

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 Authorised 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 ability.
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 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 Report	16/11/2017 11:02
Date Of Accident	14/11/2017 16:30
Exact Location Of Accident	SLE TOWARDS WOODLANDS BEFORE MANDARIN EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLF7054A
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Insured/Policyholder

Name Of Registered Owner	LION CITY RENTALS PTE LTD
Co Reg No	201504621K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-31584255

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	LANCER EX-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	UBER
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE HIRE

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	999995174
Cover Note Number	

Driver

Name of Driver	MOHAMED FADELI BIN SAPI'EH
NRIC No	S8026421F
Date Of Birth	12/09/1980
Occupation	OUTDOOR
Date Of Driving Pass	20/03/2001
Driving Experience	16 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address
Postcode

Was driver an employee of the Insured's Company NO
If No, Relationship of the Driver with the Insured OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle -
-
-
Insurance Company of Driver's Own Vehicle -
-
-

General Information of the Accident

Type Of Accident COLLISION - HEAD TO REAR
Weather Conditions CLEAR
Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO
Was any body injured in the Accident? YES
Was any other material or property damaged? YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance. NO
Number of Passengers (Including Driver) 2

Details of Police Action

Was the accident reported to the police? YES
If Yes, Please state which Police Station
Police Station Name GEYLANG SERAI NEIGHBOURHOOD POLICE POST
Police Station Address **ROAD:** BLK 111 ALJUNIED CRESCENT #01-102 , **POSTCODE:** 380111 ,
COUNTRY: SINGAPORE
Police Station Contact **TEL NO:** 1800-7459999 - **FAX NO:** 67455673
Was notice of intended Prosecution given? NO
If Yes, against whom?

Circumstances of Accident

REFER TO ATTACHMENT

Attachment(s)

Are accident photos available for attachment? YES
Was there any video captured by Car Camera? NO
Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLS9142Y
Vehicle Make/Model/Colour VOLKSWAGEN TOURAN/GREY
Details Of Properties
Name of Driver YIEW KIM TECK
NRIC/Passport Number S7883779I
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Details of Witness

Name
Phone Number
Email Address

DETAILS OF INJURED PERSON 1

Name PASSENGER

Approximate Age	
Injuries Sustain	BOTH SHIN SWOLLEN
Injured person in which vehicle?	SLF7054A
Were seat belts worn?	YES
Was injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Sketch Plan

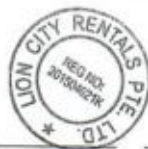
SKETCH PLAN

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7. By the lodgment 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.



Policyholder's Signature
Date & Time:

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



Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 14/11/17 at about 1630hrs, I was driving my vehicle (SLE 7054A) along SLE with one passenger (HP: 96571183) heading towards Woodlands. I was driving on Lane 1 at about 80km/h after which I spotted several cars ahead of me applying sudden braking. However, I couldn't stop in time & collided on to the vehicle in front of me.

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:



Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8026421F



Name
MOHAMED FADELI BIN SAPI'EH

Race
BOYANESE

Date of birth
12-09-1980

Country of birth
SINGAPORE

Sex
M

FOR C&C USE ONLY

REPUBLIC OF SINGAPORE DRIVING LICENCE


Licence Number: **S8026 1 F**

Holder
MOHAMED FADELI BIN SAPI'EH

Birth Date: **12 Sep 1980**

Issue Date: **12 Mar 2003**

1000288787C



S8026421F



Date of issue
20-01-2011

APT BLK 264A PUNGGOL WAY #02-310 SINGAPORE 621264

NRIC No: **S8026421F** Date: **07/07/2016**

FOR C&C USE ONLY

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

Class	Description	Pass Date
Class 2B	Motorcycles <= 200 CC	20 Aug 2001
Class 2A	Motorcycles between 201 CC and 400 CC	10 Dec 2001
Class 2	Motorcycles > 400 CC	15 Mar 2005
Class 3	Motor cars <= 2000 kg with <= 7 passengers, exclusive of the driver; and motor tractors/vehicles <= 2500 kg	28 Mar 2001
Class 4	Heavy motor cars and motor tractors > 2500 kg	10 Feb 2013

S / No. 9000156603

Licence No: **S8026421F**



Nº 426A

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Accident Photo



Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



T201711152118

Police Station Of Origin:
Geylang Seral NPP
111 Aljunied Crescent #01-102 SINGAPORE
380111
Tel No: 1800-7459999

1 of 3

Report No: T201711152118

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 15/11/2017 15:23	Vide Report No.:	Station Diary No.: 17
Informant's Particulars		
Name of Informant: MOHAMED FADEL BIN SAPIEH		Address:
ID Type / ID No.: NRIC NO / S8026421F	Contact No.: Home/Office:	Mobile:
Nationality: SINGAPORE CITIZEN	Email:	
Sex: Male	Age: 37	Date of Birth: 12/09/1980
Type of Informant: Driver		
Race: Boyanesse	Language:	Institution / School Name:
Occupation: UBER DRIVER	Driving Licence Information: Class: 2B,2A,2,3,4	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 14/11/2017 16:30	Type of Location: EXPRESSWAY
Location: Along Road 1 SELETAR EXPRESSWAY SELETAR EXPRESSWAY TOWNS WOODLANDS BEF MANDAI EXIT				
Weather: Clear	Road Surface: Dry	Road Speed Limit:		
Traffic Flow: Dual Carriage Way	Traffic Control: Not Controlled	Traffic Volume: Heavy		
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLF7054A	Car				Seriously Damaged	1
SLS9142Y	Car				Slightly Damaged	0

Details of Person Involved

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

Police Report



SINGAPORE
POLICE FORCE



T201711152118

Police Station Of Origin:
Geylang Serai NPP
111 Aljunied Crescent #01-102 SINGAPORE
380111
Tel No: 1800-7459999

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Report No. T201711152118

CONTINUATION OF REPORT

Driver			
Name	MOHAMED FADEL BIN SAPI'EH	ID No.	S8026421F
Related Vehicle	SLF7054A (Car)	Contact No.	
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	TIEW KIM TECK	ID No.	S7883779I
Related Vehicle	SLS9142Y (Car)	Contact No.	NIL
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	NIL	Degree of Injury	NIL

Brief Details

On 14/11/2017 at about 1830hrs, I was driving my Uber vehicle (SLF7054A) along Seletar Expressway with one passenger (Hp:96571163) heading towards Woodlands. I was driving on lane 1 at about 80km/h after which I spotted several cars ahead of me was applying sudden braking. However, I could not stop in time and collided on to the vehicle in front of me.

I alighted and made a check with the driver of the said vehicle (SLS9142Y) and was informed that he did not sustained any injury. We then exchanged particulars.

I did not suffer any injury as well, however I noticed both side of my passenger's shin area had become swollen. I asked her if she needed any immediate medical attention however she declined. Shortly after, her next-of-kin had then arrived at scene and they both left for home.

My vehicle suffered damages on the front portion and was towed off and the other vehicle suffered slight dent on the rear portion.

On 15/11/2017 at about 1100hrs, I received a call from my passenger stating that she will heading to the hospital as her back, shoulder and neck area were hurting.

Police Report



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Geylang Serai NPP
111 Aljunied Crescent #01-102 SINGAPORE
380111
Tel No: 1800-7459999



7/20171115/2118

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Report No. 7/20171115/2118

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474888 stating the **report number** as reference.

Signature Of Officer Recording The Report:
G /
Sgt 3 SYAFIQ RIDHWAN BIN HASSAN

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / AEIT /
SSI 2 YEO GEAK ENG CECILIA
Contact No.: 65478404

Signature Of Informant:

Date/Time:
15/11/2017 15:23

Classification Of Case:



Authentication Stamp

Signature

Singapore Police Force