

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	01/10/2024 13:47 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	21/09/2024 11:30 (SGT)
Exact Location of Accident	Malaysia
Additional Location Information	KM3 PASIR GUDANG PERLING
Country/State of Loss	Malaysia

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMF5384Z
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	SYED FESHAL BIN S ABDULRAB TALIB
NRIC No	SXXXX827A
Email Address	FESHALTALIB@HOTMAIL.COM
Mobile Phone No	(Phone) +65-98298516
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Sienta
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	0
Vehicle Fuel	Petrol
First Registration Date	16/11/2018
Chassis no	MHFZ28H3300059966
Effective Date/Time of Ownership	16/11/2018 00:00 (SGT)

INSURANCE COMPANY

Name of Insurance Company	ECICS Limited
Policy Number / Cover Note Number	MPC23A00335301

DRIVER

Name of Driver	SYED FESHAL BIN S ABDULRAB TALIB
NRIC No	SXXXX827A
Date Of Birth	07/08/1956
Occupation	Indoor
Driving Pass Date	28/12/1979
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	44 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98298516
Alt. Phone Number	-
Email Address	FESHALTALIB@HOTMAIL.COM
Address	55 NEW UPPER CHANGI ROAD #14-1458
Address complement	-
Postcode	461055
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 - Head to Rear
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	Yes
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)	3
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	-

FOREIGN VEHICLE 1

Vehicle Registration Number	JUF9451
Vehicle Category	Motorcycle

PASSENGER 1

Name	UNKNOWN
Gender	Female

PASSENGER 2

Name	UNKNOWN
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	TRAFIK JOHOR BAHRU
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 JUF9451
Vehicle Manufacturer -
Vehicle Model -
Vehicle Variant -
Vehicle Colour -
Vehicle Category Motorcycle
Name of Driver MOHAMAD FARUL RAFIQ BIN ROHAIZAD
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 MOHAMAD FARUL RAFIQ BIN ROHAIZAD
Gender Male
Phone No -
Address -
Address Complement -
Post Code -
Approximate Age Years Old -
Injuries Sustained -
Injured person in which vehicle? JUF9451
Were seat belts worn? No
Was this injured conveyed to hospital by ambulance? Yes

SKETCH PLAN

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8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

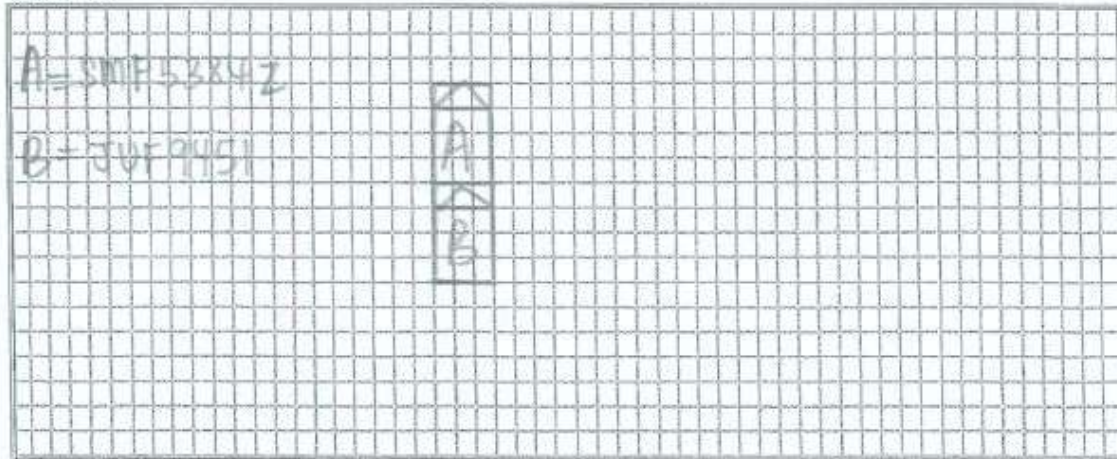
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.


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 NRIC/ID card)

Sketch Plan



The sketch plan is a large grid. In the top left corner, there are two handwritten labels: 'A = SWIF 53842' and 'B = JUF 9451'. In the center of the grid, there are two small rectangular boxes, one labeled 'A' and one labeled 'B', stacked vertically.

Describe Circumstance of the Accident

On 21/09/2024 at about 11:30 Am, when I was driving my vehicle A (SMF 5384Z) from PASIR GUDANG TOWARDS JOHOR BAHRU, MALAYSIA.

When I reach kilometre 3 PASIR GUDANG I filter to the left most lane due to my car ~~got~~ got warning light blinking, then I on my hazard light at the left most lane not even 1 minutes and 30 seconds only, I felt an big impact from my rear portion which was bang by the vehicle B (JVF 9451).

Declaration

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

S. F. Fakhri
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 NRIC/ID card)





















POLIS DIRAJA MALAYSIA REPOT POLIS

Balai : TRAFIK JOHOR BAHRU(U) Pegawai Penyiasat : R114601
Daerah : J/BAHRU UTARA
Kontinjen : JOHOR
No. Repot : TRAFIK JOHOR BAHRU(U)/016351/24
Tarikh : 21/09/2024
Waktu : 1232 PM
Bahasa Diterima : B. Malaysia

Butir-butir Penerima Repot :

Nama : MUHAMMAD HASSANUDDIN BIN ABD RAZAK
No. Badan : R166263 Pangkat : KPL

Butir-butir Jurubahasa (Jika Ada) :

Nama : — No. K/P (Baru) : — No. Polis/Tentera : —
No. Pasport : — Bahasa Asal : —
Alamat : —

Butir-butir Pengadu :

Nama : SYED FESHAL BIN S ABDULRAB TALIB
No. K/P (Baru) : — No. Polis/Tentera : — No. Pasport : —
No. Sijil Beranak : — Jantina : Lelaki Tarikh Lahir : 07/08/1956
Umur : 68 Tahun 1 Bulan Keturunan : Melayu Warganegara : SINGAPORE
Pekerjaan : PESARA
Alamat Tinggal : BLOK 55 NEW UPPER CHANGI ROAD #14-1458, 461055 SINGAPURA
Alamat IbuBapa : —
Alamat Pejabat : —
No. Tel (Rumah) : — No. Tel (Pejabat) : — No. Tel (Bimbit) : 6598298516
Emel : —

Pengadu Menyatakan :

PADA 21/09/2024 JAM LEBIH KURANG 11:30 PAGI, SAYA MEMANDU MPV NOMBOR SMF5384Z DARI PASIR GUDANG HENDAK KE JOHOR BAHRU. PADA KETIKA ITU, APABILA SAYA SAMPAI DI KM3 PASIR GUDANG-PERLING, SEMASA SAYA BERHENTI DI BAHU JALAN KIRI KERANA KERETA MENGELAMI KEROSAKAN DAN SAYA TELAH MEBERI LAMPU ISYARAT KECEMASAN TIBA-TIBA SEBUAH MM/SIKAL NOMBOR JUF9451 DARI ARAH BELAKANG TELAH TERLANGGAR BELAKANG M/KAR SAYA. SAYA TIDAK CEDERA. KEROSAKAN BELAKANG M/KAR SAYA IALAH BUMPER, BONET, CERMIN BESAR, SET LAMPU, MUDGUARD KIRI/KANAN, PANEL, SENSOR DAN LAIN-LAIN KEROSAKAN BELUM PASTI LAGI. SEKIAN LAPORAN SAYA.

Tandatangan Pengadu:

Tandatangan Jurubahasa (Jika ada):

Tandatangan Penerima Repot:

ID Pencetak | Tarikh @ Masa Cetak

SALINAN YANG DISAHKAN BENAR
(HANYA UNTUK TUNTUTAN SIVIL)

KETUA TRAFIK DAERAH JOHOR BAHRU UTARA, JOHOR.
TIDAK BOLEH DIGUNAKAN UNTUK TUJUAN PERDAGANGAN.

POL.316



CAWANGAN TRAFIK,

IBU PEJABAT POLIS DAERAH JOHOR BAHRU UTARA,

POLIS DIRAJA MALAYSIA,

JKR No. 3861, BATU 10 81300 SKUDAI,

JOHOR.

07-5571952

Resit Akuan Penerimaan Repot Polis :

Nama Pengadu : SYED FESHAL BIN S ABDULRAB TALIB
No Kad Pengenalan / Pasport :
No Repot Polis : TRAFIK JOHOR BAHRU(UY)016351/24
Tarikh @ Masa Repot Polis : 21/09/2024 @ 12:32
Pengesahan Penerimaan Repot :

Tandatangan Ketua Pejabat Pertanyaan

Pegawai Penyiasat :

Nama Pegawai Penyiasat : (R114601) SJN MOHAMAD KHIR B MOHD SHAH
Tempat Tugas : JOHOR , J/BAHRU UTARA
No Telefon Pejabat : No Telefon Bimbit : 012-7500472
Tarikh @ masa Perjumpaan :
Pengesahan Penerimaan Repot :

Tandatangan Pegawai Penyiasat

Juru Gambar :

Nama : No Badan : Pangkat :

Tarikh @ Masa Gambar Diambil :

Pengesahan Gambar Diambil :

Tandatangan Juru Gambar

Unit Pembekalan Dokumen Siasatan :

No Telefon Unit Pembekalan Dokumen :

Waktu Pejabat :

Ahad - Rabu :
08:00 Pagi - 01:00 Tengah Hari
02:00 Petang - 04:30 Petang
Khamis :
08:00 Pagi - 1:00 Tengah Hari
02:00 Petang - 03:00 Petang
Jumaat / Sabtu : Tutup
Cuti Umum / Khas : Tutup

Jenis Dokumen Dibekal Kepada Pengadu :

1.Salinan Repot Polis
2.Gambar Kenderaan
3.Rajah Kasar Kemalangan
4.Keputusan Siasatan
5.Lain-lain Dokumen
Tarikh @ Masa Dokumen Diserah :

<input checked="" type="checkbox"/>	5
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<input type="checkbox"/>	
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Pengesahan Kaunter Pembekalan
Dokumen :

Tandatangan Pegawai Kaunter
Pembekalan Dokumen

< SMF5384Z CI...

**CERTIFICATE OF INSURANCE**

Motor Vehicles (Third-Party Risks Compensation) Act (Chapter 189)
 Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960
 Road Transport Act, 1987 (Malaysia)
 Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

**AUTHORISED
 WORKSHOPS**

 SZ300
 COMPREHENSIVE
 ORIGINAL

CERTIFICATE NO: MPC23A00335301

Agency Name: APED MOTOR CAR INSURANCE AGENCY

Agency Code: A0000182

Chassis No: MHFZ28HJ300059966

Engine No: 2NRK397895

1. Index Mark and Registration Number of Vehicle: SMF5384Z

2. Name of Policyholder: SYED FESHAL B ABDULRAB TALIB

3. Period of Insurance (both dates inclusive): 16 November 2023 to 15 November 2024

4. Persons or Classes of Persons entitled to drive

- a) The Policyholder and all Named Drivers declared under the Policy.
 b) Any other person who is driving on the Policyholder's order or with his permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Car or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Car.

5. Limitations as to use

Use for social, domestic and pleasure purposes and for the Policyholder's business. The Policy does not cover use for hire or reward, tuition, driving test, race, pace-making, reliability trial, speed-testing, 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.

6. EXCESS APPLICABLE

WINDSCREEN

SECTION 1 - INSURED/NAMED DRIVER

SGD 100.00

SGD 750.00

ADDITIONAL EXCESS:

SECTION 1 - UNNAMED DRIVERS

SGD 500.00

SECTION 2 - AGE <25, AGE >65 OR DRIVING EXP <2 YEARS

SGD 1,200.00

Signed for and on behalf of ECICS Limited

AUTHORISED SIGNATURE

Important Notices:

- Policyholders are hereby warned that it shall be unlawful for any person to use or cause or permit any other person to use a motor vehicle without a valid insurance under the Act.
- On the use of a motor vehicle, Policyholders must undertake all insurance papers issued including the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a Temporary Declaration in that effect must be made. Failure to comply will constitute an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189).
- The Certificate of Insurance and the Policy will cease to be valid once the motor vehicle has been sold or transferred.
- The Payment Deductible Limit Warranty of Premium Excess Warranty found in the Policy must be complied with otherwise there would be no liability under the Policy and Certificate of Insurance.