# **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 First Submission 24/10/2024 15:32 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 23/10/2024 17:30 (SGT) Exact Location of Accident Singapore Additional Location Information PIE Toward Tuas After Steven Road Exit Country/State of Loss Singapore

### **DETAILS OF OWN VEHICLE**

Toyota

Sienta

Vehicle Registration Number **SLP3469K** 

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner Mohamad Yusof Bin Akop NRIC No SXXXX563A Email Address mohd72yusof@gmail.com Mobile Phone No (Phone) +65-93829897 Alternative Phone No

#### VEHICLE PARTICULARS

Manufacturer

Model

Variant Sienta 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 CC 1500 Vehicle Fuel First Regisration Date Chassis no

## INSURANCE COMPANY

Name of Insurance Company Direct Asia Insurance (Singapore) Pte Ltd Policy Number / Cover Note Number MT 01062494 02

DRIVER

Effective Date/Time of Ownership

Name of Driver	Mohamad Yusof Bin Akop			
NRIC No	SXXXX563A			
Date Of Birth	05/02/1972			
Occupation	Indoor			
Driving Pass Date	12/12/1995			
Driving License Pass Class	3			
Driving License Validity	Valid			
Driving experience Gender	28 YEARS AND 10 MONTHS			
Mobile Number	Male (Phone) 165 03830807			
Alt. Phone Number	(Phone) +65-93829897			
Email Address	mohd72yusof@gmail.com			
Address	Blk 533 Bukit Panjang Ring Road #21-807			
Address complement	-			
Postcode	670533			
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				
GENERAL INI CHARACTER OF THE MODIFIER				
Type of Accident	Collision - Head to Rear			
Weather Conditions	Clear			
Road Surface	Dry			
	,			
OTHER INFORMATION				
Was any foreign vehicle involved in the accident?	N -			
Was any foreign vehicle involved in the accident?  Number of vehicles involved in the accident	No			
Was anybody injured in the Accident?	2 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?	No			
Was notice of intended Prosecution given?	No			
If yes, against whom?	-			
SUPPLIES OF A SUPPLIE				
CIRCUMSTANCES OF ACCIDENT				
Report refer Sketch Plan				
ATTACHMENT(S)				
A				
Are accident photos available for attachment?	Yes			
Was there any video captured by Car Camera?	No			
- DETAIL O OF OTHER	VEHICLE PROPERTY 1			
DETAILS OF OTHER VEHICLE PROPERTY 1				
Vehicle Registration Number	SMJ3874T			
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)	-

# INJURED PERSONS DETAILS

### INJURED 1

Name of injured person Gender	Mohamad Yusof Bin Akop
DI N	Male
Phone No	-
Address	Blk 533 Bukit Panjang Ring Road #21-807
Address Complement	-
Post Code	670533
Approximate Age Years Old	-
Injuries Sustained	Unknown
Injured person in which vehicle?	SLP3469K
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

#### SKETCH PLAN

#### **IMPORTANT NOTICE**

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- 2. This Form must be completed by the Policyholder and/or the Actual Driver.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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.
- 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/mailipackages); 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.

MOHAMAD YUSOF BIN AKOP

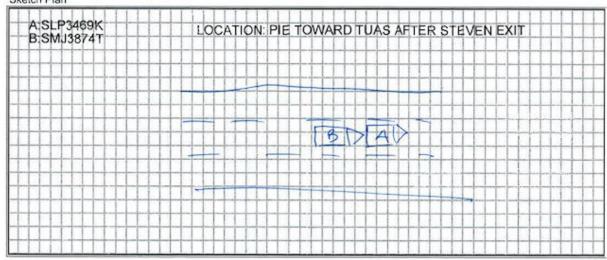
Policyholder's Signature / Date & Time

24.10.2024 Sketch Plan Driver's Signature (if driver is not the policyholder) / Date

& Time

Witnessed by Reporting Centre Personnel

(Name as in NRIC/ID card)



scribe Circumstance of the Accident 23.10.2024 17:30 I WAS DRIVING MY VEHICLE AT PIE TOWARDS TUAS AFTER STEV	EN
OAD EXIT THE VEHICLE INFRONT ME SUDDENLY JAM BRAKE THEN AFTER I MANA	
O APPLIED BRAKE AND STOP IN TIME HOWEVER VEHICLE "B" DID NOT STOP AND	нт
HE REAR PORTION OF MY VEHICLE "A"	
	_
Poologation	

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

MOHAMAD YUSOF BIN AKOP

Policyholder's Signature / Date & Time

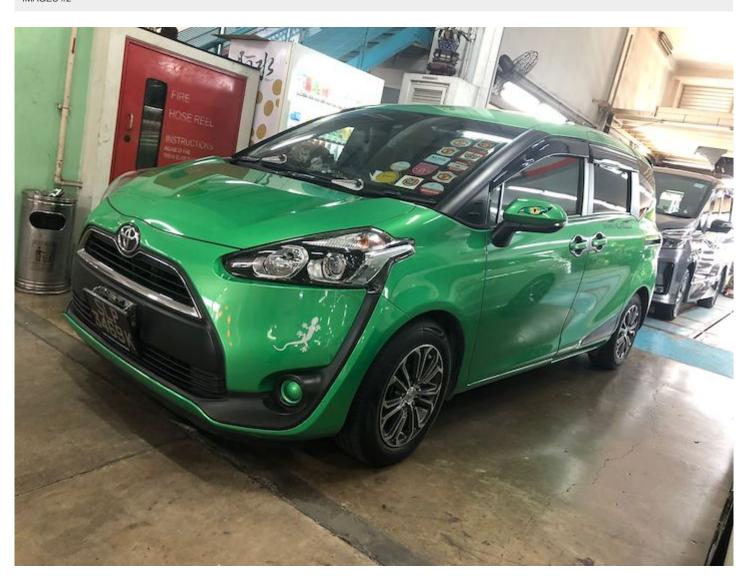
Driver's Signature (if driver is not the policyholder) / Date & Time

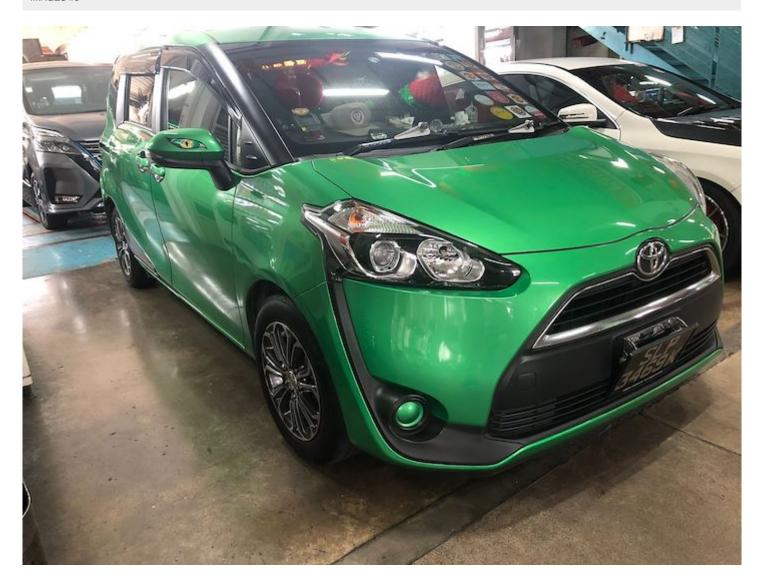
24.10.2024

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

2

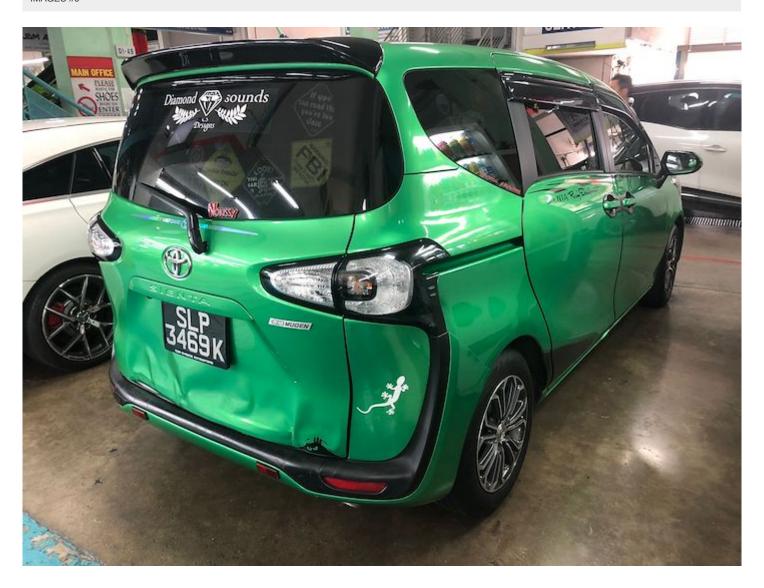


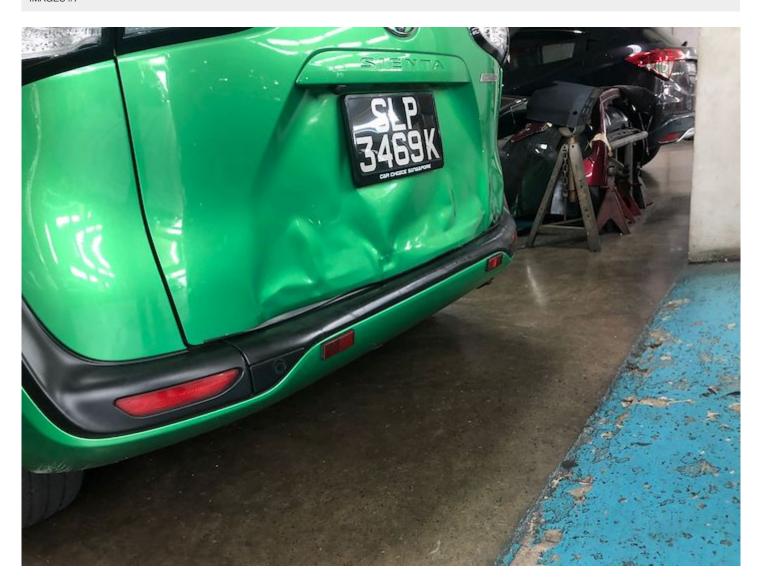




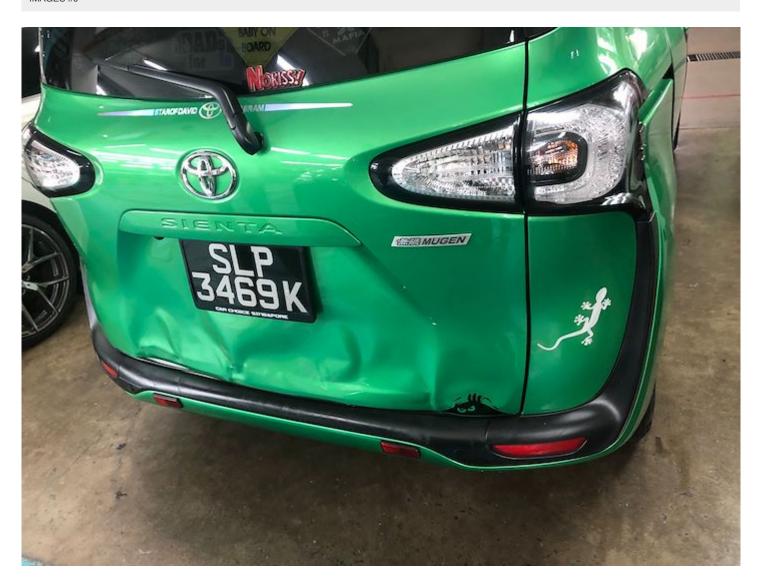


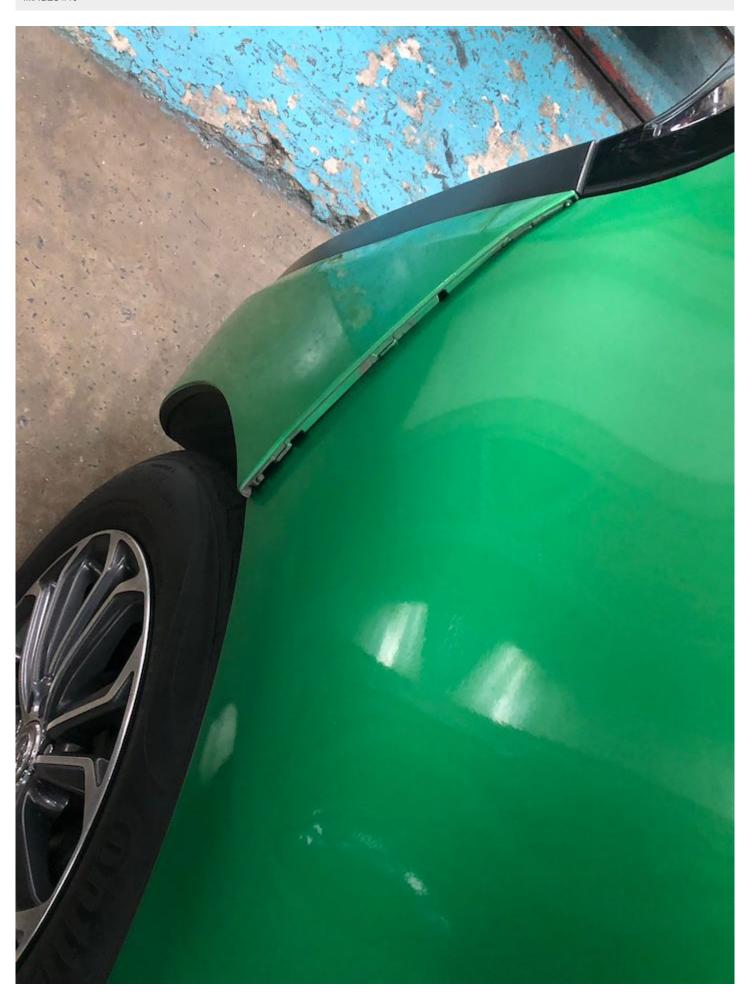


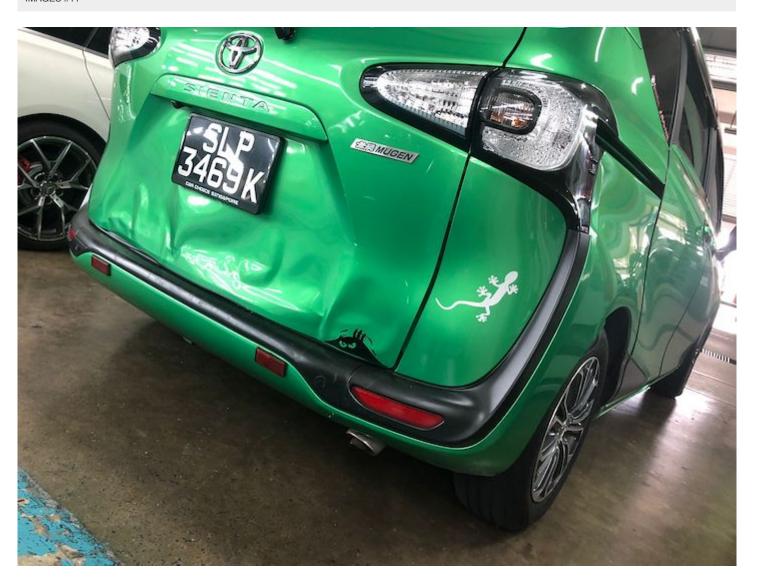


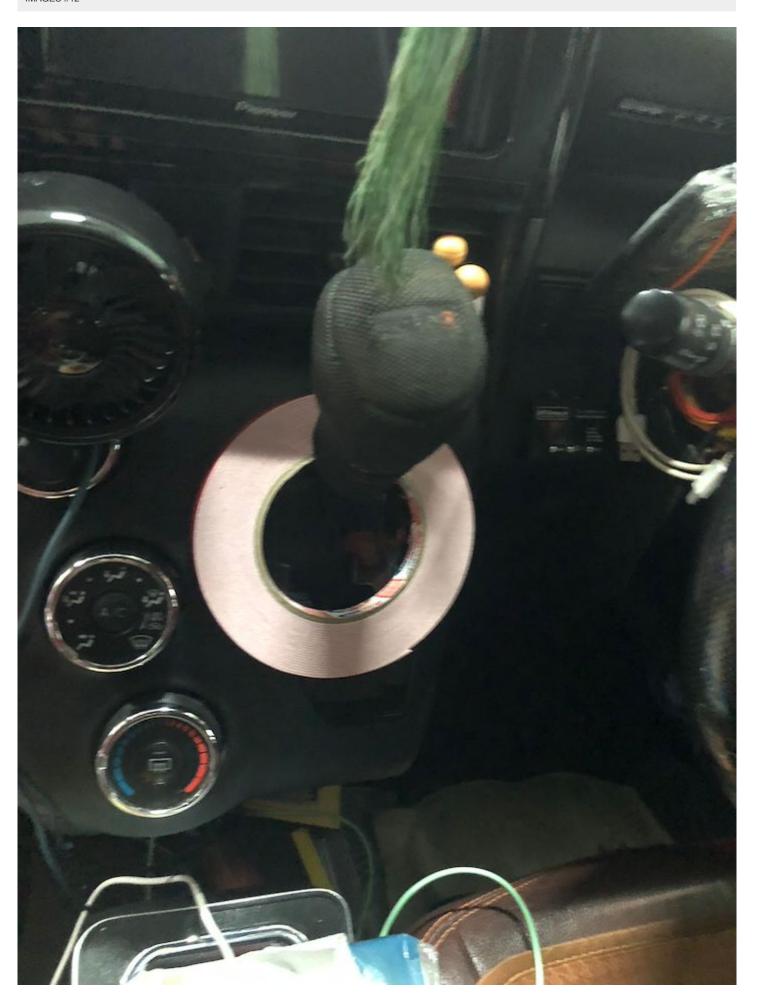


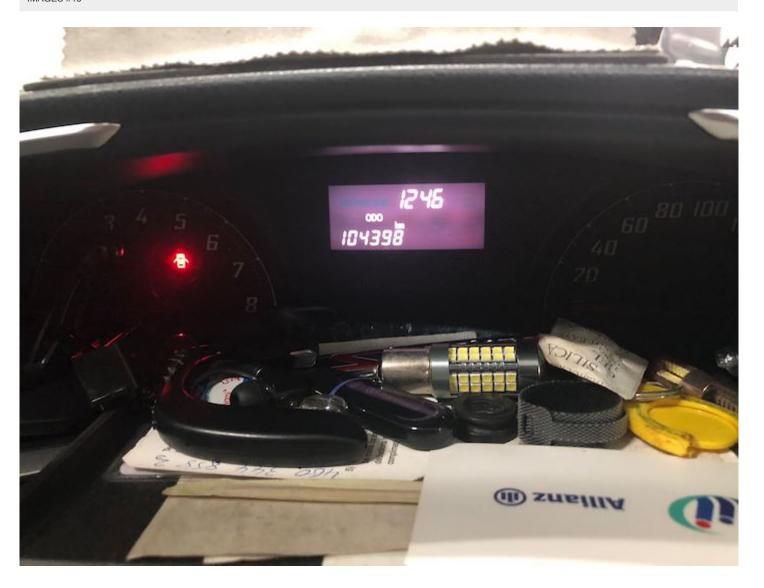














# GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

GR Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours: Monday to Friday, 09:00 – 17:00
UEN: \$66550020G / GST Reg. No.: M400017735

<u>IMPORTANT NOTE</u>: Please submit the completed Addendum form to the <u>same</u> Authorised Reporting Centre with whom you submitted the Original Report.

	ADDENDU	M
(A)	PARTICULARS OF PERSON MAKING THE AMENDMENTS:	
	Original Report No : S10424AO 0001	Vehicle Registration No: SLP 3469K
	Name (as shown in NRIC): Mohamad Yusof Bin Akop	NRIC/FIN/Passport No : S 720 3563A
	(*Vehicle Driver / Vehicle Owner) (*) Please delete as app	propriate
	Address : APT BCK S33 Bukit Panjano	Ring Road # 31-807 Singapore( 670531
	Contact (Tel) :	_Mobile No. :93819897
	Email Address : mohd 72 yusof @ gmail.com	
	Date of Accident : 33.10-2024	Time of Accident: 1730 hrs
	Place of Accident : PIE Towards Tuns after	
	Insurance Company: Direct Asia	
(B)	ADDITIONALINFORMATION / AMENDMENTS:	
	I have made a report on the above mentioned accident a make the following amendments:	and would like to include additional information or
	Date of Accident: 23/10/2024 14.30 (s	GT) change to
	=> 33/10/2014 1730 (SGT)	
	,	
	4	
	Policyholder / Driver's Signature Date:	Reporting Centre Personnel's Signature Name: NRIC/FINNo.:



Contact us at

Hotline: (65) 6665 5555

E-mail: customerservice@directasia.com

# CERTIFICATE OF INSURANCE

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

Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

This document forms part of your contract with us and should be read together with your Policy Schedule and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

Certificate No. : MT/01062494/02

Type of Coverage / Driver Plan : Car Comprehensive (Value Plus Plan)

1) Vehicle Registration No. : SLP3469K
Chassis No. : SLP3469K

2) Name of Policy Holder

3) Effective Date / Time of Commencement

MOHAMAD YUSOF BIN AKOP

of Insurance for the Purpose of the Act

22/06/2024 00:00

NSP1707064825

4) Date/Time of Expiry of Insurance

21/06/2025 23:59

- 5) Persons or Classes of Persons Entitled to Drive
  - (a) Any named person under the policy who is driving on the Policyholder's permission.
  - (b) Any authorised person, provided such person is aged 30 and above and holds a valid driving licence of 2 years or more, who is driving on the Policyholder's permission

The person driving must have a valid driving licence to drive in Singapore and must not be under suspension or disqualification from driving.

6) Limitations as to use\*

Use only for private purposes, in accordance with the declared car usage stated on your Policy Schedule. The policy does not cover use for hire or reward, tuition, driving test, racing, pace-making, reliability trials, speed tests, the carriage of goods for payment or for any purpose in connection with the motor trade business.

\*Limitations rendered inoperative by Section 8 of the Act and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under this heading.

Sum Insured : Market Value

 Own Damage Excess
 : S\$ 800.00

 Windscreen Excess
 : S\$ 100.00

windscreen excess : 3\$ 100.00

Choice of workshop : DirectAsia approved workshops
Finance company / Hire Purchase : Goldbell Financial Services Pte Ltd
Main driver : MOHAMAD YUSOF BIN AKOP

Named driver : None

Important Note: This policy does not cover the Policyholder/drivers below the age of 30 and Policyholder/drivers who hold a valid driving licence of less than 2 years with the exception of the main/named drivers above.

I/We hereby certify that the Policy to which this Certificate relates to is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and the Road Transport Act, 1987 (Malaysia).

Direct Asia Insurance (Singapore) Pte. Ltd.

Issued on: 23/05/2024

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Direct Asia Insurance (Singapore) Pte Ltd 16 Raffles Quay #39-01 Hong Leong Building Singapore 048581 www.DirectAsia.com