

## 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 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	05/01/2018 16:15
Date Of Accident	16/12/2017 00:45
Exact Location Of Accident	JALAN BUROH TWDS TANJONG KLING
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	YP139D
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#### Insured/Policyholder

Name Of Registered Owner	ROBINSON CAR RENTAL PTE LTD
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-82266690
Alternative Phone No	OFFICE-82266690

#### Vehicle Particulars

Manufacturer	ISUZU
Model	-
Exact Purpose for which vehicle was being used at time of accident	WORK
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	

Vehicle Category	COMMERCIAL VEHICLE
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#### Insurance Company

Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D-17087580MFCV/18
Cover Note Number	

#### Driver

Name of Driver	MOHAMAD DAZIL BIN ABDULLAH
NRIC No	S7345620G
Date Of Birth	15/04/1973
Occupation	OUTDOOR
Date Of Driving Pass	24/09/2008
Driving Experience	9 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82266690
Fax Number	
Contact Number	OTHERS-82266690
Email Address	NOEMAIL

Address	1 LORONG 23 GEYLANG
Postcode	388352
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	COLLIDED INTO PROPERTY
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	JURONG WEST NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 700 CORPORATION ROAD , <b>POSTCODE:</b> 649818 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-2689999 - <b>FAX NO:</b> 62672438
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLS REFER TO THE POLICE REPORT : T/20171216/2113

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

No. Of Passenger (Including Driver)

## Sketch Plan

### SKETCH PLAN

#### IMPORTANT NOTICE


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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.

X  
Policyholder's Signature  
Date & Time:

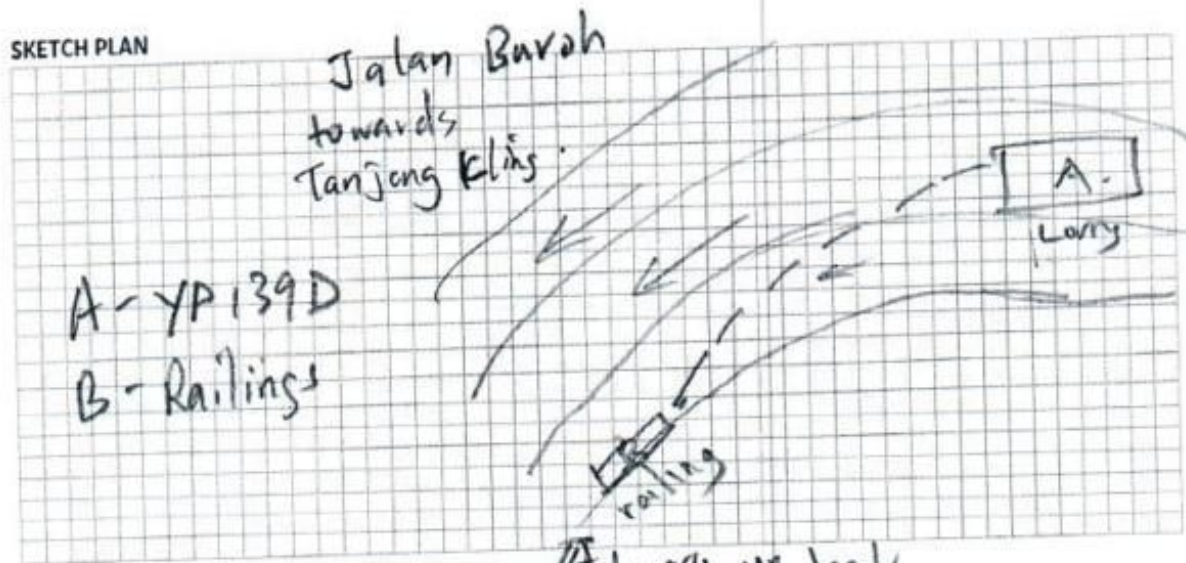


  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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

# Sketch Plan #2

## SKETCH PLAN




## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


Lorry up bank


Pls Refer to the Police Report  
T/20171216/2113

## 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.:

### Sketch Plan #3



**SINGAPORE  
POLICE FORCE**



T/20171216/2113

2 of 3

Report No. T/20171216/2113

Police Station Of Origin:  
Jurong West N.P.C  
700 Corporation Road SINGAPORE 649818  
Tel No: 1800-2689999

#### CONTINUATION OF REPORT

Driver Name	MOHAMAD DAZIL BIN ABDULLAH	ID No.	S7345620G
Related Vehicle	YP139D (Lorry)	Contact No.	82266690
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

#### Brief Details.

On 16/12/2017 at about 0045hrs, I was travelling along Jalan Buroh towards Tanjong Kling on lane 2. As I wanted to turn left soon, I changed lane to the inner most lane. Suddenly I noticed one water crash barrier (orange) in the lane but it was too late for me. I try to swerve to avoid the barrier but I lost control of the lorry and the lorry mounted the kerb on the left side.

