

 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	11/06/2022 16:10 (SGT)
Date of Accident	10/06/2022 19:10 (SGT)
Exact Location of Accident	North Bridge Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMK4503C
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INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	Sanjay Gattani
NRIC No	SXXXX108E
Email Address	gattani.sanjay@gmail.com
Mobile Phone No	(Phone) +65-91895884
Alternative Phone No	(Home) +65-91895884

VEHICLE PARTICULARS	
Manufacturer	BMW
Model	730i
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	1998

INSURANCE COMPANY	
Name of Insurance Company	Great Eastern General Insurance Limited
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	2021-V0111773-VAW
Cover Note Number	-

DRIVER	
Name of Driver	Sanjay Gattani
NRIC No	SXXXX108E

Date Of Birth

Occupation

Date Of Driving Pass

Driving experience

Gender

Mobile Number

Alt. Phone Number

Email Address

Address

Address complement

Postcode

Is the driver the policyholder?

If No, Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

Vehicle Registration Number of Other Vehicle Owned by Driver

Insurance Company of Other Vehicle Owned by Driver

30/08/1973

Indoor

26/07/2008

13 YEARS AND 11 MONTHS

Male

(Phone) +65-91895884

(Home) +65-91895884

gattani.sanjay@gmail.com

3 Siglap Road #06-27 Mandarin Gardens

-

448907

Yes

-

No

-

-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident

Weather Conditions

Road Surface

Side Swipe

Clear

Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?

Number of vehicles involved in the accident

Was anybody injured in the Accident?

Was any injured conveyed to hospital by ambulance?

Was any other vehicle or property damaged?

Number of Passengers (Including Driver)

Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?

No

2

No

-

Yes

2

No

PASSENGER 1

Name

Gender

unknown

Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?

Was notice of intended Prosecution given?

If yes, against whom?

No

No

-

CIRCUMSTANCES OF ACCIDENT

refer attached report.

ATTACHMENT(S)

Are accident photos available for attachment?

Was there any video captured by Car Camera?

Was there any audio recorded?

Yes

No

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model

Vehicle Variant

Vehicle Colour

Vehicle Category

SLP7036A

Nissan

-

-

-

Private car

SKETCH PLAN

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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.

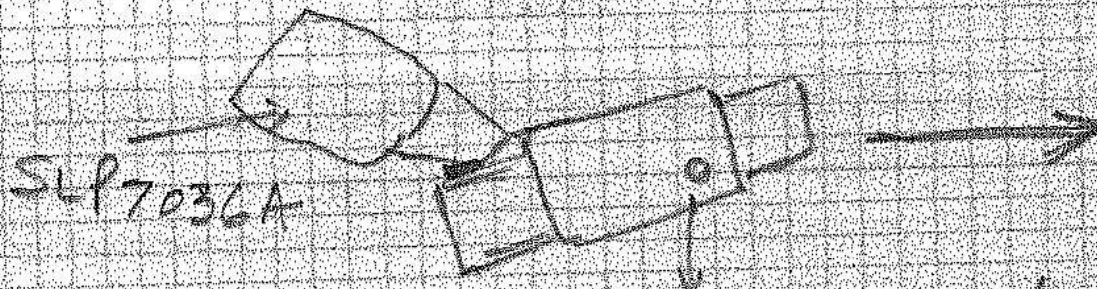
Sanjay Gattam

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



SMR4503E (My vehicle was stationary when it was hit by her car)

Describe Circumstances of the Accident

I was driving along the North Bridge Road. The road was congested and there was quite a bit of traffic on the road.

The speed of my vehicle was very slow. I indicated to move to the left lane very slowly. Suddenly the car no SLP7036A hit my car from the rear side.

We noticed that the car took a right without noticing my car.

Declaration

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

Sanjay Gattani

Policyholder's Signature / Date & Time

11/06/22
11:20 PM

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

Witnessed by Reporting Centre Personnel

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