# **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 this is form by instrained 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 04/01/2023 11:53 (SGT) Reported by Date of Accident 03/01/2023 17:00 (SGT) Exact Location of Accident Singapore Additional Location Information US EMBASSY PARKING LOT Country/State of Loss Singapore

#### **DETAILS OF OWN VEHICLE**

Volkswagen

1395

Vehicle Registration Number SDZ8189C

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner YAFARIDAH BINTE MOHD NRIC No SXXXX384C Email Address jmartauto@gmail.com Mobile Phone No (Phone) +65-91314524 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model Tiguan 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

**INSURANCE COMPANY** 

Name of Insurance Company MSIG Insurance (Singapore) Pte. Ltd. Policy Number / Cover Note Number A 300337330 QMY

DRIVER

CC

Name of Driver NUR NADYAH BINTE PERWRIE NRIC No SXXXX158G Date Of Birth 08/09/1997 Occupation Indoor

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email 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	12/01/2016 7 YEARS Female (Phone) +65-91314524 - jmartauto@gmail.com APT BLK 152 JALAN TECK WHYE # 01-15 680152 No Child 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?  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?	Yes Jurong Division Headquarters (Phone) +65-18007910000 (Fax) +65-68965647 No. 2 Jurong West Avenue 5 Singapore 649482 No
CIRCUMSTANCES OF ACCIDENT	
PLEASE REFER TO THE ATTACHED POLICE REPORT-J/20230	0103/7057
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	WITH WORKSHOP
DETAILS OF OTHER	VEHICLE PROPERTY 1

GBB4611B

## Accident report SL0Z23140001

Vehicle Model

Vehicle Registration Number

Vehicle Manufacturer

-
Commercial vehicle
GURUSAMY THIAGARAJA
SXXXX660A
-
-
-
-
-
-
-
-

### INJURED PERSONS DETAILS

#### INJURED 1

Name of injured person Gender Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle? Were seat belts worn?	NUR NADYAH BINTE PERWRIE Female (Phone) +65-91314524 APT BLK 152 JALAN TECK WHYE # 01-15 680152 - HEADACHE AND BACK PAIN SDZ8189C
Was this injured conveyed to hospital by ambulance?	- No

#### SKETCH PLAN

#### IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 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 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.

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	B GBB 46118
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claration declare the foregoing particulars	are true in every respect.	
A		٨
cyholder's Signature / Date & Time	Driver's Signature (If driver is not the	grund 04/01/2023
	Driver's Signature (if driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)





1 of 2

Report No. J/20230103/7057

#### POLICE REPORT (NP299)

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

Vide Rep	ort No.		Station Diary No
Address			
152 JALAN TECK WHYE #01-15 SINGAPORE 680152			
1 1 2 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	1500000	Mobile: 91314524	
Email Address NADYAHP@HOTMAIL.COM			
Sex	Age	Date of Birth	Race
Female	25	08/09/1997	Eurasian
Language English			
Location Of Incident 152 JALAN TECK WHYE #01-15 SINGAPORE 680152			
	Address 152 JALA Contact N Home/Off Email Add NADYAH Sex Female Language English Location	152 JALAN TECK V Contact No. Home/Office:  Email Address NADYAHP@HOTM Sex Age Female 25 Language English Location Of Inciden	Address 152 JALAN TECK WHYE #01-15 SIN Contact No. Home/Office: Mobile: 91314524 Email Address NADYAHP@HOTMAIL.COM Sex Age Date of Birth Female 25 08/09/1997 Language English Location Of Incident

Brief details.

My vehicle was hit by a brinks company vehicle driver while it was stationary in US Embassy Parking lot. The driver of the vehicle apologized for hitting my vehicle.

Subjects Involve	d		
Suspect	A Control of the Control of the Control	<b>"在本种特殊的"。</b>	AND THE RESERVE OF THE PROPERTY OF THE PARTY
Person Name	GURUSAMY THIAGA	ARAJA	
ID Type	NRIC NO	ID No	S0167660A
Gender	Male	Age	71-72

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: 03/01/2023 18:10
Officer In-Charge Of Case:	Classification Of Case:



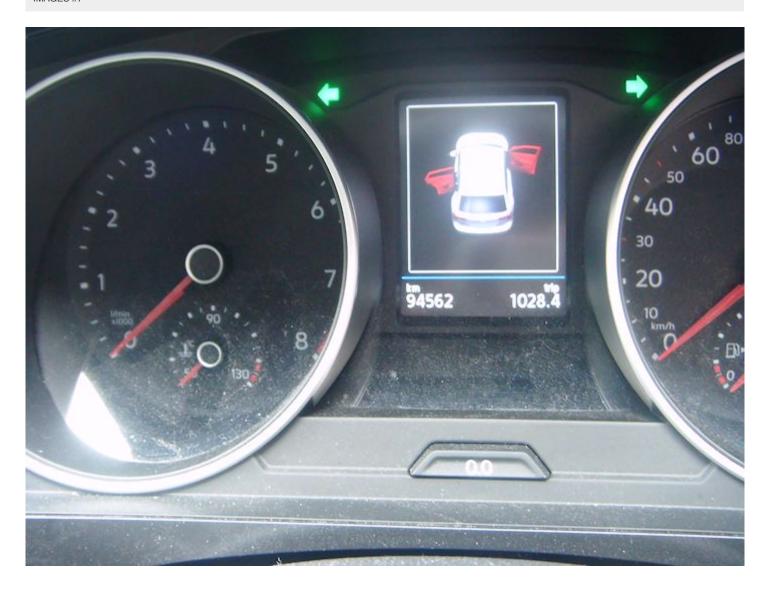


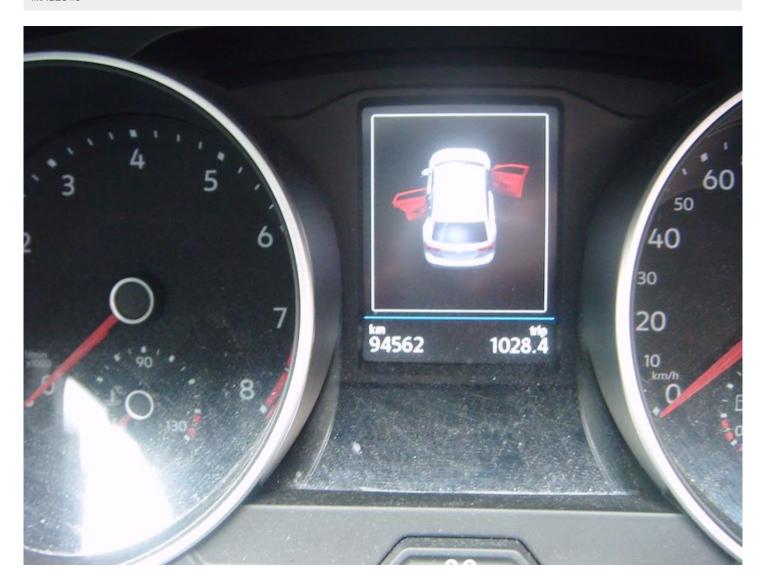




















1 of 2

Report No. J/20230103/7057

#### POLICE REPORT (NP299)

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

Date/Time Report Made	Vide Rep	ort No.		Station Diary No
03/01/2023 18:10				
Name Of Informant	Address			
NUR NADYAH BINTE PERWRIE	152 JALAN TECK WHYE #01-15 SINGAPORE 680152			
ID Type / ID No.	Contact No.			
NRIC NO / S9731158G	Home/Office: Mobile:			
	91314524			
Nationality	Email Address			
SINGAPORE CITIZEN	NADYAHP@HOTMAIL.COM			
Occupation	Sex	Age	Date of Birth	Race
Student	Female	25	08/09/1997	Eurasian
Institution/School Name	Language			
	English			
Date/Time Of Incident	Location	Of Inciden	t	
03/01/2023 17:00 - 03/01/2023 17:10	152 JALA	N TECK V	WHYE #01-15 SIN	IGAPORE 680152
Brief details.				

Brief details.

My vehicle was hit by a brinks company vehicle driver while it was stationary in US Embassy Parking lot. The driver of the vehicle apologized for hitting my vehicle.

Subjects Involve	d make the statement of All	DESCRIPTION OF THE PROPERTY OF THE PERSON OF	
Suspect	Allerda	<b>《在於特別等於日本學》</b>	THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.
Person Name	GURUSAMY THIAGA	ARAJA	
ID Type	NRIC NO	ID No	S0167660A
Gender	Male	Age	71-72

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: 03/01/2023 18:10
Officer In-Charge Of Case:	Classification Of Case:





2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20230103/7057

Race	Indian	Language	English
Relation To Informant	The driver that hit my car		
Victim			
Person Name	NUR NADYAH BINTE PERV	VRIE	
ID Type	NRIC NO	ID No	S9731158G
Gender	Female	Age	25
Race	Eurasian	Language	English
Occupation	Student	Address	152 JALAN TECK WHYE #01- 15 SINGAPORE 680152
Mobile No	91314524	Is Informant A Victim?	Yes

Signature Of Informant:  The identity of the person making this report has been authenticated by Singpass. No signature is required.
Date/Time: 03/01/2023 18:10
Classification Of Case: