SP0U226U0002 / PROGRESSIVE CAR CARE PTE LTD ENTRY DATE & TIME: 30/06/2022 12:37 (SGT) SUBMITTED BY: Liang Siew Chin VERSION: 1 (30/06/2022 12:37 (SGT))

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 witholding 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 30/06/2022 12:37 (SGT) Reported by Date of Accident 28/06/2022 17:25 (SGT) Exact Location of Accident PIE, Singapore Additional Location Information PIE SINGAPORE Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKU2231X

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner JITENDER KHURANA Passport No/FIN GXXXX017K Email Address JITENDER.KHURANA@GMAIL.COM Mobile Phone No (Phone) +65-98636084 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Toyota Model Harrier Variant TOYOTA / HARRIER PREMIUM 2.0 A 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 No - Claiming third party your vehicle? Vehicle Category Private car Transmission Auto CC 1986

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd Policy Number / Cover Note Number GA416342

DRIVER

Name of Driver JITENDER KHURANA Passport No/FIN GXXXX017K Date Of Birth 07/12/1975 Occupation Indoor

Date Of Driving Pass	08/03/2014
Driving experience	8 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98636084
Alt. Phone Number	-
Email Address	JITENDER.KHURANA@GMAIL.COM
Address	760 BEDOK RESERVOIR ROAD #03-04
Address complement	-
Postcode	479245
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	Callinian Handto Book
Weather Conditions	Collision - Head to Rear
Road Surface	Clear
Nodu Suridce	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)	1
Has the driver been approached by unknown person(s)	'
soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	<u>-</u>
Translator's email	-
Original language used in the statement	-
DETAILS OF POLICE ACTION	
Was the assistant remarked to the malice?	v.
Was the accident reported to the police?	Yes
Police Station Name	Marine Parade Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004428999
Alt. Police Station Phone No	(Fax) +65-62447678
Police Station Address	300 Marine Parade Road Singapore 449296
Was notice of intended Prosecution given?	No
If yes, against whom?	-
CIRCUMSTANCES OF ACCIDENT	
REFER TO ATTACHED STATEMENT RECORDED BY ANNIE - PROGRESSIVE CAR CA TEL 67415336	ARE PTE LTD
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera? Reasons for not uploading a video of the accident	Yes Yes WITH TP

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number QX761J

Valeiala Manufeatuuru	
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	
	-
Vehicle Colour	-
Vehicle Category	Government
Name of Driver	<u>-</u>
Contact Number	-
Address	
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	
3	
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	
140. Of Fasseriger (melading briver)	-

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Form must be completed by the Policyholder and/or the Actual Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 Traffic Police Department for investigation.
- This report will be forwarded by the insurers to 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.
- 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")

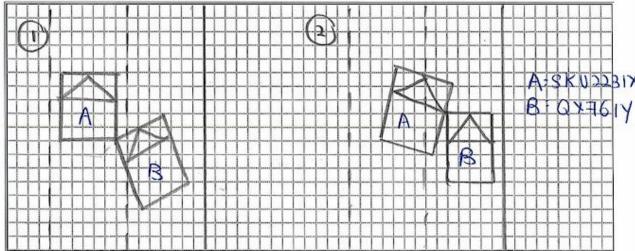
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the 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.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

Sketch Plan



Accident report SP0U226U0002

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		2 - 11	1211111111		
REF	ER 10	POLICE	REPORT	1	
■ Refressible	CONTRACTOR OF THE PARTY OF THE	10 11 11 10 1000	Washington Bridge and		
	1			174	
claration	-	**			
e declare the foregoing p	árticulars are true in e	wery respect.			
1					
VI TONE					
MIND					

2





Police Station Of Origin; Marine Parade N.P.C 300 Marine Parade Road SINGAPORE 449296

Tel No: 1800-4428999

1 of 3 Report No. T/20220629/2131

REPORT OF A TRAFFIC ACCIDENT

	ne Report N 022 19:45	Made:	Vide Report No.: E/20220628/0130	Station Diary No.; 58
Informa	nt's Partic	ulars	A A STATE OF	and the second s
	f Informant: ER KHURA		Address: 760 BEDOK RESERV	OIR ROAD #03-04 SINGAPORE 479245
	/ ID No.: / G5384017	7K	Contact No.: Home/Office:	Mobile: 98636084
National INDIAN	ity:		Email: jitender.khurana@gma	
Sex: Male	Age: 46	Date of Birth: 07/12/1975	Type of Informant: Driver	
Race: Indian			Language:	Institution / School Name:
Occupat Chief op Manage	erating office	cer/General	Driving Licence Inform Class: 3	nation: Date of Expiry:

Type of Accident:	Non-Injury Government Vehicle	Drink Drive: No	Date/Time of Accident: 28/06/2022 17:25	Type of Location Straight Road
	EXPRESSWAY	(8)2		
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control:	112	Traffic Volume: Light
Type of Collis Between Mov	ion: ing Vehicles - Head To R	ear		Anyone conveyed by ambulance:

Details of V	ehicle Invo	lved			HOUSE STANSFER	MACHE STATE
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
QX761J						0
SKU2231X	Car	ТОУОТА	HARRIER PREMIUM 2.0 A	Black	Se	0

Details of V	ehicle Insurance	PROBLEM STATE OF THE PARTY OF T		
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date





Police Station Of Origin: Marine Parade N.P.C 300 Marine Parade Road SINGAPORE 449296

2 of 3 Report No. T/20220629/2131

CONTINUATION OF REPORT Tel No: 1800-4428999

Details of V	ehicle Insurance			
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKU2231X	AXA INSURANCE SINGAPORE PTE LTD	GA416342	09/01/2022	08/01/2023

Details of Perso	n Involved			23000	EL SER	
Any Pedestrian In	nvolved: No					
No. of Pedestrian	s Injured: NIL		Use of Pe	destrian	Cross	ing: NA
Driver						
Name	JITENDER KHURA	NA		ID No		G5384017K
Related Vehicle	NIL			Conta	ct No.	98636084
Hospital/Clinic	NIL			Class Drivin Licens Expiry	g	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Disc		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of	f Injury	NIL	

Brief Details.

Brief Details. ፲ ትረናክሜ On 28/06/2022 at about 1825hrs, I was driving my car bearing plate number SKU2231X on the PIE Expressway near to exit 16A. I noticed a police car bearing the plate number QX761J from my rear view mirror getting near to my car with speed. The police car hit my rear right side of my car and there was a second hit on the front right side of my car. Subsequently, both our cars went opposite ways and my car came to a stop in between lane 3 and lane 4. I then came out of my car and the police officers came over from their vehicle to ask if I am okay. I also asked the female officer what had happened and she informed that the driver lost control of the car. After which, LTA officers, Traffic Police officers and the Ambulance arrived at scene.

I wish to state that I did not suffer any injuries. My car suffered scratches on the rear right side of the vehicle and scratches on the front right side of the vehicle with the top of the right side wheel part of the car slightly bent in.

I was advised by the Traffic Police officer to lodge a report.

I wish to further inform that I am currently residing at 7 Siglap Road #11-58 Singapore 448909.





Police Station Of Origin; Marine Parade N.P.C 300 Marine Parade Road SINGAPORE 449296 Tel No: 1800-4428999

3 of 3 Report No. T/20220629/2131

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 <u>report number</u> as reference.

Date/Time:
29/06/2022 19:45
Classification Of Case: