SA18248A0002 / Abwin Service Pte Ltd ENTRY DATE & TIME: 10/08/2024 09:48 (SGT) SUBMITTED BY: Claims

VERSION: 1 (10/08/2024 09:48 (SGT))



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.

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 First Submission

Reported by

Date of Accident

Exact Location of Accident

Additional Location Information

Country/State of Loss

10/08/2024 09:48 (SGT)

Actual Driver

06/08/2024 06:35 (SGT)

334 Yishun Street 31, Singapore 762334

CARPARK DECK 3B

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

GBE7913U

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

Company Reg No

Email Address

Mobile Phone No

Alternative Phone No.

Yes

Toyota

Manual

2982

Employment

Dyna

SONG SHENG CONSTRUCTION PTE, LTD.

2XXXXX621N

SONGSHENGCONSTRUCTION@GMAIL.COM

(Phone) +65-82839221

No - Claiming third party

Commercial vehicle

VEHICLE PARTICULARS

Manufacturer

Model

Variant

Exact purpose for which vehicle was being used at time of

accident

Are you claiming under your own insurance policy for repair to

your vehicle? Vehicle Category

Transmission

CC

Vehicle Fuel

First Regisration Date

Chassis no

Effective Date/Time of Ownership

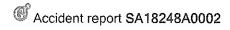
INSURANCE COMPANY

Name of Insurance Company

Policy Number / Cover Note Number

Income Insurance Limited 5129074269-01

DRIVER



Name of Driver Passport No/FIN Date Of Birth Occupation Driving Pass Date

Driving License Pass Class **Driving License Validity**

Driving experience

Gender

Mobile Number

Alt. Phone Number

Email 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

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Weather Conditions

Road Surface

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?

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACH

ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera?

Yes No

ISLAM MAFIJUL GXXXX047X 01/05/1983 Outdoor 29/05/2023

3 Valid

1 YEAR AND 3 MONTHS

Male

(Phone) +65-86152649

SONGSHENGCONSTRUCTION@GMAIL.COM

511 GUILLEMARD RD

#02-14 GRANDLINK SQUARE

399849 No

Employee

No

Fire, explosion or lightning

Clear Dry

No

3 No

Yes

0

No

Yes

Traffic Police

(Phone) +65-65470000 (Fax) +65-65474900

10 Ubi Avenue 3 Singapore 408865

No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SJW9973T

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 No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SMX4446R

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

No. Of Passenger (Including Driver)

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report governtly the details of the accident to speed up the claims process
- 2 This Form must be completed by the Policific lider and/or the Actual Driver
- Information provided must be as <u>(nutrified and accurate as possible</u>. Any wifful 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 sability 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 insurers) 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 seldement 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 enquines 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 cleans.

(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 said outside of Sugapore, for one or more of the above Purposes.

WIZECHER SE

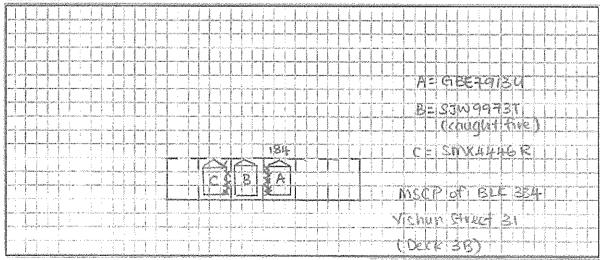
Postsylucidad's Seguillation Data & Tenso

DA

Driver's Skiprature (if cirves is not the policyholder) / Date & Fana

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

Sketch Plan



1

escribe Circumstance of the Accident	
Refer to P	
7/20240	908 A026
	A CONTRACTOR OF THE CONTRACTOR
	· · · · · · · · · · · · · · · · · · ·
	100 S 100 -
	· · · · · · · · · · · · · · · · · · ·
and the second s	
	A TO THE SECOND
- Control of the Cont	
The second secon	
A second	The state of the s
N. Seporte Laboratoria de la Constantina del Constantina de la Con	
Declaration	

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



£13<u>.</u>

Other's Signature (If driver is not the policyhelder) / Care 5. Time



Witnessed by Reporting Centre Personnel (Name as in NRICAD card)

2





1 of 3 Report No. T/20240808/7028

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

REPORT OF A TRAFFIC ACCIDENT

	Date/Time Report Made: 08/08/2024 12:04		Vide Report No.: L/20240806/2034	Station Diary No.:		
Inioman	t's Particular	Š (18 18 18 18 18 18 18 18 18 18 18 18 18 1				
Name of Informent: Islam Mafijut		with the second sec	Address:			
ID Type / FIN NO /			Contact No.: Home/Office:	Mobile: 86152649		
Nationality:		utalitikko (ri i çilir diraki quqori plaki qiraki qormohinidda agishid iliki ilika oo oo aasaanii.	Email: maiijulislam804@gmail.com			
Sex: Male	Age: 41	Date of Birth: 01/05/1983	Type of Informant: Driver			
Race:			Language: English	- Artifetionis (Alle 1990) and Artifetion (Artifetion) and		
Occupation: Lorry driver			Driving Licence Information: Class:	Date of Expiry:		

General Information	of the Accident					
Type of Accident:	Non-Injury Attended by Police	Annual An	Drink Drive: No	Date/Time of Accid 06/08/2024 06:20	ent:	Type of Location: Car Park
Location:		······································				<u> </u>
YISHUN STREET	31					
Weather: Clear		Road Si Dry	uriace:			14 4 15 14 14 14 15 14 14 14 14 14 14 14 14 14 14 14 14 14
Traffic Flow: One Way		Traffic C Not Cor			Traffi Light	c Volume:
Type of Collision: Vehicle on Fire						ne conveyed by llance:

Details of Veh Vehicle No.		Make	Model	Color Condition	No of Passenger
GBE7913U	Lorry	TOYOTA	Dyna	Caught Fire	

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



T/20240808/7026

Police Station Of Origin; Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No; 65470000 2 of 3 Report No. T/20240308/7026

CONTINUATION OF REPORT

Name	ISLAM MAFIJUL		ID No.		G8493047X
Related Vehicle	GBE7913U (Lorry)	Andrew dropped process will write an executive to the contract of the contract	Conta	ct No.	86152649
Hospital/Clinic	NIL		Class Drivin Licend Expiry	g ce &	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Disch	arge	NIL	
No. of Days grante	ed Medical Leave (MC) NIL	Degree of I	пјигу	NIL	,

Brief Details.

On 05.08.2024 at about 20:30 hours, I parked my company's lorry bearing vehicle number plate GBE7913U at the Carpark Lot No. 184 MSCP of BLK 334 Yishun Street 31 (Deck 3B).

On the next day (06.08.2024) at about 06:35 hours, when I went back to the carpark to collect my lorry, I saw the vehicle parked beside me (on my left) bearing vehicle number plate SJW9973T was caught fire and subsequently causing damages to my lorry GBE7913U and also another vehicle number plate SMX4446R parked beside SJW9973T.

Moment later, Traffic Police Officers and Fire Services Team came to the scene and I was given a Case Card (Report Number: L/20240806/2034) and was told to make a Traffic Police Report.



Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000



112024000611020

3 of 3 Report No. %20240808/7026

CONTINUATION OF REPORT

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: 08/08/2024 12:04
Officer in Charge Of Case: TP / TPIB / FADLI SHAIFUDDIN BIN MOHAMED SANI Contact No.: 65476845	Classification Of Case:
NP168	