

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 03/11/2022 18:40 (SGT)
Reported by Both
Date of Accident 02/11/2022 15:10 (SGT)
Exact Location of Accident Tuas South Ave 3, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMD5424C

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner JAGANNADHA RAO KONATHALA SUBRAMANYA
NRIC No S2659240B
Email Address JAGANRKS1@GMAIL.COM
Mobile Phone No (Phone) +65-90618854
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Honda
Model Civic
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 1597

INSURANCE COMPANY

Name of Insurance Company Direct Asia Insurance (Singapore) Pte Ltd
Policy Number / Cover Note Number MT/00946397/01

DRIVER

Name of Driver JAGANNADHA RAO KONATHALA SUBRAMANYA
NRIC No S2659240B
Date Of Birth 13/05/1965
Occupation Indoor

Date Of Driving Pass	23/09/1992
Driving experience	30 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90618854
Alt. Phone Number	-
Email Address	JAGANRKS1@GMAIL.COM
Address	11 DAIRY FARM HEIGHTS #04-26
Address complement	-
Postcode	-
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 - Change/cross lane
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?	Yes
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	-
Translator's email	-
Original language used in the statement	-

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Jurong Division Headquarters
Police Station Phone No	(Phone) +65-18007910000
Alt. Police Station Phone No	(Fax) +65-68965647
Police Station Address	No. 2 Jurong West Avenue 5 Singapore 649482
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER POLICE REPORT J/20221103/7015.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	SD CARD WITH TP.

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	XE3978Z
Vehicle Manufacturer	-
Vehicle Model	-

Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Goods 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	JAGANNADHA RAO KONATHALA SUBRAMANYA
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?	-

B-XE3970Z.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO POLICE REPORT

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:

Reporting Centre Personnel's Signature _____

Name:

NRIC/FIN No.:

SKETCH PLAN

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7. By the lodgment 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 my 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all Insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated; or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SA1M22B30002



**SINGAPORE
POLICE FORCE**



J/20221103/7015

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POLICE REPORT (NP299)

Report No. J/20221103/7015

Police Station Of Origin
Jurong Division HQ
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No:1800-7910000

Date/Time Report Made 03/11/2022 10:08	Video Report No.	Station Diary No.
Name Of Informant JAGANNADHA RAO KONATHALA SUBRAMANYA	Address 11 DAIRY FARM HEIGHTS #04-26 SINGAPORE 677661	
ID Type / ID No. NRIC NO / S2659240B	Contact No. Home/Office:	Mobile: 90618854
Nationality SINGAPORE CITIZEN	Email Address JAGANRKS1@GMAIL.COM	
Occupation Quality control/assurance manager	Sex Male	Age 57
Institution/School Name	Date of Birth 13/05/1965	Race Indian
Date/Time Of Incident 02/11/2022 15:10 - 02/11/2022 21:30	Location Of Incident 11 DAIRY FARM HEIGHTS #04-26 SINGAPORE 677661	

Brief details.

While going to attend the meeting out side I am driving my car from office at 51, Tuas south street 5, Singapore 637644 to wards town. Around 3.15pm I am driving on the Lane at Tuas south avenue 3 after the traffic light (Tuas vista) nearing Tuas Viaduct there was Lorry 3XE3978Z(Driver: NALLAN JEEVANANDAM, Visit Pass FIN NO. G7168177M) coming from lane 2 and want to enter in to lane 3 and suddenly hitting driver side and drag me 500meter and during this time I was driving around 30KM/h and try to control my steering but very difficult since the lorry driver dragging and finally I have managed stopped my car. during the hitting driver side the car was damaged badly on the bumper and side rear

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: 03/11/2022 10:08
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE
POLICE FORCE**



J/20221103/7015

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20221103/7015

door and driver seat door was jammed. during this incident I was went through trauma and in shock and really do not know what was happened. after getting down talk to lorry driver and exchanged the IC particular's and after some time traffic police arriving the scene. the traffic police arrange ambulance for me to go for medical check-up. finally ambulance arrived and bring me Ng Thong Fong A & E and arrived 4.24pm and started their treatment and end up 10.07pm. Doctor has issued Summary report and issued MC for 5days until 6th November, 2022. Please investigate on this accident and issue the report asap to enable for me to proceed with my insurance claim procedures.

Subjects Involved			
Victim			
Person Name	JAGANNADHA RAO KONATHALA SUBRAMANYA		
ID Type	NRIC NO	ID No	S2659240B
Gender	Male	Age	57
Race	Indian	Language	English
Occupation	Quality control/assurance manager	Address	11 DAIRY FARM HEIGHTS #04-26 SINGAPORE 677661
Mobile No	90618854	Is Informant A Victim?	Yes
Person Name	JAGANNADHA RAO KONATHALA SUBRAMANYA (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: 03/11/2022 10:08
Officer In-Charge Of Case:	Classification Of Case: