

# 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 .....	16/02/2023 15:58 (SGT)
Reported by .....	Driver
Date of Accident .....	15/02/2023 17:50 (SGT)
Exact Location of Accident .....	PIE, Singapore
Additional Location Information .....	-
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SLS4281L
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### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	VIJAYAKUMARI D/O NARAYANASAMI
NRIC No .....	S1678256D
Email Address .....	NADAISSON.SARAVANAN@GMAIL.COM
Mobile Phone No .....	(Phone) +65-97257703
Alternative Phone No .....	-

### VEHICLE PARTICULARS

Manufacturer .....	Mazda
Model .....	3
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 - Reporting only
Vehicle Category .....	Private car
Transmission .....	Auto
CC .....	1500

### INSURANCE COMPANY

Name of Insurance Company .....	Auto & General Insurance (Singapore) Pte. Limited.
Policy Number / Cover Note Number .....	P10617431R01

### DRIVER

Name of Driver .....	NADAISSON SARAVANAN S/O SELVARAJ
NRIC No .....	S9621040Z
Date Of Birth .....	12/06/1996
Occupation .....	Indoor

Date Of Driving Pass .....	29/06/2015
Driving experience .....	7 YEARS AND 8 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-92367903
Alt. Phone Number .....	-
Email Address .....	NADAISSON.SARAVANAN@GMAIL.COM
Address .....	BLK 601 ELIAS ROAD #07-244
Address complement .....	-
Postcode .....	510601
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Child
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? .....	No
Was any injured conveyed to hospital by ambulance? .....	-
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 .....	GOKUL SUBRAMANIAM
Gender .....	Male

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	No
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

VEHICLE B IN FRONT JAM BRAKE. I CANNOT STOP IN TIME AND HIT ONTO VEHICLE B REAR PORTION.

#### 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 .....	SNC8488S
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-

Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	-
Contact Number .....	-
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	VEHICLE B
No. Of Passenger (Including Driver) .....	1

# SKETCH PLAN

## IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
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5. **Any false reporting may be referred to the Police for investigation**.
6. The 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.

## 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' law yers/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' law yers/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 law yers/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

Sketch Plan



Describe Circumstances of the Accident \_\_\_\_\_

Vehicle B instant jam brake, I cannot stop  
in time and hit only vehicle B rear portion

## Declaration

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

Witnessed by Reporting Centre  
Personnel































It says to choose



## Certificate of Insurance

Comprehensive Car Policy  
Policy Number: P10617431R01

A step-by-step guide on what you should do if you are involved in an accident:

1. Remain calm and do not panic.
2. Check if anyone is injured - if there is personal injury, call 995 for ambulance or 999 for police assistance.
3. Do not move your vehicle unless necessary, especially if there are personal injuries involved.
4. Take photographs of the accident scene and damaged vehicles/property.
5. Exchange information and particulars (including name, address, vehicle number, name, address, NRIC, contact number, insurer, etc) with all the other parties involved (including witnesses).
6. Do not admit any liability, whether verbally or in a written form.

Should you require any towing services or assistance, please call our 24-hours Claims hotline at 6221 2199 if you are in Singapore or +65 6540 2199 if you are overseas. Wait for a tow truck assigned by Budget Direct Insurance to tow your car - you should not accept help from any other towing service providers. You should also report the accident at any of Budget Direct Insurance's Authorised Workshops or Accident Reporting Centres within 24 hours of the accident or by the next working day.

### Budget Direct Insurance's Authorised Workshops / Accident Reporting Centres:

North	Central
<b>Automotive Repair Centre Pte Ltd</b> 38 Woodlands Industrial Park E1 #05-18 Singapore 737200 Tel: 6456 0834 Weekdays: 9.00am - 6.00pm Saturday: 9.00am - 1.00pm  <b>An Lim Motor Company</b> No. 10 Ang Mo Kio Ind. Park 2A #01-09 AMK Autopoint Singapore 568047 Tel: 6483 1244 Weekdays: 9.00am - 5.30pm Saturday: 9.00am - 12.30pm  <b>Auto Insure Pte Ltd</b> 6 Mansing Lane Singapore 739145 Tel: 6284 7345 Weekdays: 9.00am - 6.00pm Saturday: 9.00am - 3.00pm	<b>Charm's Customcraft</b> Blk 1010 Bukit Merah Lane 3 #01-105 Singapore 159724 Tel: 6271 7054 Weekdays: 9.00am - 5.30pm Saturday: 9.00am - 1.00pm  <b>An Lim Motor Company (Branch)</b> 176, Sin Ming Drive Singapore 575721 Tel: 6456 3632 Weekdays: 9.00am - 5.30pm Saturday: 9.00am - 12.30pm  <b>Premium Autocare Centre</b> (Specialises in Audi & Volkswagen vehicles) 281 Alexandra Road Singapore 159939 Tel: 6474 3323 Weekdays: 9.00am - 6.00pm Saturday: 9.00am - 1.00pm

Auto & General Insurance (Singapore) Pte. Limited (Co. Reg. No. 201626103G), trading as **Budget Direct Insurance**  
 150 Clemenceau Avenue, #03-01, Singapore Shopping Centre, Singapore 239924 Tel: 6221 2111 budgetdirect.com.sg

It says to choose



## Certificate of Insurance

Comprehensive Car Policy  
Policy Number: P10617431R01

Motor Vehicles (Third-Party Risks And Compensation) Act 1960 of Singapore, Motor Vehicles (Third-Party Risks And Compensation) Rules of Singapore, Road Transport Act 1987 of Malaysia, Road Transport (Amendment) Act 2019 of Malaysia, Motor Vehicles (Third-Party Risks) Rules, 1959 of Malaysia, or any Amendment, Act or Acts passed in substitution thereof.

Certificate Number P10617431R01 (Comprehensive / Named Driver Plan)

1) Vehicle Registration Number	SLS 2811
Chassis Number	YM6BN22A830175784
2) Effective Date / Time of Commencement of Insurance for the Purpose of the Act	22/09/2022 (00:00)
3) Date / Time of Expiry of Insurance	21/09/2023 (23:59)
4) Excess (i) Policy (ii) Windscreen	\$5 600.00 \$5 100.00
5) Policyholder	Vijayakumari D/O Narayanasami
6) Persons or Classes of Persons Entitled to Drive*	Drivers named as a Main / Named Driver in this Certificate of Insurance only.
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by any reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act 1961 of Singapore and its registration under the said Road Traffic Act has not been cancelled at the time of accident or loss. Please refer to the Product Disclosure Document for full terms and conditions.	
Main Driver / Date of Birth	Subramaniam Selvaraj (25/02/1963)
Named Driver(s) / Date of Birth	Vijayakumari D/O Narayanasami (26/11/1964) Madelon Saravanan S/O Selvaraj (12/06/1996) Dhanahani D/O Selvaraj (25/07/1990)
7) Limitation as to use*	Use only for social, domestic and pleasure purposes. The Policy does not cover use for hire or reward, tuition or driving tests, racing, pace-making, reliability trials, speed-testing or the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade. * Limitations rendered imperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act 1960 of Singapore and Section 95 of the Road Transport Act 1987 of Malaysia, are not to be included under these headings.
8) Finance Company	United Overseas Bank Limited

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 Compensation) Act 1960 of Singapore and Part IV of the Road Transport Act 1987 of Malaysia or any Amendment, Act or Acts passed in substitution thereof.

Issued in Singapore on  
20/08/2022

Auto & General Insurance (Singapore) Pte. Limited  
Trading as Budget Direct Insurance

  
 Simon Birch  
 Chief Executive Officer

Auto & General Insurance (Singapore) Pte. Limited (Co. Reg. No. 201626103G), trading as **Budget Direct Insurance**  
 150 Clemenceau Avenue, #03-01, Singapore Shopping Centre, Singapore 239924 Tel: 6221 2111 budgetdirect.com.sg