

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	15/01/2018 12:51
Date Of Accident	10/01/2018 20:30
Exact Location Of Accident	ALONG PIE TOWARDS CHANGI BEFORE EUNOS EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKG3514Y
Insured/Policyholder	
Name Of Registered Owner	SELAMAT BIN MOHAMAD
NRIC No	S7435520Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-88580863
Alternative Phone No	OTHERS-88580863

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	JETTA
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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 CAR

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	7VPCP1734340
Cover Note Number	

Driver

Name of Driver	SELAMAT BIN MOHAMAD
NRIC No	S7435520Z
Date Of Birth	26/10/1974
Occupation	INDOOR
Date Of Driving Pass	05/09/2006
Driving Experience	11 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-88580863
Fax Number	
Contact Number	OTHERS-88580863
Email Address	NOEMAIL

Address	179 JALAN LOYANG BESAR #03-09
Postcode	506926
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	4
Was any body injured in the Accident?	YES
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)	3
Passenger 1	NAME: : MUHD MUIZZUDDIN BIN MOHD NOOR GENDER: : MALE
Passenger 2	NAME: : MELITTA BTE ABU BAKER GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	10 UBI AVENUE 3
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

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	SLR967Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	RONALD TAN WEE MENG

NRIC/Passport Number	S8933292C
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SKS6260X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	AU JAN MICHAEL
NRIC/Passport Number	S7136659F
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SLD5283D
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	NG KIM SAN
NRIC/Passport Number	S7330117C
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	SELAMAT BIN MOHAMAD
Approximate Age	43
Injuries Sustain	
Injured person in which vehicle?	SKG3514Y
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	179 LOYANG BESAR #03-09
Postcode	506926

DETAILS OF INJURED PERSON 2

Name	MUHD MUIZZUDDIN BIN MOHD NOOR
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SKG3514Y
Were seat belts worn?	

Was this injured conveyed to hospital by ambulance? NO

Address NA

Postcode

DETAILS OF INJURED PERSON 3

Name MELITTA BTE ABU BAKER

Approximate Age

Injuries Sustain

Injured person in which vehicle? SKG3514Y

Were seat belts worn?

Was this injured conveyed to hospital by ambulance? NO

Address NA

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:

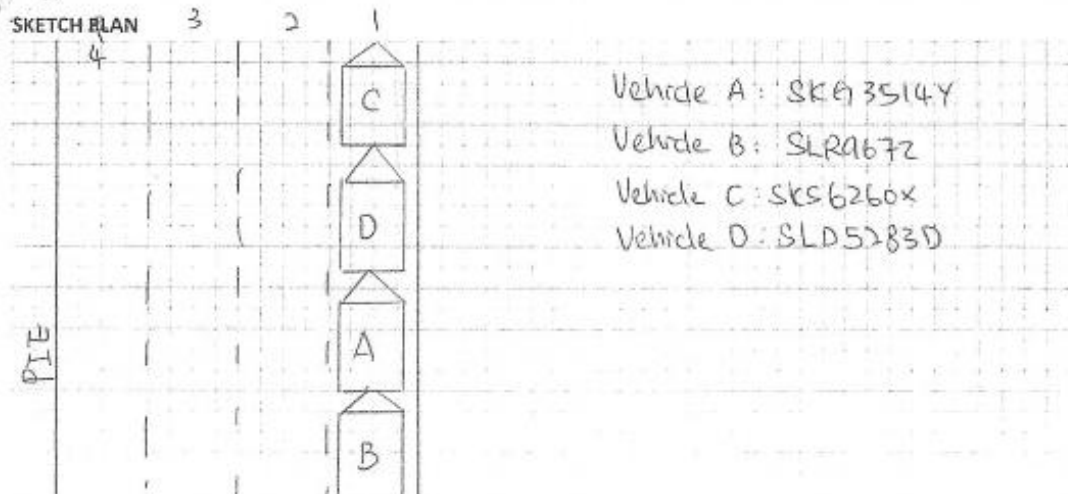
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "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 #2



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 10/01/2018 at 20:30HRS, I was driving vehicle A (SKG3514Y) travelling along PIE towards Changi before Eunos, there was heavy traffic, suddenly vehicle C (SKS6260X) hit the brake then vehicle D (SLD5283D) hit on rear of vehicle C, after I saw the accident happen, I managed to stop my vehicle in time, after few second, vehicle B (SLR967Z) hit on my ^{rear} rear portion and pushed my car forward to hit on vehicle D rear portion.

Refer Police Report No. T/20180112/700 ✓

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.:

Common Statement



**SINGAPORE
POLICE FORCE**



T/20180112/7002

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

1 of 4

Report No. T/20180112/7002

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 12/01/2018 11:07		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: SELAMAT BIN MOHAMAD			Address: 179 JALAN LOYANG BESAR #03-09 SINGAPORE 506926		
ID Type / ID No.: NRIC NO / S7435520Z			Contact No.: Home/Office: Mobile: 88580863		
Nationality: SINGAPORE CITIZEN			Email: melsel179@yahoo.com.sg		
Sex: Male	Age: 43	Date of Birth: 26/10/1974	Type of Informant: Driver		
Race: Malay			Language: English		Institution / School Name:
Occupation: Structural engineering technician			Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 10/01/2018 20:30	Type of Location: Straight Road
Location: PAN ISLAND EXPRESSWAY along PIE towards Changi				
Weather: Raining		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One 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
SKG3514Y	Car	VOLKSWAGO N	JETTA 1.4 TSI AT 1623G5	Black	Seriously Damaged	3
SKS6260X	Car	BMW				0
SLD5283D	Car	TOYOTA	ALTIS			0
SLR967Z	Car	MITSUBISHI	LANCER			0

Common Statement



**SINGAPORE
POLICE FORCE**



T/20180112/7002

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

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Report No. T/20180112/7002

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
SKG3514Y	MSIG INSURANCE (SINGAPORE) PTE. LTD.	7VPCP1734340	24/08/2017	23/08/2018

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	SELAMAT BIN MOHAMAD		ID No.	S7435520Z
Related Vehicle	SKG3514Y (Car)		Contact No.	88580863
Hospital/Clinic	C & K FAMILY CLINIC PTE LTD		Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	11/01/2018		Date Discharge	11/01/2018
No. of Days granted Medical Leave	04		Degree of Injury	Slight
Passenger				
Name	MUHD MUIZZUDDIN BIN MOHD NOOR		ID No.	S9302863E
Related Vehicle	SKG3514Y (Car)		Contact No.	NIL
Hospital/Clinic	C & K FAMILY CLINIC PTE LTD		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	11/01/2018		Date Discharge	11/01/2018
No. of Days granted Medical Leave	04		Degree of Injury	Slight
Passenger				
Name	MELITTA BTE ABU BAKER		ID No.	S7402146H
Related Vehicle	SKG3514Y (Car)		Contact No.	NIL
Hospital/Clinic	C & K FAMILY CLINIC PTE LTD		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	11/01/2018		Date Discharge	11/01/2018
No. of Days granted Medical Leave	04		Degree of Injury	Slight

Common Statement



**SINGAPORE
POLICE FORCE**



T/20180112/7002

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

3 of 4

Report No. T/20180112/7002

CONTINUATION OF REPORT

Brief Details.

On 10/01/2018 at 20:30HRS, I was driving vehicle A (SKG3514Y) travelling along PIE along Changi before Eunos exit, there was heavy traffic, suddenly vehicle C (SKS6260X) hit the brake then vehicle D (SLD5283D) hit on rear of vehicle C, after I saw the accident happen, I managed to stop my vehicle in time, after few second, vehicle B (SLR967Z) hit on my car rear portion and pushed my car forward to hit on vehicle D rear portion. My car badly damaged. That all my statement.

Common Statement



**SINGAPORE
POLICE FORCE**



T/20180112/7002

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

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Report No: T/20180112/7002

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPHQ /
LIM HONG LEE
Contact No.: 65476438

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
12/01/2018 11:07

Classification Of Case:

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

