

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	17/01/2025 18:03 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	31/10/2024 17:50 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	LANGSAT ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJV5552G
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	SITI KHATIJA BINTI SEMAN
NRIC No	S8520281B
Email Address	TIJZ11.SK@GMAIL.COM
Mobile Phone No	(Phone) +65-90052454
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Kia
Model	Rio
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	No - Reporting only
Vehicle Category	Private car
Transmission	Auto
CC	1600
Vehicle Fuel	-
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	India International Insurance Pte Ltd
Policy Number / Cover Note Number	-

DRIVER

Name of Driver	SITI KHATIJIA BINTI SEMAN
NRIC No	S8520281B
Date Of Birth	27/06/1985
Occupation	Indoor
Driving Pass Date	22/05/2008
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	16 YEARS AND 5 MONTHS
Gender	Female
Mobile Number	(Phone) +65-90052454
Alt. Phone Number	-
Email Address	TIJZ11.SK@GMAIL.COM
Address	33 TEBAN GARDENS ROAD #03-269
Address complement	-
Postcode	600033
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 - 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?	No
Was any injured conveyed to hospital by ambulance?	-
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 SKETCH PLAN

ATTACHMENT(S)

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


DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLB6319C
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)	-


Describe Circumstance of the Accident	
DOA:	31 OCT 25
TIME:	1750hrs
LOCATION:	Along Lansat Rd
<p>On 31/10/24 @ 6pm at a small junction near Everett Road. I turned to the right checking my blindspot, where I did not see any oncoming vehicles. I moved forward while suddenly, an oncoming car approached me at a high speed. In an effort to avoid collision, I sudden brake when the front part of that^{my} car was brushed by the left oncoming car. I navigate through the intersection to come to a stop, however, I did not see any other cars stopping and subsequently I drove off. Upon reaching home at the carpark, I noticed my to^{to} car plate number was missing. I lodge a police report after the incident</p>	

Declaration

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


Policyholder's Signature / Date & Time

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


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

SKETCH PLAN

IMPORTANT NOTICE


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5. **Any false reporting may be referred to the Traffic Police Department for investigation.**
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8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

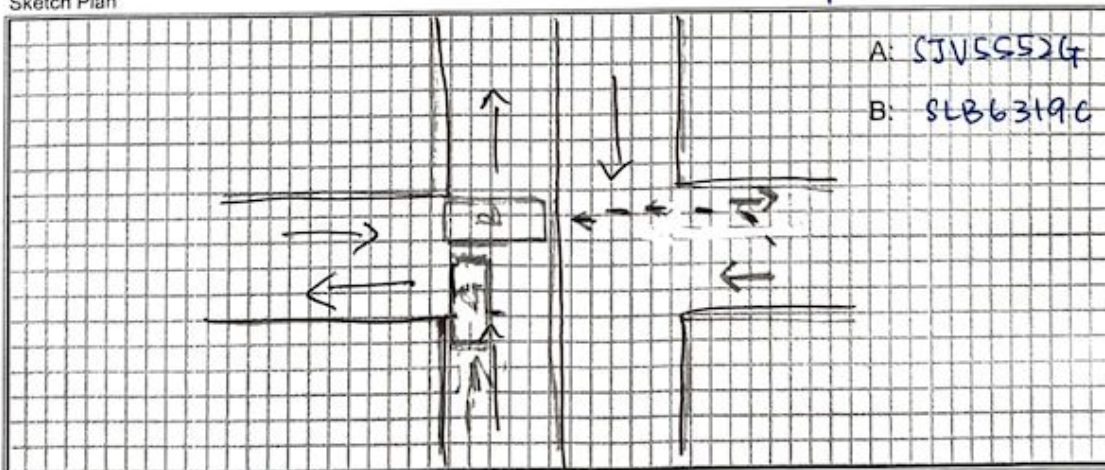
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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


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


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

Sketch Plan













**SINGAPORE
POLICE FORCE**



T/20241031/7090

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

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Report No. T/20241031/7090

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 31/10/2024 23:06		Vide Report No.: D/20241031/0149		Station Diary No.:
Informant's Particulars				
Name of Informant: SITI KHATIJIA BINTI SEMAN		Address: 33 Teban Gardens Road #03-269 Nil SINGAPORE 600033		
ID Type / ID No.: NRIC NO / S8520281B		Contact No.: Home/Office: Mobile: 90052454		
Nationality: SINGAPORE CITIZEN		Email: tijz11.sk@gmail.com		
Sex: Female	Age: 39	Date of Birth: 27/06/1985	Type of Informant: Driver	
Race: Malay		Language: English		
Occupation: Registered nurse and other nursing professionals		Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident: Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 31/10/2024 18:00	Type of Location: T-Junction	
Location: EVERITT ROAD				
Weather: Clear		Road Surface: Dry		
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled	Traffic Volume: No Traffic	
Type of Collision: Between Moving Vehicles - Side Swipe - Opposite Direction			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJV5552G	Motor car	KIA	RIO 1.4 AT ABS AIRBAG 2WD 5DR	White		0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
SJV5552G	INDIA INTERNATIONAL INSURANCE PTE LTD	D24MPCM000138	08/01/2024	28/01/2025



**SINGAPORE
POLICE FORCE**



T/20241031/7090

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

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Report No. T/20241031/7090

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	SITI KHATIJIA BINTI SEMAN	ID No.	S8520281B
Related Vehicle	SJV5552G (Motor car)	Contact No.	90052454
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.

Subject: Report of Car Accident

Date: 31.10.24
Time: 1800 hrs
Ref No: D-20241031/0149

Dear Sir/Madam,

I am writing to report a car accident that occurred earlier today, around 6 PM, at a small T-junction near 37 Everitt Road which was ahead of me. Unfortunately, I do not have any videos to attached.

While driving, I approached the junction and glanced to my right checking on my blindspot, where I did not see any oncoming vehicles. I moved forward to the intersection while suddenly, an oncoming car approached me at high speed. In an effort to avoid a collision, I immediately engaged my emergency brakes. Unfortunately, the front part of my car was brushed by the left side of the other car. I continued to navigate through the intersection to come to a stop, however, I did not see any other cars stopping and subsequently i drove off to my destination.

Upon reaching home, I noticed that my vehicle plate number was missing. I am concerned about this and would appreciate guidance on the appropriate steps ahead.

Please let me know if further details are needed.

Thank you.
Yours Sincerely,
Siti Khatija Binti Seman
S8520281B
Vehicle No: SJV5552G
Hp No: 90052454



**SINGAPORE
POLICE FORCE**

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



T/20241031/7090

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Report No. T/20241031/7090

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / HRT /
NUR HAFIZAH BINTE NORIZAN
Contact No.: 96189347

NP168

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

Date/Time:
31/10/2024 23:06

Classification Of Case: