

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 5. Intribution provided must be as truthful and accurate as possible. Any white mister estimation of withouting of material facts may allow insurance companies to reputial 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 24/06/2024 11:30 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 21/06/2024 19:15 (SGT) Exact Location of Accident Singapore Additional Location Information Tampines Avenue 5 Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Mercedes

Vehicle Registration Number **SMY2038T**

INSURED/POLICYHOLDER

Is company? Name Of Registered Owner Hervati Binte Abdul Ghaffar NRIC No SXXXX023J Email Address heryatiabdulghaffar@gmail.com Mobile Phone No (Phone) +65-91873312 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model A200 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 No - Claiming third party your vehicle? Vehicle Category Private car Transmission Auto 1332

INSURANCE COMPANY

Name of Insurance Company FWD Singapore Pte. Ltd. Policy Number / Cover Note Number PNPV2023-00000751-01

DRIVER

Name of Driver Heryati Binte Abdul Ghaffar NRIC No SXXXX023J Date Of Birth 02/05/1968 Occupation Indoor



Driving Pass Date	29/04/1993
Driving experience	31 YEARS AND 2 MONTHS
Gender	Female
Mobile Number	(Phone) +65-91873312
Alt. Phone Number	-
Email Address	heryatiabdulghaffar@gmail.com
Address	936 Tampines Avenue 5 #11-119
Address complement	· -
Postcode	520936
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	
CENTER OF THE MODELLI	
Type of Accident	Hit and run / Vandalism / Damaged whilst parked
Weather Conditions	Clear
Road Surface	Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the assistant?	Na
Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident	No
	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	0
Has the driver been approached by unknown person(s)	N
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 assident reported to the police?	V.
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	
Please refer to Police report no: T/20240621/7109	
Please refer to Police report no: T/20240621/7108	
ATTACHMENT(S)	
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No No
Trac troto driy video captared by Odi Odificia:	INU
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number	SLF8475L
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

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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.
- 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 tirms, 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,

Sketch Plan

(A) Smy20387.

Nes the (B) Sch8475 L

Witnessed by Reporting Centre Pe (Name as in NRIC/IB card)

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0 12	712	organ Parisman	60
Polico report	1 30500	1651/410	, B
		10	
claration		1	CAR CARE
declare the foregoing particulars are true in every respect.		(6	
	1.1	, A	刻人
111/1 22/6/24 Melineto	22/6/201	Linual	* 011379



7/20240621/7108

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 85470000 1 of 3 Report No. T/20240621/7108

REPORT OF A TRAFFIC ACCIDENT

	e/Time Report Made: 06/2024 21:12		Vide Report No.: G/20240621/0172	Station Diary No.:
Informant	's Particula:	rs .		
Name of I Heryati Bi	informant: inte Abdui C	Shaffar	Address: 936 Tampines Ave 5 #11-119	
ID Type / NRIC NO	ID No.: / S6817023	3J	Contact No.: Home/Office:	Mobile: 91873312
Nationality SINGAPO	y: ORE CITIZE	N	Email: heryetiabdulghaffar@gmail.co	om
Sex: Female	Age: 56	Date of Birth; 02/05/1968	Type of Informant: Vehicle Owner	
Race: Malay	10 To		Language: English	1000 - 10
Occupation: Secondary school teacher		acher	Driving Licence Information: Class:	Date of Expiry:

Type of Accident:	Non-Injury Attended by Police	Drink Drive No	Date/Time of Accident 21/06/2024 19:15	t: Type of Location Car Park
Location: TAMPINES AVEN	JE 5	1		
Alam Manage		TD 10 1		
		Road Surface: Dry		
Weather: Clear Traffic Flow: Two Way		200000000000000000000000000000000000000		raffic Volume: o Traffic

Vehicle No.	Туре	Make	Mode!	Color	Condition	No of Passenger
SLF8475L	Motor car	NISSAN	nic millionizazoreana	Grey		0
SMY2038T	Motor car	MERCEDES	A200	Black	Seriously	0

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



T/20240621/7108

Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 498865 Tel No: 65470000 2 of 3 Report No. T/20240621/7108

CONTINUATION OF REPORT

Name	Heryati Binte Abdul Ghaffar		ID No),	\$6817023J		
Related Vehicle	NIL		NIL		Conta	ict No.	91873312
Hospital/Clinic	NIL			Class Drivin Licen Expin	g	Class: NIL Date of Expiry: NIL	
Date Treatment	NIL	1100-25-10-7-2	Date Disch	narge	NIL	p Source and a second constitution	
No. of Days grante	Pays granted Medical Leave (MC) NIL			Injury	NIL		

Brief Details

At Blk 936 Tampines Ave Carpark, my vehicle was parked and a car hit on the right side of my car at around 710-715pm. The car drove off. There are 3 - 5 witnesses. They provided the car plate number and even showed where it was parked.



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



3 of 3 Report No. T/20240621/7108

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: 21/06/2024 21:12
Officer In Charge Of Case: TP / TPIB / MUHAMMAD GHAZALI BIN ABDUL RAZAK Contact No.: 65476367	Classification Of Case;
NP168	