

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	29/10/2024 15:55 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	27/10/2024 14:20 (SGT)
Exact Location of Accident	Lavender St., Singapore
Additional Location Information	TWDS JALAN BESAR
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number PD177M

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	NAM HO DMC PTE LTD
Company Reg No	201725207M
Email Address	RAJESH@NAMHODMC.COM
Mobile Phone No	(Phone) +65-83160108
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Hiace
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Auto
CC	2800
Vehicle Fuel	-
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	SP2008844556-01

DRIVER

Name of Driver	MOHD ISKANDAR SHAH ABDULLAH @ DARSHAN SINGH S/O AJAIB SINGH
NRIC No	S1434937E
Date Of Birth	20/12/1960
Occupation	Outdoor
Driving Pass Date	24/08/1995
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	29 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-85958407
Alt. Phone Number	-
Email Address	RAJESH@NAMHODMC.COM
Address	BLK 72 GEYLANG BAHRU #02-3034
Address complement	-
Postcode	330072
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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 - Change/cross lane
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

I WAS DRIVING ALONG LAVENDER STREET TOWARDS JALAN BESAR ON 27/10/2024 AT ABOUT 14.20PM. VAN A WAS GOING TO JALAN BESAR ON LANE 2 BUT VEHICLE A WAS GOING STRAIGHT ON LANE 1. SO, VEHICLE B COLLIDED WITH THE RIGHT PORTION OF VAN A.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
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Was there any video captured by Car Camera? No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SKU3019L
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) -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person MOHD ISKANDAR SHAH ABDULLAH @ DARSHAN SINGH S/O
AJAIB SINGH
Gender Male
Phone No -
Address -
Address Complement -
Post Code -
Approximate Age Years Old -
Injuries Sustained -
Injured person in which vehicle? PD177M
Were seat belts worn? Yes
Was this injured conveyed to hospital by ambulance? No

SKETCH PLAN

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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' 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.

X



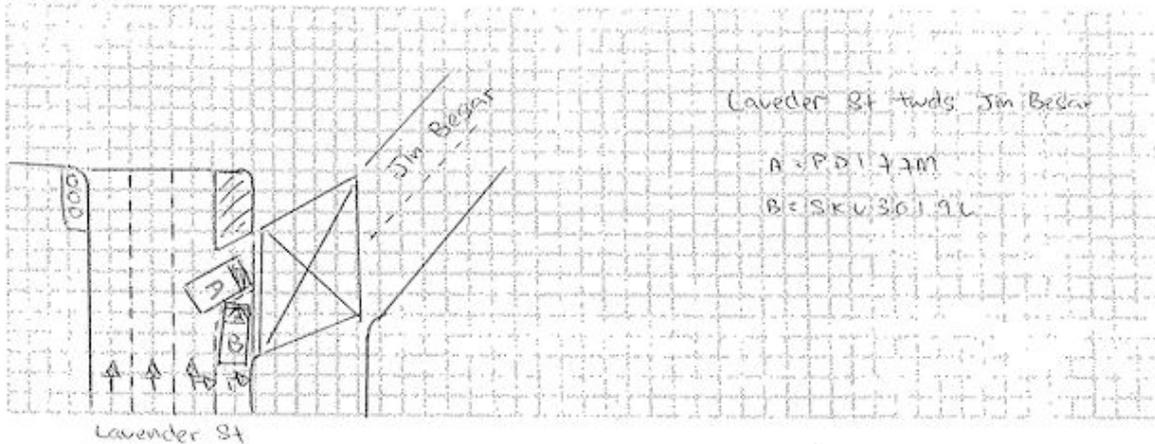
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

J. Kandar

Sketch Plan



Describe Circumstances of the Accident

I was driving along Lavender St towards Jln Besar on 27-10-2024 at about 12.20 pm.

Van A was going to Jln Besar on lane 2, but vehicle A was going straight on lane 1, so vehicle B collided with the right portion of van A.

Declaration

We declare the foregoing particulars are true in every respect.

X

Policyholder's Signature / Date & Time



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

Skandar

Witnessed by Reporting Centre Personnel


















**SINGAPORE
POLICE FORCE**

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



T/20241029/7068

1 of 3

Report No. T/20241029/7068

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/10/2024 14:36	Vide Report No.:	Station Diary No.:
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Informant's Particulars			
Name of Informant: MOHN ISKANDAR SHAH ABDULLAH @ DARSHAH SINGH S/O AJAIB SINGH		Address: 72 GEYLANG BAHRU #02-3034 SINGAPORE 330072	
ID Type / ID No.: NRIC NO / S1434937E		Contact No.:	Mobile: 85958407
Nationality: SINGAPORE CITIZEN		Email: rajesh@namhodmc.com	
Sex: Male	Age: 63	Date of Birth: 20/12/1960	Type of Informant: Driver
Race: Sikh		Language: English	
Occupation: DRIVER		Driving Licence Information: Class: 2B,2A,2,3,4,5	Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 27/10/2024 14:20	Type of Location: Straight Road
Location: LAVENDER STREET				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
PD177M	Motor van					0
SKU3019L	Motor car					1

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



**SINGAPORE
POLICE FORCE**



T/20241029/7068

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

2 of 3

Report No. T/20241029/7068

CONTINUATION OF REPORT

Driver			
Name	MOHN ISKANDAR SHAH ABDULLAH @ DARSHAH SINGH S/O AJAIB SINGH		ID No. S1434937E
Related Vehicle	PD177M (Motor van)		Contact No. 85958407
Hospital/Clinic	TAN TOCK SENG HOSPITAL		Class of Driving Licence & Expiry Date Class: 2B,2A,2,3,4,5 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave (MC)	04	Degree of Injury	Slight

Brief Details.

Along Lavender St twds Jln Besar on 27.10.2024 at about 14.20pm.

My van (PD177M) was going to Jln Besar on lane 2, but SKU3019L was going straight on lane 1, so SKU3019L collided with the right portion of my van (PD177M).



**SINGAPORE
POLICE FORCE**

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



T/20241029/7068

3 of 3

Report No. T/20241029/7068

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: 29/10/2024 14:36
Officer In Charge Of Case: TP / AEIT / PHNG KAR SOON Contact No.: 65476439	Classification Of Case:

NP168



Allianz Insurance Singapore Pte. Ltd.

CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP.189 OF THE REVISED EDITION) (REPUBLIC OF SINGAPORE)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 (REPUBLIC OF SINGAPORE)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1960
 OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

Certificate Number	: SP2008844556-01
Date of Issue	: 07 December 2023
Coverage	: COMPREHENSIVE – AUTHORISED WORKSHOP
Policyholder Name	: NAM HO DMC PTE. LTD.
Period of Insurance	: 22 January 2024 to 21 January 2025
Finance Company	: HL BANK
Registration No.	: PD177M
Chassis Number of Vehicle	: GDH2232004261

Persons or Classes of Persons Entitled to Drive*:

- (a) The Policyholder.
 (b) Any person provided he is in the Policyholder's employ and is driving on their order or with their permission.

* Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment or regulations in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act (Cap 276) (Republic of Singapore) and such registration has not been cancelled at the time of accident loss or damage.

Limitation as to Use^:

- (a) Use for carriage of passengers or goods in connection with the Policyholder's business.
 (b) Use only in the Republic of Singapore.

^ Limitation rendered inoperative by Section 8 of Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings

Policy does not cover:

- (a) Use for racing, pace-making, reliability trials or speed-testing.
 (b) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

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 (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

07 December 2023

Issue Date

Hicham Raissi
 Chief Executive Officer
 Allianz Insurance Singapore Pte. Ltd.

Intermediary Code : 0000384 VIRTUAL INSURANCE AGENCIES PTE LTD
 Excess : Section 1 : Own Damage
 : Section 1 : Windscreen
 : Section 2 : Liabilities to Third Parties

SGD	2000
SGD	200
SGD	1500

VIRTUAL INSURANCE AGENCIES PTE LTD
 112 Robinson Street #04-04
 Singapore Building, Singapore 167929
 Tel: (65) 63385063 Fax: (65) 63394000

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