I am not injured. However, the lorry was badly damaged. It was unable to start. I informed my boss who then informed towing service and the traffic police. The towing service crew claimed that towing cannot be done as the lorry was badly damaged.

Traffic police also arrived shortly and advised me to clear the lorry from the area. After much difficulty, my lorry was towed away after being rejected by many towing services.

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



# Police Report



**SINGAPORE  
POLICE FORCE**



T/20171216/2113

Police Station Of Origin:  
Jurong West N.P.C  
700 Corporation Road SINGAPORE 649818  
Tel No: 1800-2689999

1 of 3  
Report No. T/20171216/2113

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/12/2017 16:01	Vide Report No.:	Station Diary No.: 115
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Informant's Particulars			
Name of Informant: MOHAMAD DAZIL BIN ABDULLAH		Address: 1 LORONG 23 GEYLANG SINGAPORE 388352	
ID Type / ID No.: NRIC NO / S7345620G		Contact No.: Home/Office:	Mobile: 82266690
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 44	Date of Birth: 15/04/1973	Type of Informant: Driver
Race: Indian		Language: English	Institution / School Name:
Occupation: Lorry driver		Driving Licence Information: Class: 3,4	Date of Expiry:

General Information of the Accident				
Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 16/12/2017 00:45	Type of Location: Straight Road
Location: Along Road 1 JALAN BURUH towards Tanjong Kling				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: No Traffic	
Type of Collision: Moving Vehicle Against - Road Divider/Kerb/Railings			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
YP139D	Lorry	ISUZU	NPR85UH5A	Blue	Seriously 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**



T/20171216/2113

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Report No. T/20171216/2113

Police Station Of Origin:  
Jurong West N.P.C  
700 Corporation Road SINGAPORE 649818  
Tel No: 1800-2689999

### CONTINUATION OF REPORT

Driver			
Name	MOHAMAD DAZIL BIN ABDULLAH	ID No.	S7345620G
Related Vehicle	YP139D (Lorry)	Contact No.	82266690
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

### Brief Details.

On 16/12/2017 at about 0045hrs, I was travelling along Jalan Buroh towards Tanjong Kling on lane 2. As I wanted to turn left soon, I changed lane to the inner most lane. Suddenly I noticed one water crash barrier (orange) in the lane but it was too late for me. I try to swerve to avoid the barrier but I lost control of the lorry and the lorry mounted the kerb on the left side.

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# Police Report



**SINGAPORE  
POLICE FORCE**



T/20171216/2113

Police Station Of Origin:  
Jurong West N.P.C  
700 Corporation Road SINGAPORE 649818  
Tel No: 1800-2689999

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Report No. T/20171216/2113

## 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:

J/

Sr Staff Sgt MUHAMAD RIZMAN BIN SAMAD

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

16/12/2017 16:01

Officer In Charge Of Case:

TP / GIT /

Classification Of Case:

Contact No.:

Authentication Stamp

NP188



## Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE  
6 Raffles Quay #18-00 Singapore 048580  
Tel (65) 6224 0010 Fax (65) 6224 0030  
Operating Hours : Monday to Friday, 09:00 – 17:00  
UEN: S66550020G / GST Reg. No.: M450017735

**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

### ADDENDUM

#### (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : M4A11800262C Vehicle Registration No: YP139D  
Name (as shown in NRIC) : ROBINSON CAR RENTAL PTE LTD NRIC/FIN/Passport No : 200414041W  
(\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
Address : 21 JALAN MASJID Singapore ( 418946 )  
Contact (Tel) : 67492002 Mobile No. : 98792002  
Email Address : CAR.RENTAL@SIANGHOCK.COM.SG  
Date of Accident : 16 DEC 2017 Time of Accident : 00:45  
Place of Accident : JALAN BURUH TWDS TANJONG KLING  
Insurance Company: FIRST CAPITAL INSURANCE LTD

#### (B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

IN THE EVENT OF ACCIDENT THE DAMAGES INCLUDE THE RIGHT-SIDE REAR PORTION  
AND THE TAIL GATE

X

Policyholder / Driver's Signature  
Date:



Reporting Centre Personnel's Signature

Name:  
NRIC/FIN No.:  
Date: