

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	26/04/2022 17:02 (SGT)
Date of Accident	25/04/2022 19:05 (SGT)
Exact Location of Accident	Toh Guan Rd, Singapore
Additional Location Information	PIE TOWARDS TUAS(BEFORE TOH GUAN EXIT)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNB4988Y
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	KESAVANANDA KRISHNA CHITRADA
NRIC No	SXXXX716E
Email Address	MASTERMOVECHESS@GMAIL.COM
Mobile Phone No	(Phone) +65-98536552
Alternative Phone No	(Home) +65-98536552

VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	Avante
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	0

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5123817966
Cover Note Number	-

DRIVER

Name of Driver	KESAVANANDA KRISHNA CHITRADA
NRIC No	SXXXX716E

Date Of Birth	04/05/1976
Occupation	Indoor
Date Of Driving Pass	12/09/2014
Driving experience	7 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98536552
Alt. Phone Number	(Home) +65-98536552
Email Address	MASTERMOVECHESS@GMAIL.COM
Address	450 CORPORATION ROAD #02-08 SINGAPORE 649810
Address complement	-
Postcode	649810
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?	No
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	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED

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	-
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle

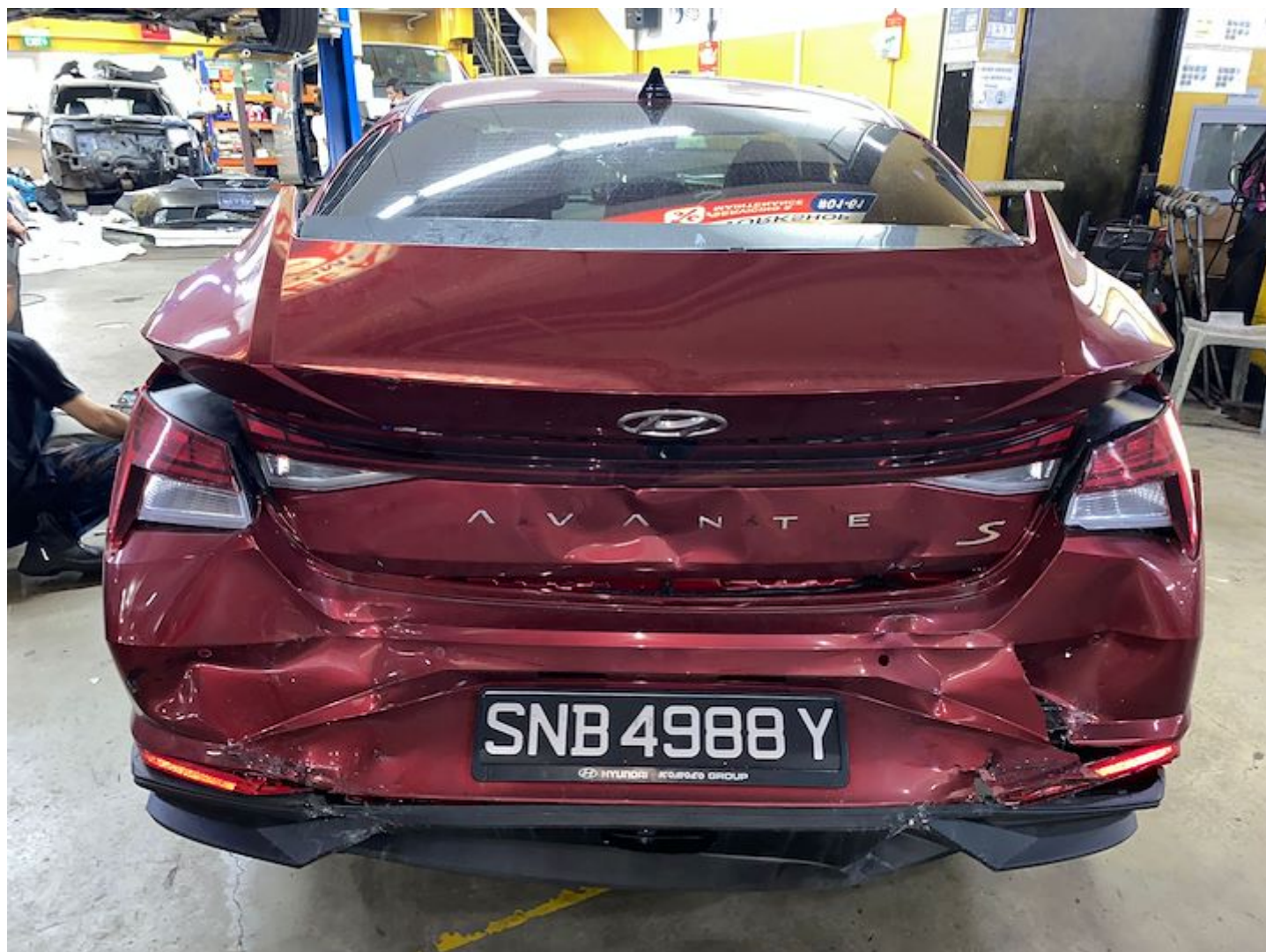
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	-
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	-
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	-























**SINGAPORE
POLICE FORCE**



T/20220426/7018

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20220426/7018

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SNB4988Y	NTUC Income Insurance Co-Operative Limited	5123817966	26/08/2021	25/08/2022

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	KESAVANANDA KRISHNA CHITRADA	ID No.	S7665716E
Related Vehicle	SNB4988Y (Car)	Contact No.	98536552
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 2B,3 Date of Expiry: NIL
Date	25/04/2022	Date	25/04/2022
No. of Days granted Medical Leave	04	Degree of	Slight

Brief Details.

I was traveling along PIE towards Tuas, while I'm coming near to Toh Guan Exit, the front vehicle slow down and stop, I followed, suddenly a Van (GBF6286Y) did not stop and collided into the rear of my car.

I feel pain at my Neck and body area after the accident, I visited Tayka Medical Family Clinic and was given 4 days MC.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000



T/20220426/7018

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Report No. T/20220426/7018

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
TAY CHUN KEEN
Contact No.: 65476436

NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
26/04/2022 13:42

Classification Of Case:



**SINGAPORE
POLICE FORCE**



T/20220426/7018

1 of 3

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20220426/7018

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/04/2022 13:42	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: KESAVANANDA KRISHNA CHITRADA			Address: 450 CORPORATION ROAD #02-08 SINGAPORE 649810		
ID Type / ID No.: NRIC NO / S7665716E			Contact No.: Home/Office: Mobile: 98536552		
Nationality: INDIAN			Email: MASTERMOVECHESS@GMAIL.COM		
Sex: Male	Age: 45	Date of Birth: 04/05/1976	Type of Informant: Driver		
Race: Indian			Language: English	Institution / School Name:	
Occupation: Chess Coach			Driving Licence Information: Class: 2B,3		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 25/04/2022 19:05	Type of Location: Straight Road
Location: PAN ISLAND EXPRESSWAY				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 90 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of
GBF6286Y	Van				Seriously Damaged	0
SNB4988Y	Car	HYUNDAI	CN7 AVANTE 1.6 DOHC CVT S	Red	Seriously Damaged	0