

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 First Submission	19/06/2024 10:27 (SGT)
Reported by	Actual Driver
Date of Accident	18/06/2024 09:20 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ADMIRALTY RD WEST
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMH1157D
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	365 INFINITY PTE. LTD.
Company Reg No	202135530Z
Email Address	CHEHSINE@GMAIL.COM
Mobile Phone No	(Phone) +65-91822687
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Prius
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	0

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5129609959-01

DRIVER

Name of Driver	MANSOOR BIN ABU BAKAR
NRIC No	S1738262D
Date Of Birth	08/05/1966
Occupation	Outdoor

Driving Pass Date	07/05/2010
Driving experience	14 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-93849004
Alt. Phone Number	-
Email Address	CHEHSINE@GMAIL.COM
Address	APT BLK 160 WOODLANDS STREET 13 #02-657
Address complement	-
Postcode	730160
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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)	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	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED

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	VIDEO WITH OWNER

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKV5279J
Vehicle Manufacturer	-
Vehicle Model	-

SKETCH PLAN

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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/are 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.

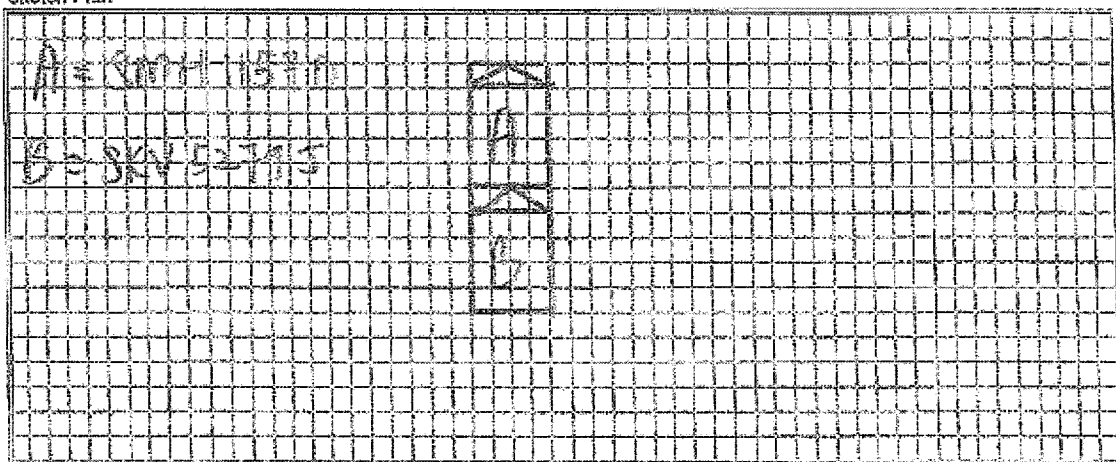
POLICYHOLDER'S SIGNATURE / Date & Time

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

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

LENG

Sketch Plan



vlon2002

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Describe Circumstance of the Accident

Refer to the police report.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

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

LENG

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



SINGAPORE POLICE FORCE



T/20240618/7074

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

Report No. T/20240618/7074

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/06/2024 16:02		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: MANSOOR BIN ABU BAKAR			Address: 160 WOODLANDS STREET 13 #02-657 SINGAPORE 730160		
ID Type / ID No.: NRIC NO / S1738262D			Contact No.: Home/Office: Mobile: 93849004		
Nationality: SINGAPORE CITIZEN			Email: designreno.mb@gmail.com		
Sex: Male	Age: 58	Date of Birth: 08/05/1966	Type of Informant: Driver		
Race: Malay			Language: English		
Occupation: Private-hire car driver			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 18/06/2024 09:20	Type of Location: Before T junction
Location: WOODLANDS INDUSTRIAL PARK E1				
Weather: Sunny		Road Surface: Dry		
Traffic Flow: Two Way		Traffic Control:		Traffic Volume: Moderate
Type of Collision: Hit by another car on the rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKV5279J	Motor car	HONDA		White		0
SMH1157D	Motor car		TOYOTA PRIUS	Blue		0

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



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

CONTINUATION OF REPORT

Driver				
Name	MANSOOR BIN ABU BAKAR		ID No.	S1738262D
Related Vehicle	SMH1157D (Motor car)		Contact No.	93849004
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave (MC)	02		Degree of Injury	Slight
Driver				
Name	RAJESH		ID No.	NIL
Related Vehicle	NIL		Contact No.	92329444
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave (MC)	NIL		Degree of Injury	NIL

Brief Details.

It was 9.20am, i was driving a rented vehicle as a private hire driver(SMH1157D) with no passenger inside. About 5 meter before turning right from admiralty road west towards Sembawang, my car was hit quite hard on the rear by another car with the plate number of SKV5279J. Moments before getting hit, i remember clearly that i hear a tyre screeching sound. Due to the hard impact, i had a pain on my back, shoulder and neck and drowsiness. I went out from my vehicle and approached the driver, and proceed to ask why he hit my car. He told me that he applied brake but couldn't stop in time. My rental company advised me to see doctor and make a police report. Attached is the MC from the doctor.

I took a short video of me approaching the driver.



**SINGAPORE
POLICE FORCE**



T/20240618/7074

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Report No. T/20240618/7074

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

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / AEIT /
FAHKRUL RAZI BIN SUHAIME
Contact No.: 65476404

Signature Of Informant:
The identity of the person making this report has been
authenticated by Singpass. No signature is required.

Date/Time:
18/06/2024 16:02

Classification Of Case:

NP168