

## 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	04/12/2017 12:14
Date Of Accident	03/12/2017 09:15
Exact Location Of Accident	CTE TWDS CITY AFTER CTE/PIE (TUAS) EXIT 8A
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKV5778K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	HOPE FIRST RESPONSE PTE LTD
Co Reg No	200915893N
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97129731
Alternative Phone No	OFFICE-97129731

### Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	SPRINTER 316 CDI KA AUTO
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	999994976/100830507
Cover Note Number	

### Driver

Name of Driver	MUHAMMAD ROSDHI BIN ROSLI
NRIC No	S8629751E
Date Of Birth	25/10/1986
Occupation	INDOOR
Date Of Driving Pass	25/02/2009
Driving Experience	8 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92266992
Fax Number	
Contact Number	OFFICE-92266992
Email Address	NOEMAIL

Address	BLK 662A EDGEDALE PLAINS #09-664
Postcode	821662
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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?	NO
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)	4

#### Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO STATEMENT.

#### 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	SJT5655D
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### Details of Witness

Name	
Phone Number	
Email Address	

## Accident 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.:

# Accident Sketch Plan

## SKETCH PLAN

VEHICLE A - SKV 5778K  
VEHICLE B - SJT 9655D

CTE TOWARDS CITY AFTER CTE/PRE TUNN EXIT 8A



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


I WAS TRAVELLING ON THE RIGHT SIDE SHOULDER LANE, WITH MY SIREN ON, ON EMERGENCY CASE ROUTING TO ITSH.  
WHILE DRIVING STRAIGHT AHEAD AFTER PASSING EXIT 8A (CTE/PRE TUNN)  
I START TO FILTER IN AS MY INTENTION TO EXIT SOON IN TWO MORE EXIT.  
AND DUE TO THE HEAVY TRAFFIC THE VEHICLE INFRONT BRAKE AND SLOW DOWN, AND ABRUPTLY STOPPED CAUSE ME NOT ABLE TO STOP IN TIME AND HIT SLIGHTLY TO THE REAR OF THE VEHICLE BEHIND (SJT 5655D).

VEHICLE A - SKV 5778K  
VEHICLE B - SJT 5655D

## 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.:



Transaction ref 20160825175656372692

The owner and vehicle particulars for Vehicle No. SKV5778K as at 25 Aug 2016 are as follows:

1.	Name	: HOPE FIRST RESPONSE PTE. LTD.
2.	Identification No. Type	: Company
3.	Identification No.	: 200915893N
4.	Place Of Passport Issue	: -
5.	Vehicle No.	: SKV5778K
6.	Previous Vehicle No.	: -
7.	Effective Date of Ownership	: 23 Sep 2015
8.	Original Registration Date	: 23 Sep 2015
9.	First Registration Date	: 23 Sep 2015
10.	Vehicle Type	: E63 - Road Tax Exempted Ambulance
11.	Vehicle Scheme	: Ambulance
12.	Attachment 1	: Emergency
13.	Attachment 2	: -
14.	Attachment 3	: -
15.	Vehicle Make	: MERCEDES BENZ
16.	Vehicle Model	: SPRINTER 316 CDI KA AUTO
17.	Year of Manufacture	: 2014
18.	Primary Colour	: White
19.	Secondary Colour	: -
20.	Passenger Capacity	: 5
21.	Chassis/Trailer Chassis No.	: WDB9066332S992690
22.	Propellant	: Diesel
23.	Engine No./Motor No.	: 65195532583596
24.	Engine Capacity(cc)/Power Rating(kW)	: 2,143.0
25.	Unladen Weight(kg)	: 2940
26.	Maximum Laden Weight(kg)	: 3880
27.	Open Market Value	: \$135,962.00
28.	PARF Eligibility	: No
29.	PARF Eligibility Expiry Date	: -
30.	Minimum PARF Benefit	: -
31.	No. of Transfers	: 0
32.	IU Label No.	: 40053449
33.	COE No.	: -
34.	COE Expiry Date	: -
35.	COE Category	: -
36.	Quota Premium/Prevailing Quota Premium	: -
37.	Actual Quota Premium/PQP Paid	: -
38.	Actual ARF Paid	: \$0.00
39.	CO2 Emission(g/km)	: -
40.	Actual CEVS Rebate Utilised	: -
41.	CEVS Surcharge Paid	: -
42.	Actual Green Vehicle Rebate Utilised	: -
43.	Vehicle Lifespan Expiry Date	: 22 Sep 2035
44.	Road Tax Amount	: \$0.00
45.	Road Tax Start Date	: 23 Sep 2015
46.	Road Tax End Date	: 22 Sep 2016
47.	Remarks	: The vehicle will be de-registered upon reaching its statutory lifespan on 22 Sep 2035.

04/12/2017

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Annex E

## NOTICE OF COMPLIANCE

This is to confirm that Muhammad Rosdhi Bin Rosli residing at Block 662A Edgedale Plains #09-664, NRJC/FIN S8529751E, has reported to the Police a non-injury traffic accident which occurred along CTE(CITY) nearby Exit 8A PIE(TUAS), right-most lane, on 03/12/2017 at 1015hrs involving the following vehicles:

- 1) Complainant's: SKV5778K (HOPE Private Ambulance Vehicle),
- 2) Other vehicle: SJT3655D (Grey color Honda City).

If this accident was reported to the Police within 24 hours of its occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: SGT(2) T130078 Muhammad Hanafi

Date: 03/12/2017 Time: 2315hrs

S/D Ref: 80

Police Post/Unit: Punggol Neighbourhood Police Centre

Punggol NPC  
24A Telok Lane  
S (828837)  
Tel: 1800-4259293

Original - to be issued to Informant  
Duplicate - to be submitted to Traffic Police

CONFIDENTIAL

Accident Photo





Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo

