# **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 Actual 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.

- 4. The issue and acceptance 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 27/10/2022 11:51 (SGT) Reported by Both Date of Accident 26/10/2022 18:10 (SGT) Exact Location of Accident Near 261 Jurong East St 24, Singapore 600261 Additional Location Information PIE TOWARDS TUAS BEFORE BUKIT BATOK RD EXIT Country/State of Loss Singapore

## **DETAILS OF OWN VEHICLE**

Nissan

Vehicle Registration Number **SLV5094M** 

#### INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner MEGHA JASM NRIC No SXXXX024A Email Address MEGHAJASM@GMAIL.COM Mobile Phone No (Phone) +65-98367906 Alternative Phone No

#### VEHICLE PARTICULARS

Manufacturer

Model Sylphy 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 No - Claiming third party your vehicle? Vehicle Category Private car Transmission Auto CC 1598

#### **INSURANCE COMPANY**

Name of Insurance Company Direct Asia Insurance (Singapore) Pte Ltd Policy Number / Cover Note Number MT/00567785/03

#### DRIVER

Name of Driver MEGHA JASM NRIC No SXXXX024A Date Of Birth 12/02/1984 Occupation Indoor

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address 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	31/10/2014 8 YEARS Female (Phone) +65-98367906 - MEGHAJASM@GMAIL.COM BLK 52 BUKIT BATOK STREET 31 #28-07 659443 Yes - No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface  OTHER INFORMATION	Side Swipe Clear Dry
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?  Translator's name  Translator's ID  Translator's phone number  Translator's email  Original language used in the statement	-
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Police Station Name Police Station Phone No Alt. Police Station Phone No Police Station Address Was notice of intended Prosecution given? If yes, against whom?  CIRCUMSTANCES OF ACCIDENT	Yes Hong Kah North Neighbourhood Police Post (Phone) +65-18005679999 (Fax) +65-65652508 Blk 370 Bukit Batok Street 31 #01-201 Singapore 650370 No
REFER TO SKETCH PLAN	
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 FILES TOO LARGE
DETAILS OF OTHER	VEHICLE PROPERTY 1

YQ7103E

## Accident report SW0E22AR0004

Vehicle Model

Vehicle Registration Number
Vehicle Manufacturer

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)	-
110. Of Fusioning Differ	-

#### SKETCH PLAN

#### 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 Actual 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 Traffic Police Department for investigation.

- 6. 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.
- 7. By the ladgement 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
- (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

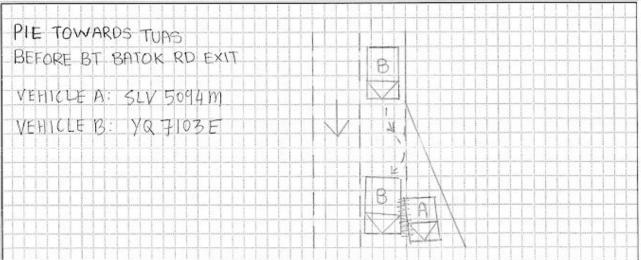
Policyholder's Signature Date & Time

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

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

EDROS

Sketch Plan



Accident report SW0E22AR0004

scribe Circumstance of the Accident					
EFER	70	POLICE	REPORT	DATED	26/10/2022
	7	/2022 103	26/2108		
			,		
		6			
	,				

## Declaration

I/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



(Name as in NRICAD card)







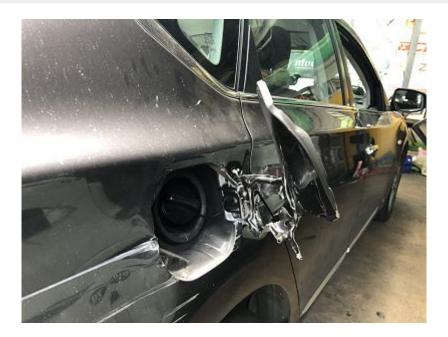


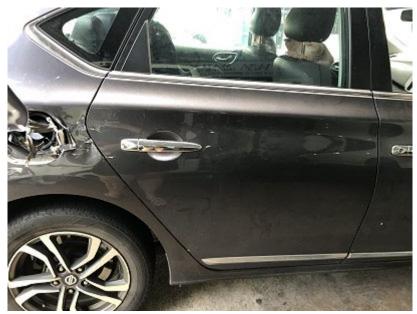


















Police Station Of Origin: Hong Kah North NPP 370 Bukit Batok Street 31 #01-201 SINGAPORE 650370 Tel No: 1800-5679999

1 of 4 Report No. T/20221026/2108

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/10/2022 19:18		Vide Report No.:	Station Diary No.: 73		
Informan	t's Particu	ulars			
Name of I MEGHA	nformant: JASM		Address: BLK 52 BUKIT BATOK S 659443	TREET 31 #28-07 SINGAPORE	
ID Type / ID No.: NRIC NO / S8463024A			Contact No.: Home/Office: Mobile: 98367906		
Nationalit INDIAN	y:		Email:		
Sex: Female	Age: 38	Date of Birth: 12/02/1984	Type of Informant: Driver		
Race: Indian		Language:	Institution / School Name:		
Occupation:		Driving Licence Information:  Class: Date of Expiry:			

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 26/10/2022 06:10	Type of Location: Bend	
Location: PAN-ISLAND Weather: Clear	EXPRESSWAY	Road Surface: Dry		Road Speed Limit:	
Traffic Flow:		Traffic Control:		Traffic Volume:	
Two Way		Not Controlled		Heavy	
Type of Collision:				Anyone conveyed by	
Between Moving Vehicles - Side Swipe - Same Direction				ambulance:	

Vehicle No.	Type	Make	Model .	Color	Condition	No of Passenge
SLV5094M	Car	NISSAN	SYLPHY 1.6 CVT	The state of the s	Seriously Damaged	0
YQ7103E	Lorry				No Damage	7

Details of V	ehicle Insurance			
Vehide No.	Insurance Company	Insurance No	Effective	Expiry Date
SLV5094M	DIRECT ASIA INSURANCE (SINGAPORE) PTE. LTD.	MT/00567785/03	29/12/2018	28/12/2022



T/20221028/2108

Police Station Of Origin: Hong Kah North NPP 370 Bukit Batok Street 31 #01-201 SINGAPORE 650370 Tel No: 1800-5679999 2 of 4 Report No. T/20221026/2108

#### CONTINUATION OF REPORT

Details of Perso	n Involved					
Any Pedestrian Ir	rvolved; No					
No. of Pedestrian	s Injured: NIL		Use of Ped	destrian	Cross	ing: NA
Driver						
Name	MEGHA JASM			ID No.		S8463024A
Related Vehicle	SLV5094M (Car)			Contact No.		98367906
Hospital/Clinic	NIL.			Class Driving Licent Expiry	g ce &	Class: 3 Date of Expiry: NIL
Date Treatment	NIL Dat			harge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of	f Injury	NIL	
Driver						
Name	VEERAMUTHU PRABAKARAN		٧	ID No		G8308028R
Related Vehicle	YQ7103E (Lorry)			Conta	ct No.	86984007
Hospital/Clinic	NIL			Class Drivin Licens Expin	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Disc	charge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree o	f Injury	NIL	

#### Brief Details.

On the above-mentioned date and time, I was driving my vehicle SLV5094M along the Pan Island Expressway, exiting towards Bukit Batok. Traffic was heavy at that time. While exiting, the vehicles Infront of me suddenly jammed break which caused the vehicles behind do the same as well. I did the same and did not hit the vehicle in front of me. I checked my mirror, and saw that the lorry behind me, YQ7103E, had swerved to the right lane, which caused him to side swiped my car. Subsequently, I switched on my blinkers and stopped my vehicle on the left to check for damages. The lorry did the same and stopped in front of me.

I made a check to my car and observed the following damages. There were three long scratches from the front right to the rear right side of my vehicle, with dents. The right-side mirror cover, fuel door and right rear turn signal light cover was badly damaged as well. There were no visible damages to the lorry. No parties were injured. Traffic police did not attend to my incident. EMAS tow truck was there to take pictures of the incident.

I am lodging this for record purposes and for insurance claims.



Police Station Of Origin: Hong Kah North NPP 370 Bukit Batok Street 31 #01-201 SINGAPORE 650370 Tel No: 1800-5679999



3 of 4 Report No. T/20221026/2108

CONTINUATION OF REPORT





Police Station Of Origin: Hong Kah North NPP 370 Bukit Batok Street 31 #01-201 SINGAPORE 650370 Tel No: 1800-5679999 4 of 4 Report No. T/20221026/2108

#### 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 **report number** as reference.

Signature of Officer Recording The Report: J / SGT 2 LIM ZHI QI, SARAH	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 26/10/2022 19:18
Officer In Charge Of Case: TP / GIA / SR STAFF SGT FAHKRUL RAZI BIN SUHAIME Contact No.: 65470000	Classification Of Case;
NP168	



Contact us at

Hotline: (65) 6665 5555

E-mail: customerservice@directasia.com

#### CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) (Singapore) (the "Act") Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 (Singapore) Road Transport Act, 1987 (Malaysia) Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

Certificate No. MT/00567785/03

Type of Coverage / Driver Plan Low Mileage Car Comprehensive (Value Plus Plan)

1) Vehicle Registration No. SLV5094M

Chassis No. MNTBBAB17Z0030395

2) Name of Policy Holder Megha Jasm

3) Effective Date / Time of Commencement

29/12/2021 00:00 of Insurance for the Purpose of the Act

4) Date/Time of Expiry of Insurance 28/12/2022 23:59

5) Persons or Classes of Persons Entitled to Drive

(a) Any named person under the policy who is driving on the Policyholder's permission.

(b) Any authorised person, provided such person is aged 30 and above and holds a valid driving licence of 2 years or more, who is driving on the Policyholder's permission

The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.

6) Limitations as to use

Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business. Private car-pooling arrangements where you commute with passengers and split the fuel expense is covered under the standard policy. Grab Hitch will only be covered if this is the declared usage stated on your Policy Schedule. Only two rides are permitted a day. Other forms of commercial car-pooling or any ride hailing services (e.g. Grab, Go-Jek etc.) are not

\*Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.

Sum Insured Market Value

Own Damage Excess S\$ 500.00 S\$ 100.00 Windscreen Excess Low Mileage Excess \$\$ 5,000.00

(If you exceed permitted allowance of 8,000KM per year)

DirectAsia approved workshops Choice of workshop

Finance company / Hire Purchase

Main driver Megha Jasm Named driver None

Important Note: This policy does not cover the Policyholder/drivers below the age of 30 and Policyholder/drivers who hold a valid driving licence of less than 2 years with the exception of the main/named drivers above.

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 Com pensation) Act (Chapter 189) and the Road Transport Act, 1987 (Malaysia).

29/11/2021

Direct Asia Insurance (Singapore) Pte. Ltd.

Issued on:

Direct Asia Insurance (Singapore) Pte Ltd 20 Anson Road #08-01 Twenty Anson Singapore 079912 www.DirectAsia.com