

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	24/09/2021 17:09 (SGT)
Date of Accident	23/09/2021 21:15 (SGT)
Exact Location of Accident	TPE, Singapore
Additional Location Information	TOWARDS SLE EXIT TO TAMPINES AVENUE 7
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGB6383L
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	NALLU DHINAKHARAN
NRIC No	SXXXX546D
Email Address	nalludhinakharan@gmail.com
Mobile Phone No	(Phone) +65-82004476
Alternative Phone No	+65-82004476

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Stepwagon
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	1496

INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	SI21V034414/VPE/R02
Cover Note Number	-

DRIVER

Name of Driver	NALLU DHINAKHARAN
NRIC No	SXXXX546D

Date Of Birth	18/06/1987
Occupation	Indoor
Date Of Driving Pass	09/06/2009
Driving experience	12 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-82004476
Alt. Phone Number	+65-82004476
Email Address	nalludhinakharan@gmail.com
Address	BLK 438 TAMPNES STREET 43 #12-163
Address complement	-
Postcode	520438
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
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	PREETI BHART SHERI
Gender	Female

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 SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	WITH OWNER
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMJ3108Y
Vehicle Manufacturer	Honda
Vehicle Model	Vezel
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLR1840Z
Vehicle Manufacturer	Honda
Vehicle Model	Shuttle
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

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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.

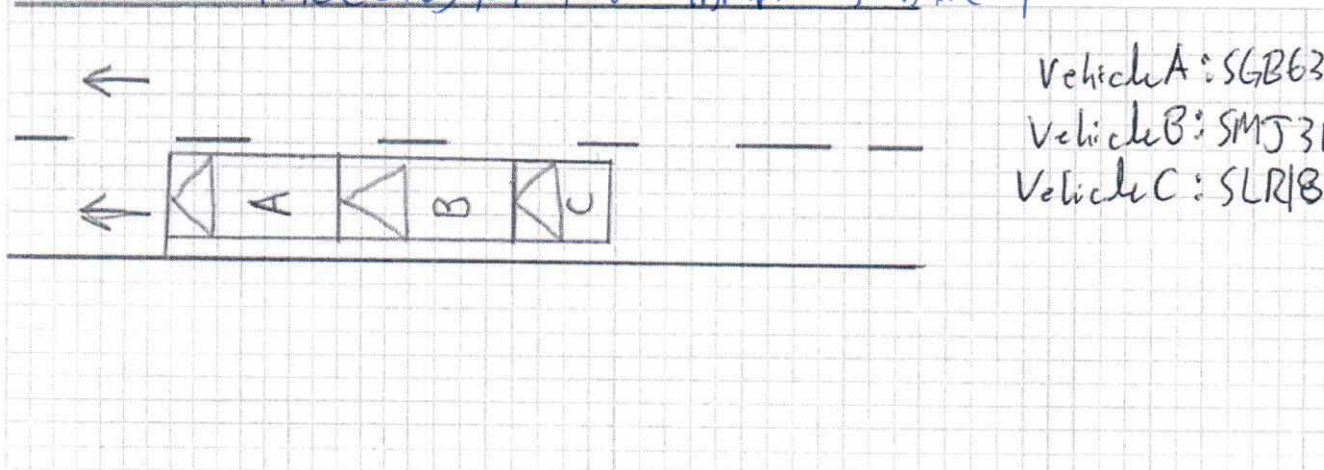

Policyholder's Signature / Date & Time


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


Witnessed by Reporting Centre Personnel

Sketch Plan

TPE (SUA) EXIT TO TAMPINES AVK 7




Describe Circumstances of the Accident

On the stated date and time, I was travelling along the stated location on my vehicle A. The vehicle ahead slowed down and stopped and I followed suit. Suddenly I felt an impact to the rear of my vehicle. I realised that vehicle C had rear ended vehicle B causing vehicle B to be propelled forward into the rear of my vehicle, ^{despite having come to an initial stop,} and causing a 3 car chain collision.

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

 24/09/2021
Witnessed by Reporting Centre Personnel

Date of Accident : 23/09/2021 Accident Time: 21:15 (24-HR-Format)
Accident Place : TPE (SLE) exit 60 Tampines Avenue 7
Vehicle. No. (Car Plate No.) : SGB6383L Make/Model: Honda Stepwagon 1.5L
Insurance Company : Liberty Policy No: SI21V03414/UPE/RO2
Owner or Company Name /IC No. : NALLU DHINAKHARAN /58717546D
Owner or Company Contact No. : 82004476 Owner's Hp _____ Company Tel _____
DRIVER'S Name / IC No. : NALLU DHINAKHARAN
DRIVER'S Date Of Birth : 18/06/1987 DRIVER'S License Pass Date 09/06/2009
Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: _____
DRIVER'S Address : 438 Tampines Street 43 #12-163(5520438)
DRIVER'S Contact No./ Alt No. : 1) 8200 4476 2) _____
DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)
Email Address : nalla dhinakharan@gmail.com
Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance
Number of Passengers (Including Driver): 2
Was there any video Captured by car camera? YES \ NO
Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose
Any Injury (If YES, Pls state): NO

Other Party Driver's Particular (if any)

Vehicle. No: SMT 3108Y
Vehicle Make/Model: Honda Vezel
Name Driver: _____
IC No. Driver/Contact: _____

Vehicle. No: SLR 1840Z
Vehicle Make/Model: Honda Shuttle
Name Driver: _____
IC No. Driver/Contact: _____

* NEW - Passenger's name & gender:

PREETI BHART SHERI
FEMALE

Motor Vehicles (Third-Party Risks And Compensation) Act (Chapter 189); Motor Vehicles (Third-Party Risks And Compensation) Rules, 1960; Road Transport Act, 1987; Road Transport (Amendment) Act 2019; The Motor Vehicles (Third Party Risks) Rules, 1959

Name of Policyholder: NALLU DHINAKHARAN	Effective Date of Commencement: 25 Apr 2021 00:00	Certificate No.: SI21V03414/ VPE / R02
Date of Issue: 15 Mar 2021	Chassis No.: RP11009161	Date of Expiry: 24 Apr 2022 23:59
Registration No.: SGB6383L		Type of Certificate: MX1

Persons or Classes of Persons entitled to drive*:

- A) The Policyholder.
- B) Any other person who is driving on the Policyholder's order or with his permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

Limitations as to use:

Use only for social, domestic and pleasure purposes and for the Policyholder's business.

The Policy does not cover:

- A) Use for hire or reward.
- B) Use for racing, pace-making, reliability trials or speed-testing.
- C) Use for the carriage of goods (other than samples) in connection with any trade or business.
- D) Use for any purpose in connection with the Motor Trade.

*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 are not to be included under these headings.

I/We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987.



For and on behalf of
LIBERTY INSURANCE PTE LTD
 Approved Insurers

For Information Only:

Coverage(s):	Comprehensive, Unlimited Windscreen
Sum Insured:	MARKET VALUE AT THE TIME OF LOSS
Excess:	Section I - Named Drivers S\$600, Section I - Unnamed Drivers S\$1100, Additional Excess for Young, Elderly & Inexperienced Drivers S\$3000, Windscreen Excess S\$100
Name of Finance Company:	MAYBANK SINGAPORE LTD
Name of Producer:	PRIME CARS CREDIT PTE LTD (A1410-2)

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:	Singapore NRIC
Owner ID:	546D

Vehicle Details

Vehicle No.:	SGB6383L
Vehicle to be Exported:	No
Intended Deregistration Date:	29 Oct 2021
Vehicle Make:	HONDA
Vehicle Model:	STEPWAGON 1.5G CVT
Primary Colour:	Silver
Manufacturing Year:	2015
Engine No.:	L15B3596542
Chassis No.:	RP11009161
Maximum Power Output:	110.0 kW (147 bhp)
Open Market Value:	\$24,023.00
Original Registration Date:	25 Apr 2017
First Registration Date:	25 Apr 2017
Transfer Count:	0
Actual ARF Paid:	\$25,633.00

Intended PARF Rebate Details

PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	24 Apr 2027
PARF Rebate Amount:	\$19,224.00

Intended COE Rebate Details

COE Expiry Date:	24 Apr 2027
COE Category:	E - Open Category
COE Period(Years):	10
QP Paid:	\$53,001.00
COE Rebate Amount:	\$29,090.00
Total Rebate Amount:	\$48,314.00

The information contained herein is correct as at 24 Sep 2021

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