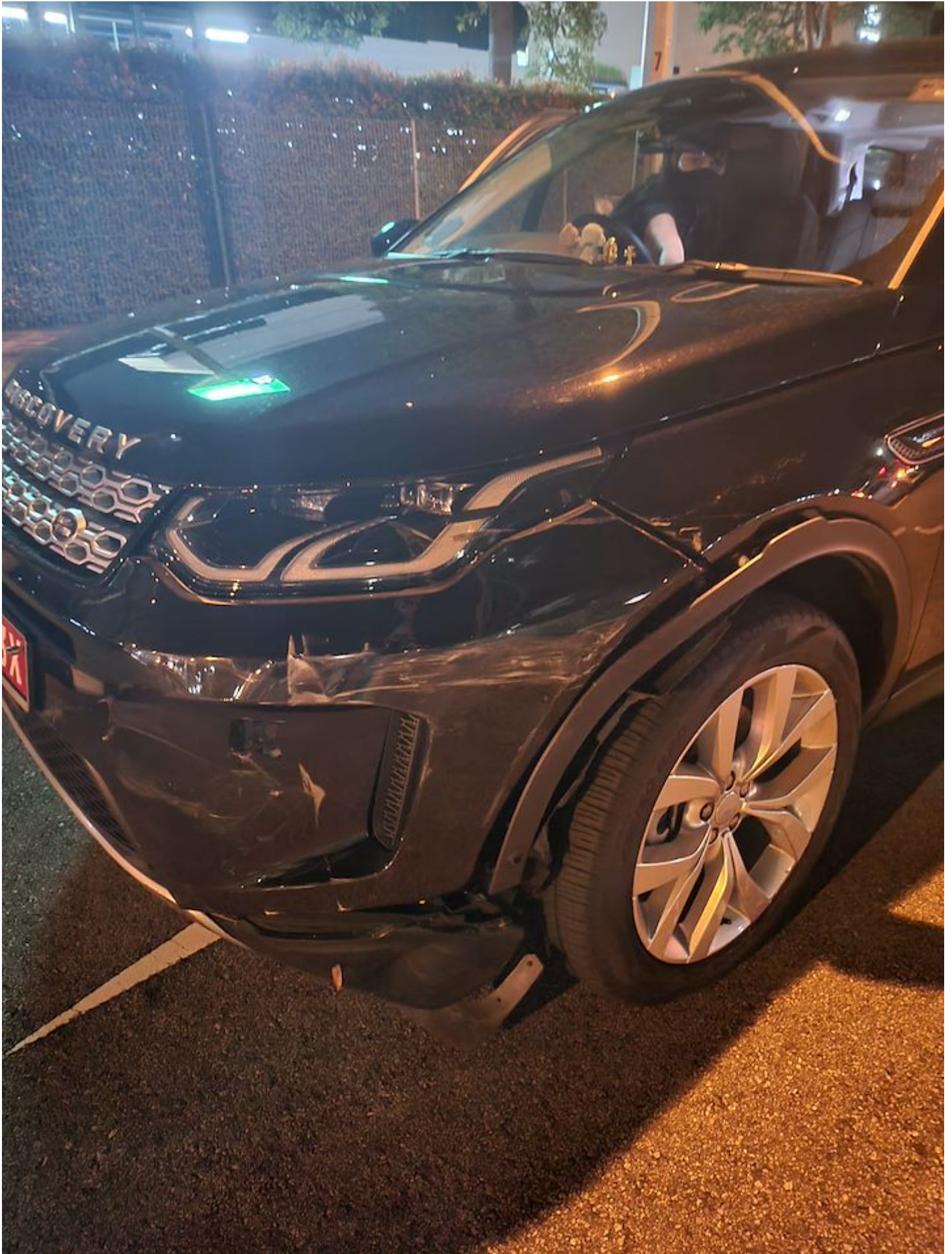




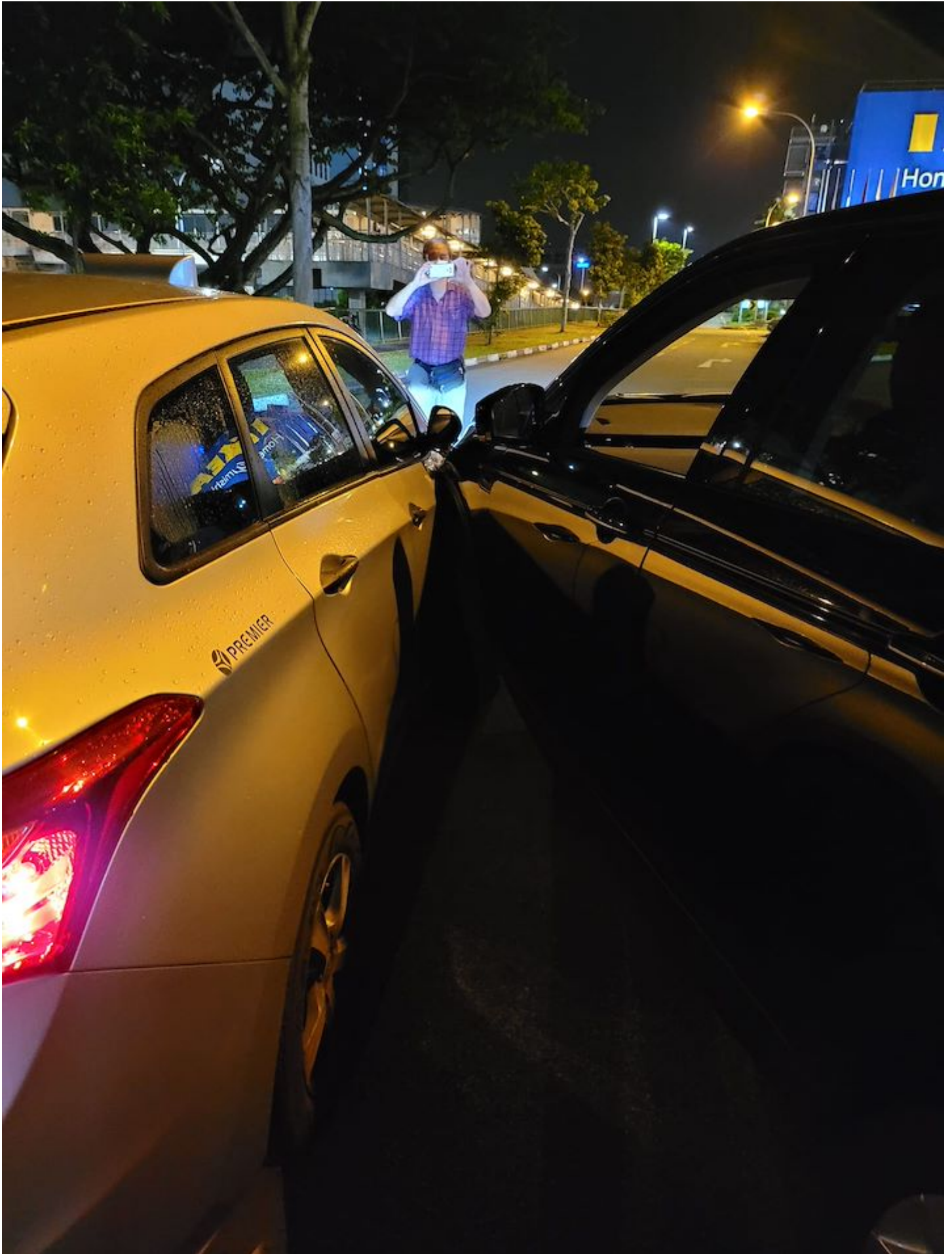








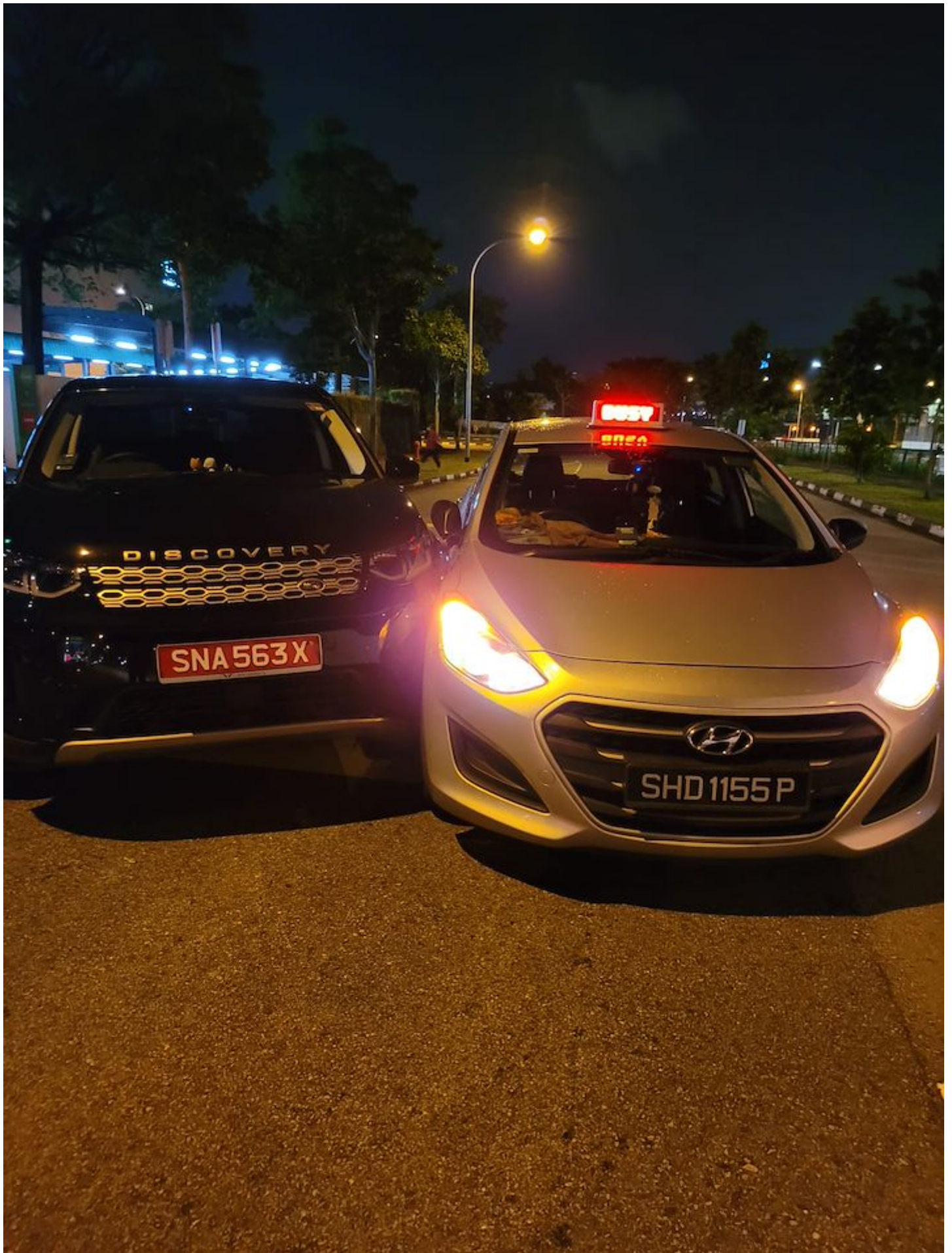
















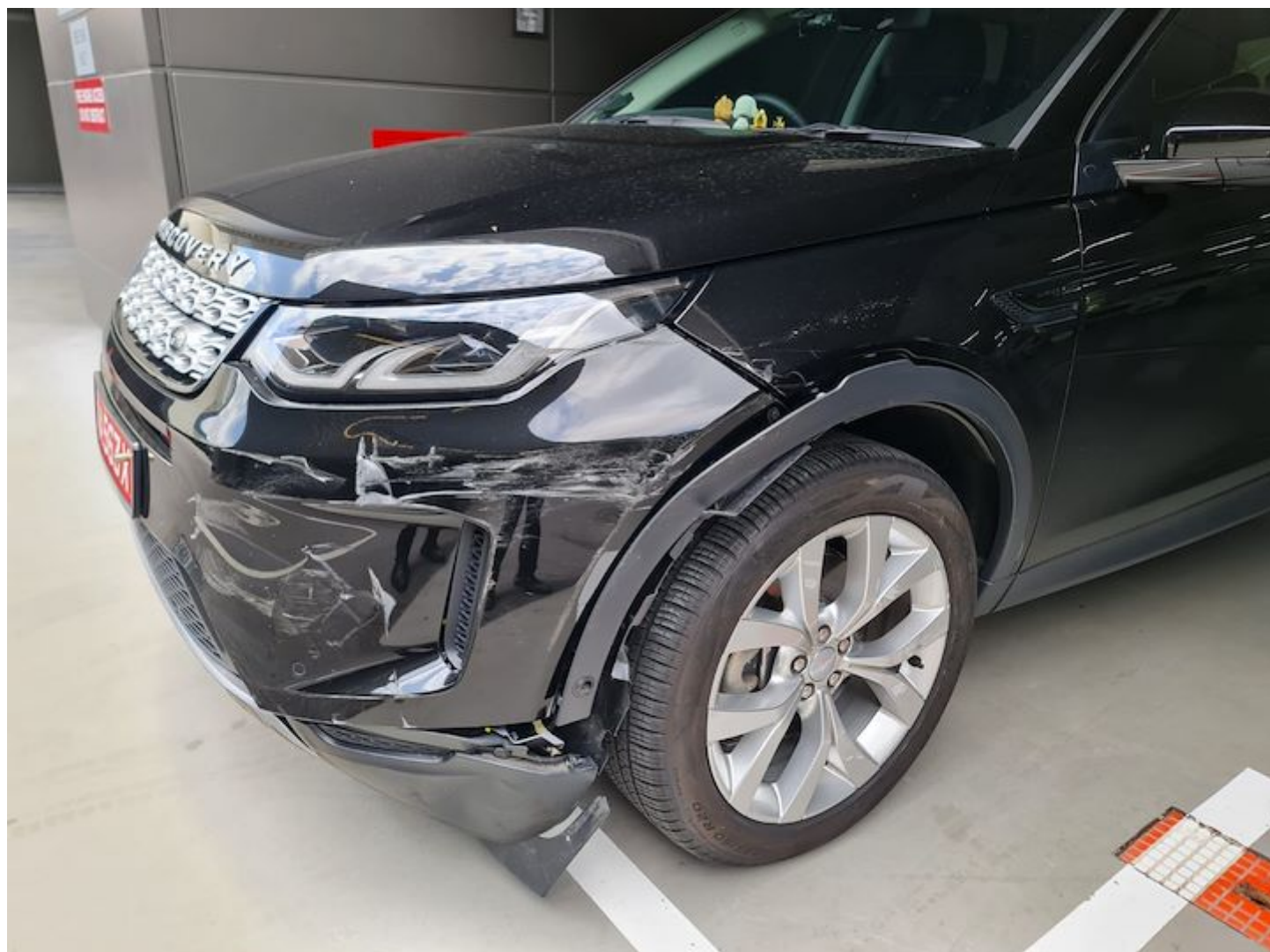





















































































































**SINGAPORE  
POLICE FORCE**


1720210922/2034

1 of 3

Report No: 1720210922/2034

Police Station Of Origin:  
Queenstown N.P.C  
3 Queensway #01-03 SINGAPORE 149073  
Tel No: 1800-4719999

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made:  
22/09/2021 13:17

Vide Report No.:

Station Diary No.  
32

**Informant's Particulars**

Name of Informant:  
BHATTACHARYA SAURABH

Address:  
APT BLK 5000E MARINE PARADE ROAD #15-19 LAGUNA  
PARK SINGAPORE 449288

ID Type / ID No.:  
FIN NO / G5210677Q

Contact No.:  
Home/Office: Mobile: 94247478

Nationality:  
INDIAN

Email:  
saurabh.reeja@gmail.com

Sex: Age: Date of Birth:  
Male 38 24/08/1983

Type of Informant:  
Driver

Race:  
Indian

Language:  
English

Institution / School Name:

Occupation:  
RECRUITMENT MANAGER

Driving Licence Information:  
Class: 3A

Date of Expiry: 02/07/2024

**General Information of the Accident**

Type of Accident:	Non-Injury	Drink Drive:	No	Date/Time of Accident:	21/09/2021 21:15	Type of Location:	T-Junction
Location: TAMPINES NORTH DRIVE 2							
Weather: Clear		Road Surface: Dry		Road Speed Limit:			
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic			
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction						Anyone conveyed by ambulance: No	

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHD1155P	Car	HYUNDAI		Silver		0
SNA563X	Car	LAND ROVER		Black	Slightly Damaged	1

**Details of Person Involved**

Any Pedestrian Involved: No

No. of Pedestrians Injured: NIL

Use of Pedestrian Crossing: NA




**SINGAPORE  
POLICE FORCE**


T/20210922/2034

2 of 3

Police Station Of Origin:  
Queenstown N.P.C  
3 Queensway #01-03 SINGAPORE 149073  
Tel No: 1800-4719999

Report No: T/20210922/2034

## CONTINUATION OF REPORT


<b>Driver</b>			
Name	Mr Goh	ID No.	NIL
Related Vehicle	SHD1155P (Car)	Contact No.	94501878
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
<b>Driver</b>			
Name	BHATTACHARYA SAURABH	ID No.	G5210677Q
Related Vehicle	SNA563X (Car)	Contact No.	94247478
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3A Date of Expiry: 02/07/2024
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 21/09/2021, at about 2115hrs, I was driving my car SNA563X as I was on my way back home with wife after shopping for groceries at Tampines Giant. As I was exiting the car park, I noticed that the traffic was clear before I turned right to the main road (3 lane road - lane 1 (turn right to car park), lane 2 and 3 (going straight)). However, as I was turning right, I suddenly felt an impact from the left side of my car. I then realized a silver taxi SHD1155P had side-swiped with me. I stopped and alighted from my car and I discovered that my front left bumper, chassis, headlight and side camera were damaged. I then spoke to the taxi driver and we exchanged particulars with him. We took photos of the accident and we subsequently left. During the conversation, I observed that the taxi driver seems to be fine and he does not look like he had suffered any injuries. I subsequently reported this incident to my insurance and I was advised to lodge a police report.

I wish to state that neither my wife and I had suffered any injuries in this accident. I also wish to state that I had in-car camera installed in my car and it had captured the incident. I have downloaded the footages and I am willing to submit the footages to the police as evidence.



 **SINGAPORE POLICE FORCE**

Police Station Of Origin:  
Queenstown N.P.C.  
3 Queensway #01-03 SINGAPORE 149073  
Tel No: 1800-4719999


T/20210922/2034

Report No: T/20210922/2034

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 Recording The Report D/ Sr Staff Sgt TAN WEI JIAN	Signature Of Informant: Lawal Bhattacharya
Signature Of Interpreter: Not applicable	Date/Time: 22/09/2021 13:17
Officer In Charge Of Case: TP / GIA / SI TAN JEOK LENG Contact No: 65476151	Classification Of Case: SN 49
Authentication Stamp NP168	 <b>SINGAPORE POLICE FORCE</b> SIGNATURE