



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	08/04/2022 14:43 (SGT)
Date of Accident	04/04/2022 17:25 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	River Valley Road
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBP3420T
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	Singaram Ramachandran
NRIC No	SXXXX403A
Email Address	singaramramachandran@gmail.com
Mobile Phone No	(Phone) +65-82764444
Alternative Phone No	+65-82764444

VEHICLE PARTICULARS

Manufacturer	Suzuki
Model	UH200A
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	Motorcycle
Transmission	Auto
CC	200

INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Type of Coverage	ThirdPartyFireTheft
Fleet Policy	No
Policy Number	P2431525
Cover Note Number	-

DRIVER

Name of Driver	Singaram Ramachandran
NRIC No	SXXXX403A



Date Of Birth	24/07/1968
Occupation	Outdoor
Date Of Driving Pass	14/06/2014
Driving experience	7 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-82764444
Alt. Phone Number	+65-82764444
Email Address	singaramramachandran@gmail.com
Address	Blk 13 Holland Drive #12-62
Address complement	-
Postcode	271013
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?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	1
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?	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 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	Refer to owner
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHB888A
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-

Vehicle Category	Taxi
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)	-


INJURED PERSONS DETAILS

INJURED 1

Name of injured person	Singaram Ramachandran
Gender	Male
Phone No	(Phone) +65-82764444
Address	Blk 13 Holland Drive #12-62
Address Complement	-
Post Code	271013
Approximate Age Years Old	-
Injuries Sustained	Both legs and right hand
Injured person in which vehicle?	FBP3420T
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	Yes

SKETCH PLAN**IMPORTANT NOTICE**

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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.


07/09/22 12:10

Policyholder's Signature / Date & Time

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



Witnessed by Reporting Centre Personnel

Sketch Plan



SINGAPORE POLICE FORCE



T/20220406/2078

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

1 of 3
Report No. T/20220406/2078

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 06/04/2022 16:53	Vide Report No.: E/20220404/0125	Station Diary No.: 38
Informant's Particulars		
Name of Informant: SINGARAM RAMACHANDRAN	Address: APT BLK 13 HOLLAND DRIVE #12-62 SINGAPORE 271013	
ID Type / ID No.: NRIC NO / S6883403A	Contact No.: Home/Office:	Mobile: 82764444
Nationality: SINGAPORE CITIZEN	Email:	
Sex: Male	Age: 53	Date of Birth: 24/07/1968
Type of Informant: Driver		
Race: Indian	Language: English	Institution / School Name:
Occupation: COURIER SERVICES	Driving Licence Information: Class: 2B	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 04/04/2022 17:45	Type of Location: T-Junction
Location: RIVER VALLEY ROAD				
Weather: Clear	Road Surface: Dry		Road Speed Limit:	
Traffic Flow: Two Way	Traffic Control: Not Controlled		Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBP3420T	Motorcycle	SUZUKI	UH200A	Grey	Seriously Damaged	1

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBP3420T	AXA INSURANCE SINGAPORE PTE LTD	P2431525	16/03/2022	15/03/2023



**SINGAPORE
POLICE FORCE**



T/20220406/2078

2 of 3

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

Report No. T/20220406/2078

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	SINGARAM RAMACHANDRAN	ID No.	S6883403A
Related Vehicle	FBP3420T (Motorcycle)	Contact No.	82764444
Hospital/Clinic	SINGAPORE GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B Date of Expiry: NIL
Date Treatment	04/04/2022	Date Discharge	NIL
No. of Days granted Medical Leave	05	Degree of Injury	Serious

Brief Details.

On 4/4/2022 at 5:45pm, I was riding my motorcycle along River Valley Road towards Delta Road, when I slowed down and was about to make a right turn into Leonie Hill Road when my motorcycle was hit from behind with a large force. I fell off my bike and skidded against the road surface while my bike was thrown further down. I sustained a laceration on my right elbow and also had abrasions on both legs and ankles. I was conveyed to SGH by the ambulance that attended my scene and received 5 days MC from 4/4/2022 to 8/4/2022. I do not know the details of the vehicle that hit me. Police attended my scene and the case number is E/20220404/0125.