

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	03/01/2018 18:26
Date Of Accident	02/01/2018 16:30
Exact Location Of Accident	ALONG SCOTTS ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GY5165K
Insured/Policyholder	
Name Of Registered Owner	TIRTA SARI PTE LTD
Co Reg No	200408116R
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97756857
Alternative Phone No	OFFICE-97756857

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	CADDY
Exact Purpose for which vehicle was being used at time of accident	DOING DELIVERY
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5024406885-10
Cover Note Number	

Driver

Name of Driver	SYED NAJIB BIN IBRAHIM
NRIC No	S1463365J
Date Of Birth	30/01/1961
Occupation	OUTDOOR
Date Of Driving Pass	02/07/1979
Driving Experience	38 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97756857
Fax Number	
Contact Number	OTHERS-97756857
Email Address	NOEMAIL

Address	BLK 541 BEDOK NORTH STREET 3 #04-1232
Postcode	460541
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	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	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)	1

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

PLEASE REFER TO SKETCH PLAN

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	YP3000A
Vehicle Make/Model/Colour	TOYOTA LORRY
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	CHUA CHOR PENG
NRIC/Passport Number	S0241202J
Contact Number	62524237
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

SKETCH PLAN

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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.
- (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.

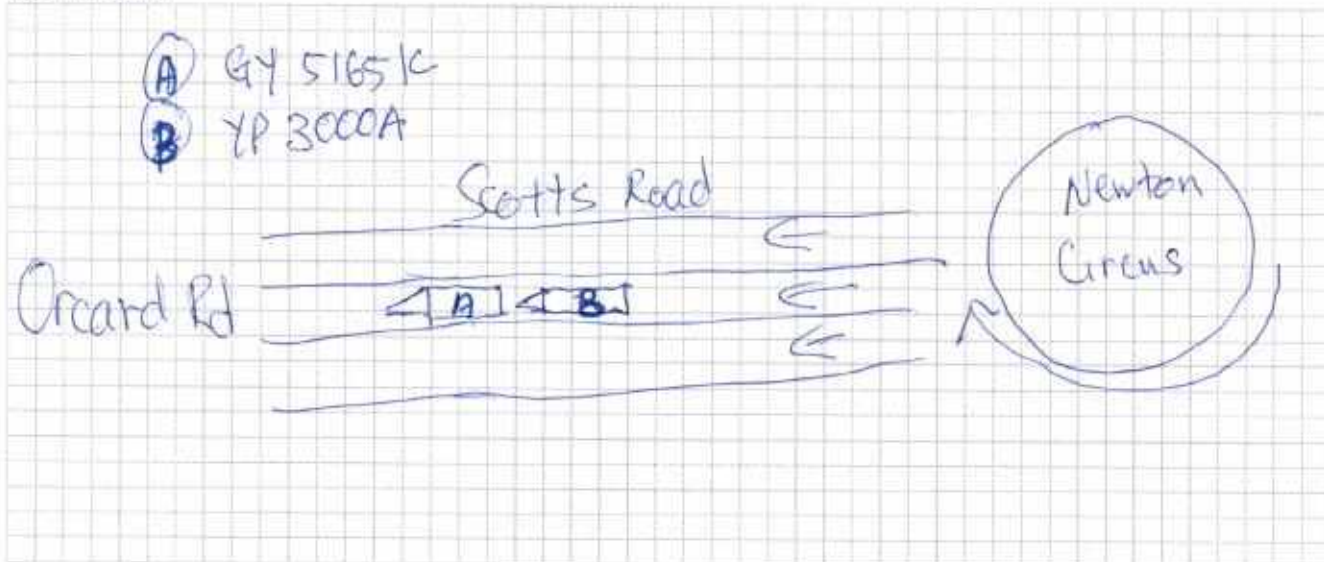


Policyholder's Signature
Date & Time:

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

03/01/2018
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was on the way to Orchard Road along Scotts Road, when the lorry hit me from behind. It was raining. My vehicle number is GY 5165K and the other party is YP 3000A.

DECLARATION

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



Policyholder's Signature
Date & Time:

[Signature]

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

[Signature] 03/01/2018
Reporting Centre Personnel's Signature
Name: *[Signature]*
NRIC/FIN No.:

Claim Handling

Accident MT/0976282

Policy No.	5024406885-10	Vehicle No.	GY5165K	GST Registration No.	
Policyholder Name	TIRTA SARI PTE LTD			Policyholder NRIC	
Product Code	COMMERCIAL VEHICLE INSURAN	Cover Type	Third Party	Loading	
Contact No.(Mobile)	97756857	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	
KFX	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	Not available

Report Date

03/01/2018 18:31

Accident Report Within 24 hrs

Yes

Accident Type

Collision - Head

Date of Accident

02/01/2018

Time of Accident hh:mm

18:30

Country of Accident

Singapore

Reporting Centre

Orange Force

ICM No.

Accident Location

ALONG SCOTTS ROAD

Own damage Excess

0.00

Additional Excess

Windscreen Excess

Unnamed Driver Excess

Outside Singapore OD Excess

Third Party Excess

0.00

Outside Singapore TP Excess

GST Registered

Yes

GST Registration Date

01/01/2015

GST Registration No.

200408116R

GST Status Verified

No

Modification History

Address 1

47 TAMPINES INDUSTRIAL AVE

Address 2

TS @ TAMPINES

Address 3

Address 4

Address Type

Singapore address

Post Code

Unit No.

Related Policy Number

5024406885-10

Driver Name

Unnamed Driver

Driver Type

Unnamed Driver

Unnamed driver Name

SYED NAJIB BIN IBRAHIM

Driver NRIC

S1463365J

Driver DOB

Register Date of Driver License

02/07/1979

Driver Age

117

Driving Experience

Contact No.(Mobile)

Contact No.(Office)

Contact No.(Home)

Address 1

BLK 541 #04-1232

Address 2

BEDOK NORTH STREET 3

Address 3

Address 4

SINGAPORE 460541

Address Type

Foreign address

Post Code

Unit No.

04-1232

Driver Vehicle No.

GY5165K

Driver Insurer Company

Does he own a Singapore Registered car?

☐ Yes ☒ No

Declaration

Breathalyser or Blood Test Reading?

0 mg

Any injury?

☐ Yes ☒ No

Modification History

Claim 001

New

Claim Type *	OD-MX	Insured Name	TIRTA SARI PTE LTD	Insured NRIC	
Contact No.(Mobile)	96964796	Contact No.(Home)	68486111	Contact No.(Office)	
Email Address	megaindo@singnet.com.sg	CI Vehicle Number	GY5165K	TP Vehicle Number	
Claim Description	GY5165K / YP3000A ON 2 Jan 2018			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	GIA report	
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received	
Date Registered	03/01/2018 18:34	Claim Close Date			
Report Taken By	ROSLI WAHAB				

☒ Print AK letter

Save Submit

Attachment

Accident No.	MT/0976282	Claim No.	001	Confidential	Urgency
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	03/01/2018 18:39		
Path *		Category *	Please Select	<input type="radio"/> Confidential <input checked="" type="radio"/> Normal	

[Browse...](#) [Clear](#)

http://gicclaim.income.com.sg/gcs/icm/eclaim/registrationSave.do

3/1/2018

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<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	▼	NO	+	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	▼	NO	+	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	▼	NO	+	Normal
<input type="button" value="Browse..."/>	<input type="button" value="Clear"/>	Please Select	▼	NO	+	Normal

Attachment List

Attachment	Uploaded By/Date	Category		Urgency	De
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 03 Jan 2018 18:39	SAS		Normal	SAS
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 03 Jan 2018 18:35	Photos		Normal	Photo
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 03 Jan 2018 18:35	Photos		Normal	Photo
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUK IT MERAH)) on 03 Jan 2018 18:34	Photos		Normal	Photo

Video List

Uploaded By/Date	Folder Date	File Name		Source
		<input type="button" value="Display in New Window"/>	<input type="button" value="Scan and uploading"/>	

col's stamp

ACCIDENT STATEMENT

ACCIDENT DATE: 02/01/2018 (DD/MM/YYYY), TIME: 4.30 (HH:MM)

LOCATION: SCOTT'S ROAD

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: GY 5165K
b) INSURANCE COMPANY: INCOME
c) POLICY NUMBER: 5024406885-10
d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
e) MAKE & MODEL: VW (CADDY)
f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
h) PURPOSE OF USING AT ACCIDENT TIME: DELIVERY
i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO) NO
IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- a) NAME: TIRTHA SARI PTE LTD (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: SYED NATIB BIN IBRAHIM (MALE / FEMALE)
b) NRIC/FIN/PASSPORT: S144336515 CONTACT: H/P 97756857
c) ADDRESS: BLK 541, 04-1232, PONDIC NORTH ST 3, C'POKE 440541

* d) DATE OF BIRTH: 30/01/1961 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING LICENCE: 02 JUL 1979

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: _____

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)
b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: YP 3000A MODEL: TOYOTA (LORRY)
b) DRIVER'S NAME: CHUA CHOR PENG
c) NRIC/FIN/PASSPORT: 502412025 CONTACT: 62524237

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
e) DRIVER'S NAME: _____
f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

No of passengers
(including driver)
(1)

No of passengers
(including driver)
(1)

No of passengers
(including driver)
()

Email =

fax =

V1000

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1463365J



Name

SYED NAJIB BIN IBRAHIM

Race

ARAB

Date of birth

30-01-1961

Sex

M

Country of birth

SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



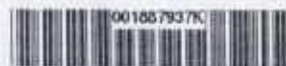
Licence Number S1463365J

Name

SYED NAJIB BIN IBRAHIM

Birth Date 30 Jan 1961

Issue Date 30 Aug 2010



NRIC No. S1463365J



Date of issue

20-08-2010

Address

APT. BLK 541 BEDOK NORTH STREET 3
#04-1232
SINGAPORE 460541

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 2B Motorcycles <= 200 cc 24 Aug 1994
Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg 02 Jul 1979



NP 425A

Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
ROAD TRANSPORT ACT, 1987 (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number : 5024406885-10

Cover : Third Party

- | | |
|---|----------------------|
| 1. Index mark and Registration Number of Vehicle | : GY5165K |
| Chassis Number | : WV1ZZZ2KZ5X060382 |
| 2. Name of Policyholder | : TIRTA SARI PTE LTD |
| 3. Effective Date of Insurance | : 04 Nov 2017 |
| 4. Expiry Date of Insurance | : 03 Nov 2018 |
| 5. Persons or Classes of Persons entitled to drive# | |
| (a) The Policyholder. | |
| (b) Any other person who is driving on the Policyholder's order or with his/her permission. | |
| Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. | |
| 6. Limitations as to Use# | |
| (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession. | |
| (b) Use for the carriage of passengers or goods in connection with the Policyholder's business. | |
| This Policy does not cover | |
| (a) Use for hire or reward. | |
| (b) Use for racing, pace-making, reliability trial or speed-testing. | |
| (c) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle. | |
| # Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings. | |

EXCESS (SECTION 1)	: N/A
EXCESS (SECTION 2)	: N/A
INSURE WITH COE	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A

I/We hereby Certify that the Policy to which this Certificate relates is Issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : INCOME-CUSTOMER DEPT (00000600002)
Date of Issue : 27 Oct 2017 14:42 hrs
Reprint : 27 Oct 2017 14:42 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive