

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	08/08/2024 16:02 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	08/08/2024 07:05 (SGT)
Exact Location of Accident	Near 91 Ang Mo Kio Ave 4, Singapore 569900
Additional Location Information	ALONG ANG MO KIO AVENUE 4
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLP7296R
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	ANDIKA PUTRA BIN SUHAIMI
NRIC No	SXXXX589A
Email Address	ELSKA.ALZEEQ83@GMAIL.COM
Mobile Phone No	(Phone) +65-86861024
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Volvo
Model	S60
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?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1498
Vehicle Fuel	Petrol
First Registration Date	26/05/2017
Chassis no	YV1FS28C0H2441110
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5133912156-01

DRIVER

Name of Driver	ANDIKA PUTRA BIN SUHAIMI
NRIC No	SXXXX589A
Date Of Birth	24/10/1983
Occupation	Indoor
Driving Pass Date	10/04/2014
Driving License Pass Class	3A
Driving License Validity	Valid
Driving experience	10 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-86861024
Alt. Phone Number	-
Email Address	ELSKA.ALZEEQ83@GMAIL.COM
Address	BLK 322A SUMANG WALK #07-905
Address complement	-
Postcode	821322
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 - Major/Minor Rd
Weather Conditions	Clear
Road Surface	Wet

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)	2
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	-

PASSENGER 1

Name	HAZIQ DARWISH BIN ANDIKA PUTRA
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Punggol Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18006049999
Alt. Police Station Phone No	(Fax) +65-64468015
Police Station Address	Blk 21A Tebing Lane Singapore 828837
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

ON THE ABOVE-MENTIONED DATE AND TIME FRAME, I WAS TRAVELLING ON MY WHEELER SLP7296R ALONG ANG MO KIO AVENUE 4 TOWARDS MAYFLOWER MRT STATION ON A 2 LANE ROAD. I WAS TRAVELLING ON THE RIGHT LANE OF THE 2 LANE ROAD. WHEN I APPROACHED CLOSER TO THE MRT STATION, THERE WAS A SLIGHT CONGESTION ON THE ROAD DUE TO THE TRAFFIC LIGHT AT THE NEXT JUNCTION. I THEN SLOWED DOWN MY VEHICLE JUST BEHIND A YELLOW BOX WHEN NEAREST TO HDB CARPARK AMA 26 AS THERE WAS NO SPACE FOR MY VEHICLE TO MOVE FORWARD. WHEN I OBSERVED SPACE TO MOVE FORWARD AND TRAVELLED INTO THE YELLOW BOX, FROM THE HDB CARPARK AMA 26, A 4-WHEELER MOTORIST SMF7850G HAD EXITED THE CARPARK AND CAME INTO MY LANE WITHOUT SIGNALING. THE SAID DRIVER DID NOT FOLLOW THE FLOW OF TURN BY TURNING LEFT ONTO THE FIRST LANE BUT CAME INTO THE 2ND LANE THAT I WAS TRAVELLING CAUSING A COLLISION ON THE LEFT FRONT WHEEL ARCH AREA. I WISH TO INFORM THAT MY 2 YEAR OLD SON WAS TRAVELLING IN THE VEHICLE WITH ME AT THE POINT OF ACCIDENT. THERE WAS NO PEDESTRIAN INVOLVED. THERE IS NO GOVERNMENT PROPERTY DAMAGED, NOT INVOLVING ANY FOREIGN VEHICLE. I WISH TO INFORM TAHT I HAVE A RECORDING OF THE ACCIDENT ON MY MOBILE PHONE CAPTURED VIA MY IN-CAR DASHCAM.

ATTACHMENT(S)

Are accident photos available for attachment? Yes
Was there any video captured by Car Camera? Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SMF7850G
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) 1

INJURED PERSONS DETAILS

INJURED 1

Name of injured person ANDIKA PUTRA BIN SUHAIMI
Gender Male
Phone No (Phone) +65-86861024
Address -
Address Complement -
Post Code -
Approximate Age Years Old -
Injuries Sustained -
Injured person in which vehicle? SLP7296R
Were seat belts worn? Yes
Was this injured conveyed to hospital by ambulance? No

INJURED 2

Name of injured person HAZIQ DARWISH BIN ANDIKA PUTRA
Gender Male
Phone No -
Address -
Address Complement -
Post Code -
Approximate Age Years Old -
Injuries Sustained -
Injured person in which vehicle? SLP7296R
Were seat belts worn? Yes
Was this injured conveyed to hospital by ambulance? No

SKETCH PLAN

IMPORTANT NOTICE

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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:

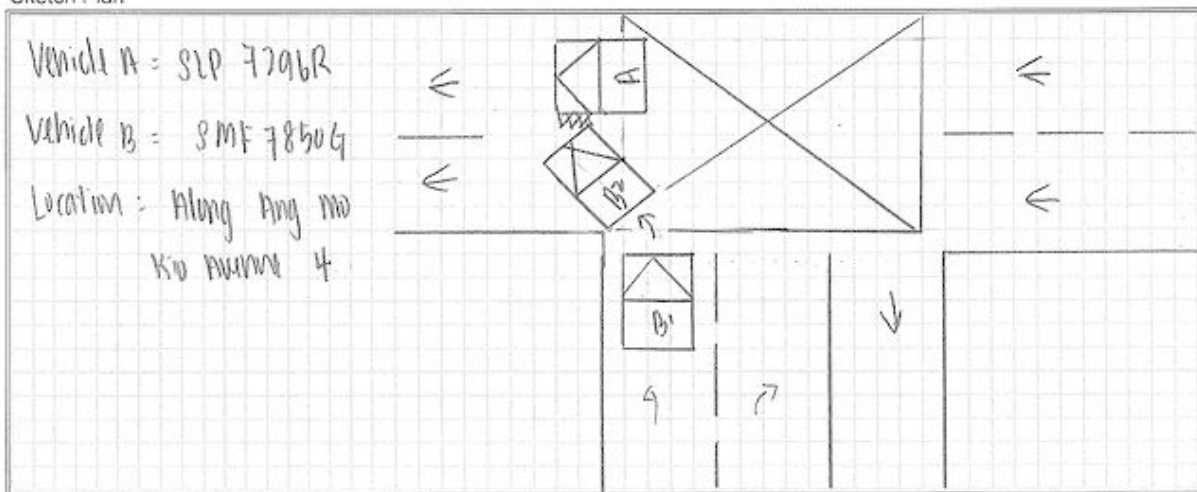
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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


Policyholder's Signature / Date & Time


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


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

Sketch Plan



vJun2022

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[illegible]

Declaration

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

Policyholder's Signature / Date & Time

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



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













**SINGAPORE
POLICE FORCE**



T/20240808/2053

1 of 4

Police Station Of Origin:
Punggol N.P.C
151 Punggol Central SINGAPORE 828727
Tel No: 1800-6049999

Report No, T/20240808/2053

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/08/2024 14:07	Vide Report No.:	Station Diary No.: 57
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Informant's Particulars

Name of Informant: ANDIKA PUTRA BIN SUHAIMI	Address: 322A SUMANG WALK #07-905 SINGAPORE 821322		
ID Type / ID No.: NRIC NO / S8335589A	Contact No.: Home/Office: Mobile: 86861024		
Nationality: SINGAPORE CITIZEN	Email:		
Sex: Male	Age: 40	Date of Birth: 24/10/1983	Type of Informant: Driver
Race: Malay	Language:		
Occupation: ICA Officer	Driving Licence Information: Class: 3A Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 08/08/2024 07:05	Type of Location: Straight Road
Location: ANG MO KIO AVENUE 4				
Weather: Clear		Road Surface: Wet		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
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
SLP7296R	Motor car				Slightly Damaged	1
SMF7850G	Motor car				Slightly Damaged	0

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20240808/2053

Police Station Of Origin:
Punggol N.P.C
151 Punggol Central SINGAPORE 828727
Tel No: 1800-6049999

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Report No. T/20240808/2053

CONTINUATION OF REPORT

Driver			
Name	ANDIKA PUTRA BIN SUHAIMI		ID No. S8335589A
Related Vehicle	SLP7296R (Motor car)		Contact No. 86861024
Hospital/Clinic	NORTHSHORE FAMILY CLINIC		Class of Driving Licence & Expiry Class: 3A Date of Expiry: NIL
Date Treatment	08/08/2024	Date Discharge	08/08/2024
No. of Days granted Medical Leave	03	Degree of	Slight
Passenger			
Name	Haziq Darwish Bin Andika Putra		ID No. T2124107A
Related Vehicle	SLP7296R (Motor car)		Contact No. 86861024
Hospital/Clinic	NORTHSHORE FAMILY CLINIC		Class of Driving Licence & Expiry Class: NIL Date of Expiry: NIL
Date Treatment	08/08/2024	Date Discharge	08/08/2024
No. of Days granted Medical Leave	01	Degree of	Slight
Driver			
Name	Geraldine		ID No. S7371462A
Related Vehicle	SMF7850G (Motor car)		Contact No. 80276286
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

On the above-mentioned date and time frame, I was travelling on my 4 wheeler SLP7296R along Ang Mo Kio avenue 4 towards Mayflower Mrt Station on a 2 lane road. I was travelling on the right lane of the 2 lane road. When I approached closer to the mrt station, there was a slight congestion on the road due to the traffic light at the next junction. I then slowed down my vehicle just behind a yellow box when nearest to HDB Carpark AMA 26 as there was no space for my vehicle to move forward. When I observed space to move forward and travelled into the yellow box, from the HDB Carpark AMA 26, A 4 wheeler motorist SMF7850G had exited the carpark and came into my lane without signaling. The said driver did not follow the flow of turn by turning left onto the first lane but came into the 2nd lane that I was travelling causing a collision on the left front wheel arch area. I wish to inform that my 2 year old son was travelling in the vehicle with me at the point of accident. There was no pedestrian involved. There is no



**SINGAPORE
POLICE FORCE**



T/20240808/2053

3 of 4

Police Station Of Origin:

Punggol N.P.C

151 Punggol Central SINGAPORE 828727

Tel No: 1800-6049999

Report No. T/20240808/2053

CONTINUATION OF REPORT

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government property damaged, Not involving any foreign vehicle. I wish to inform that I have a recording of the accident on my mobile phone captured via my in-car dashcam.



**SINGAPORE
POLICE FORCE**



T/20240808/2053

Police Station Of Origin:
Punggol N.P.C
151 Punggol Central SINGAPORE 828727
Tel No: 1800-6049999

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Report No. T/20240808/2053

CONTINUATION OF REPORT

Signature of Officer Recording The
F /
SGT 3 SHARVIN S/O P SEGAR

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / AEIT /
SR STAFF SGT FAHKRUL RAZI BIN SUHAIME
Contact No.: 65476404

Signature Of Informant:

Date/Time:
08/08/2024 14:07

Classification Of Case:

NP168

