

# 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 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 .....	31/10/2022 17:12 (SGT)
Reported by .....	Both
Date of Accident .....	28/10/2022 19:50 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	PIE
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SMS9133L
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### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	THALVINDERPAL SINGH SANDHU
NRIC No .....	S8743573C
Email Address .....	rachael.nonis@gmail.com
Mobile Phone No .....	(Phone) +65-90709985
Alternative Phone No .....	-

### VEHICLE PARTICULARS

Manufacturer .....	BMW
Model .....	X1
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 .....	1500

### INSURANCE COMPANY

Name of Insurance Company .....	Income Insurance Limited
Policy Number / Cover Note Number .....	5118239610-02

### DRIVER

Name of Driver .....	RACHAEL NICOLE LEAH NONIS
NRIC No .....	S9026234C
Date Of Birth .....	24/07/1990
Occupation .....	Indoor

Date Of Driving Pass .....	17/04/2013
Driving experience .....	9 YEARS AND 6 MONTHS
Gender .....	Female
Mobile Number .....	(Phone) +65-98577699
Alt. Phone Number .....	-
Email Address .....	rachael.nonis@gmail.com
Address .....	BLK 263 TOA PAYOH EAST #14-18
Address complement .....	-
Postcode .....	310263
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Spouse
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) .....	2
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 .....	-
Translator's email .....	-
Original language used in the statement .....	-

#### PASSENGER 1

Name .....	SPOUSE
Gender .....	Male

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Bedok Division Headquarters
Police Station Phone No .....	(Phone) +65-18002440000
Alt. Police Station Phone No .....	(Fax) +65-64443009
Police Station Address .....	30 Bedok North Road Singapore 469676
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

REFER TO THE ATTACHED POLICE REPORT.

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	GW2273L
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle
Name of Driver .....	RENGASAMY MANIKANDAN
Passport No/FIN .....	G2052776K
Contact Number .....	(Phone) +65-87422433
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	1

## INJURED PERSONS DETAILS

### INJURED 1

Name of injured person .....	THALVINDERPAL SINGH SANDHU
Gender .....	Male
Phone No .....	(Phone) +65-90709985
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	-
Injured person in which vehicle? .....	SMS9133L
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No

### INJURED 2

Name of injured person .....	RACHAEL NICOLE LEAH NONIS
Gender .....	Female
Phone No .....	(Phone) +65-98577699
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	-
Injured person in which vehicle? .....	SMS9133L
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No

**SKETCH PLAN**

**IMPORTANT NOTICE**

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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:

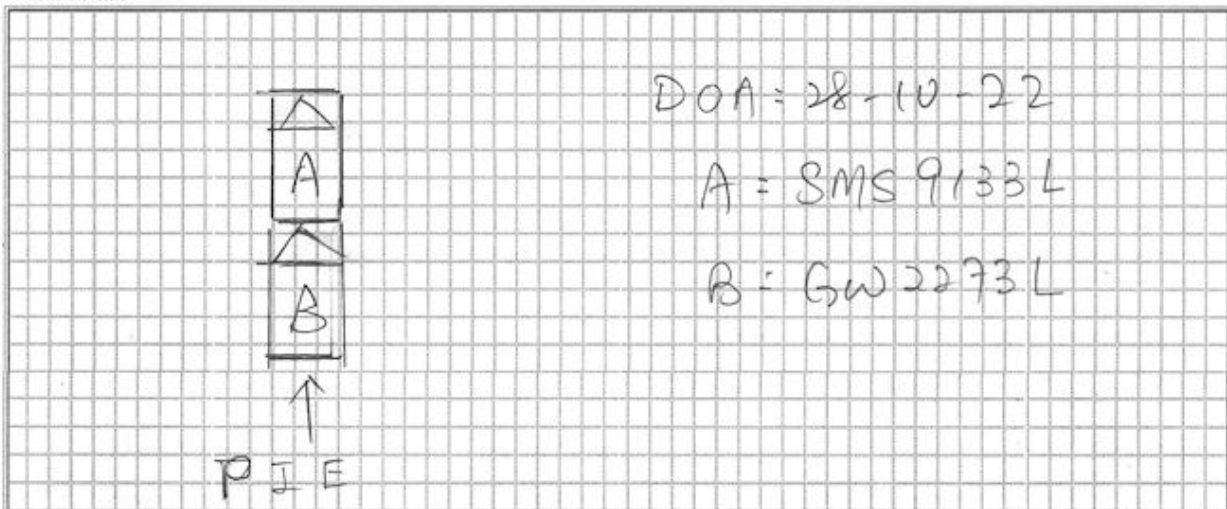
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.

 31/10/22  
Policyholder's Signature / Date & Time

 31/10/22  
Driver's Signature (if driver is not the policyholder) / Date & Time

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

**Sketch Plan**



DOA = 28-10-22

A = SMS 9133 L

B = GW 2273 L

↑

P I E

Describe Circumstance of the Accident

Refer to the attached Police Report.

Declaration

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



31/10/22

Policyholder's Signature / Date & Time



31/10/22

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



Foong Sau Wah

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



















































**SINGAPORE  
POLICE FORCE**



G/20221029/7057

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POLICE REPORT (NP299)

Report No. G/20221029/7057

Police Station Of Origin  
Bedok Division HQ  
30 Bedok North Road SINGAPORE 469676  
Tel No:1800-2440000

Date/Time Report Made 29/10/2022 17:50	Vide Report No.			Station Diary No.
Name Of Informant RACHAEL NICOLE LEAH NONIS	Address 263 TOA PAYOH EAST #14-18 SINGAPORE 310263			
ID Type / ID No. NRIC NO / S9026234C	Contact No. Home/Office:                      Mobile: 98577699			
Nationality SINGAPORE CITIZEN	Email Address rachael.nonis@gmail.com			
Occupation Other teaching professional	Sex Female	Age 32	Date of Birth 24/07/1990	Race Eurasian
Institution/School Name	Language English			
Date/Time Of Incident 28/10/2022 19:50	Location Of Incident 8 KALLANG SECTOR INFINEON SINGAPORE 349282			

**Brief details.**

I was driving a BMW X1 (SMS9133L) on the PIE, heading towards Sims Avenue. There was heavy, slow moving traffic leading from the PIE to the Sims Avenue ramp. We were part of the queue. As I came to a halt together with the queue of cars, I glanced into my mirror and saw a fast moving van (GW2273L) coming behind me and jam braking at the last moment. He rear ended my car. My husband was in the car with me. We both lurched forward and our heads snapped back.

I called the police immediately and they sent the traffic police down. We took pictures of the incident and exchanged particulars with the driver of the other car. Traffic police came about fifteen minutes later.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 29/10/2022 17:50
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE  
POLICE FORCE**



G/20221029/7057

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20221029/7057

They recorded down the incident.

After that, we visited the A&E due to the impact and pain. We got a 3 day MC.

<b>Subjects Involved</b>			
<b>Suspect</b>			
Person Name	Rengasamy Manikandan		
ID Type	FIN NO	ID No	G2052776K
Gender	Male	Age	30-40
Complexion	Dark tan	Build	Slim
Height About	180cm	Attire Last Worn	Pants and collar shirt
Hair Colour	Black	Hair Style	Short-Straight
<b>Victim</b>			
Person Name	RACHAEL NICOLE LEAH NONIS		
ID Type	NRIC NO	ID No	S9026234C
Gender	Female	Age	32
Race	Eurasian	Language	English
Occupation	Other teaching professional	Address	263 TOA PAYOH EAST #14-18 SINGAPORE 310263
Mobile No	98577699	Is Informant A Victim?	Yes
<b>Person Name</b> Thalvinderpal Singh Sandhu			
ID Type	NRIC NO	ID No	S8743573C
Gender	Male	Age	34

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 29/10/2022 17:50
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE  
POLICE FORCE**



G/20221029/7057

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20221029/7057

Race	Punjabi	Language	English
Occupation	ICT business process consultant/business analyst	Address	263 Toa Payoh East #14-18 SINGAPORE 310263
Mobile No	90709985	Relation To Informant	Husband
Person Name	RACHAEL NICOLE LEAH NONIS (Informant)		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 29/10/2022 17:50
Officer In-Charge Of Case:	Classification Of Case: