

## 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	04/01/2018 15:55
Date Of Accident	04/01/2018 08:05
Exact Location Of Accident	UBI AVE 1 CARPARK ENTRANCE OF BLK 342/343
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJF5085Y
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ENTERPRISE CAR RENTAL PTE LTD
Co Reg No	201701215C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-81533239

### Vehicle Particulars

Manufacturer	NISSAN
Model	SYLPHY 1.5 4AT
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	THIRD PARTY
Vehicle Category	PRIVATE HIRE

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5091577771
Cover Note Number	-

### Driver

Name of Driver	SULAIMAN BIN SARIF
NRIC No	S1581039D
Date Of Birth	29/10/1963
Occupation	OUTDOOR
Date Of Driving Pass	19/03/2003
Driving Experience	14 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86068847
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 530 BEDOK NORTH ST 3 #04-626
Postcode	460530
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 - MAJOR/MINOR RD
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ
Police Station Address	<b>ROAD:</b> 10 UBI AVENUE 3 , <b>POSTCODE:</b> 408865 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 65470000 - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

#### 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	SJT5720Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

## Accident Sketch Plan

### SKETCH PLAN

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5. Any false reporting may be referred to the Police for investigation.
6. The 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 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:

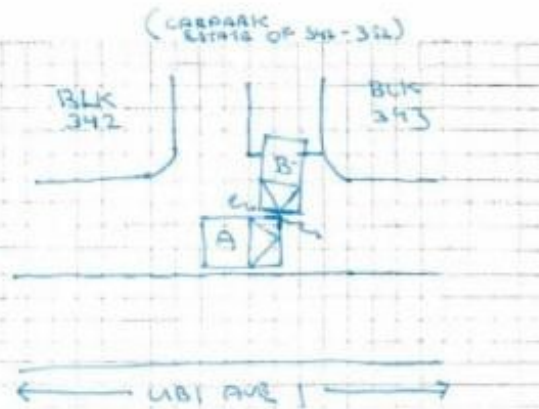
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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

## Accident Sketch Plan

### SKETCH PLAN

VEHICLE A - 53R 50853  
VEHICLE a - 53T 5720Z



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

AS PER POLICE REPORT

REPORT NUMBER:  
T/20180104/2020

VEHICLE A - SSF 8085H

VEHICLE B - SST 5720E

TRAFFIC POLICE DIVISION HQ

## 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.: \_\_\_\_\_

# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20180104/2020

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

1 of 3

Report No. T/20180104/2020

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/01/2018 10:37	Vide Report No.:	Station Diary No.:
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### Informant's Particulars

Name of Informant: SULAIMAN BIN SARIF			Address: APT BLK 530 BEDOK NTH ST 3 #04-626 SINGAPORE 460530		
ID Type / ID No.: NRIC NO / S1581039D			Contact No.: Home/Office: Mobile: 86068847		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 54	Date of Birth: 29/10/1963	Type of Informant: Driver		
Race: Malay			Language: Malay		Institution / School Name:
Occupation: Interior designer			Driving Licence Information: Class: 3 Date of Expiry:		

### General Information of the Accident

Driver Information of the Accident				
Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 04/01/2018 08:05	Type of Location: Straight Road
Location: Along Road 1 UBI AVENUE 1  NO.343 UBI AVE 1				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head On			Anyone conveyed by ambulance: No	

### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJF5085Y	Car				Slightly Damaged	0
SJT5720Z	Car				Slightly Damaged	1

### Details of Person Involved

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

POLICE REPORT



SINGAPORE  
POLICE FORCE



T/20180104/2020

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

3 of 3

Report No. T/20180104/2020

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 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:

TP /

NICHOLAS HO YE HAO

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIA /

Staff Sgt TANG SIEW PING

Contact No.: 65476430

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

04/01/2018 10:37

Classification Of Case:



SINGAPORE  
POLICE FORCE

Signature: 

# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20180104/2020

2 of 3

Report No. T/20180104/2020

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

## CONTINUATION OF REPORT

<b>Driver</b>			
Name	SULAIMAN BIN SARIF		ID No. S1581039D
Related Vehicle	SJF5085Y (Car)		Contact No. 86068847
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
<b>Driver</b>			
Name	JULIAN ANG KIANG HENG		ID No. S7318344H
Related Vehicle	SJT5720Z (Car)		Contact No. 96260036
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 THE ABOVE MENTIONED DATE, TIME AND LOCATION

I WAS DRIVING ALONG SAID ROAD, LOCATION IS A 2 LANE 2 WAY ROAD. WHILE DRIVING, THERE WAS A CAR COMING OUT OF THE CARPARK OF A HDB BLOCK 343, AS I WAS DRIVING STRAIGHT, AS THE CAR WAS SLOWING INCHING OUT OF THE CARPARK, I HORNED THE CAR TO ASK HIM TO STOP, HOWEVER HE DID NOT AND AS SUCH THE COLLISION HAD HAPPENED,

BOTH OF US HAD CAME DOWN FROM OUR VEHICLE, EXCHANGED PARTICULARS AND TOOK PHOTOS OF THE DAMAGED PARTS OF THE VEHICLE.

I WOULD LIKE TO INFORM THAT THIS REPORT IS FOR INSURANCE PURPOSES

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



NISSAN MOTOR CO., LTD. JAPAN

型式 TYPE  
BAG11

CHASSIS NO. JMI3AAG11Z010E218  
NO. DE CHASSIS

MODEL EDUARCA G11EHJ  
MODELO

カラー COLOR, TRIM L60  
カラー COLOR, GUARNICION HRL5

エンジン ENGINE RE4F03B  
MOTOR

トランスミッション TRANS. AXLE  
TRANS. ELE

工場 PLANT  
F040

日産自動車株式会社