

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	08/01/2018 13:25
Date Of Accident	06/01/2018 15:15
Exact Location Of Accident	CTE (TWDS CITY BEFORE PIE/CHANGI EXIT)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBA1847M
Insured/Policyholder	
Name Of Registered Owner	PRIMA FOOD PTE LTD
Co Reg No	199000742W
Email Address	MUHSIN@PRIMA.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-62776894

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE-3.0 D (M)
Exact Purpose for which vehicle was being used at time of accident	ON THE WAY BACK TO OFFICE
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	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	17-MC005962-R06
Cover Note Number	

Driver

Name of Driver	MUHSIN BIN SHAF'EE
NRIC No	S8708582A
Date Of Birth	17/03/1987
Occupation	OUTDOOR
Date Of Driving Pass	10/09/2014
Driving Experience	3 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81898043
Fax Number	
Contact Number	
EEmail Address	MUHSIN@PRIMA.COM.SG

Address	BLK 6 JALAN MINYAK #01-374
Postcode	162006
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	CHAIN COLLISION
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?	YES
Was any injured conveyed to hospital by ambulance?	YES
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	HONG KAH SOUTH NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 510 JURONG WEST STREET 52 , POSTCODE: 640510 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5648999 - FAX NO: 66655797
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT NO: T/20180106/2134

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	SKA934U
Vehicle Make/Model/Colour	HONDA ODYSSEY, LIGHT BLUE COLOUR
Details Of Properties	VEH. B, FRONT PORTION
Vehicle Category	PRIVATE CAR
Name of Driver	TAN CHEE WEE VICTOR
NRIC/Passport Number	S1663579J
Contact Number	96388540
Address	
Postcode	
Insurance Company Name	AXA INSURANCE PTE LTD
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SH6503J
Vehicle Make/Model/Colour	HYUNDAI COMFORT TAXI, BLUE COLOUR
Details Of Properties	VEH C, REAR PORTION
Vehicle Category	TAXI
Name of Driver	LOW BENG DEE
NRIC/Passport Number	S1697336Z
Contact Number	97115585
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	UNKNOWN (A LADY)
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SKA934U
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

DETAILS OF INJURED PERSON 2

Name	
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	
Address	
Postcode	

SKETCH PLAN

SKETCH PLAN

A # GBA 184M
B # SKA 934U
C # SH 6703J
CTE (TWDS CITY)

GALLERY
CR

AUSTRIAN INTERNATIONAL SCHOOL

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO POLICE REPORT NO: T/20180106/2134

DECLARATION

✓ 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

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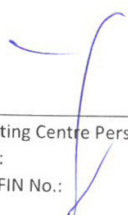
8. Consent under the Personal Data Protection Act (PDPA)

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: 8/1/18 1304pm


Driver's Signature
(If driver is not the policyholder)
Date & Time: 8/1/18 1304pm


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



**SINGAPORE
POLICE FORCE**



T/20180106/2134

Police Station Of Origin:
Hong Kah South NPP
510 Jurong West Street 52 #01-90
SINGAPORE 640510
Tel No: 1800-5648999

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Report No. T/20180106/2134

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 06/01/2018 20:48	Vide Report No.: F/20180106/0217	Station Diary No.: 30
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Informant's Particulars

Name of Informant: MUHSIN BIN SHAFI'EE			Address: APT BLK 6 JALAN MINYAK #01-374 SINGAPORE 162006		
ID Type / ID No.: NRIC NO / S8708582A			Contact No.: Home/Office: Mobile: 81898043		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 30	Date of Birth: 17/03/1987	Type of Informant: Driver		
Race: Malay			Language: English	Institution / School Name:	
Occupation: LOGISTICS			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 06/01/2018 15:15	Type of Location:
Location: Along Road 1 CENTRAL EXPRESSWAY TOWARDS CITY BEFORE PIE(CHANGI) EXIT				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBA1847M	Van	TOYOTA		White		0
SH6503J	Car	HYUNDAI		Blue		1
SKA934U	Car	HONDA		Blue		2

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20180106/2134

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Report No. T/20180106/2134

Police Station Of Origin:
Hong Kah South NPP
510 Jurong West Street 52 #01-90
SINGAPORE 640510
Tel No: 1800-5648999

CONTINUATION OF REPORT

Driver			
Name	MUHSIN BIN SHAFI'EE	ID No.	S8708582A
Related Vehicle	GBA1847M (Van)	Contact No.	81898043
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

Brief Details.

On 6/1/2018 at about 1515hrs, I was driving my company van (GBA1847M) on the third lane from the right of CTE towards City, before PIE (Changi) exit. I observed that the traffic was heavy at that time. I then observed that the taxi in front of me was accelerating as the traffic was easing up. I then picked up speed as well. The taxi in front (SH6503J) then jammed on the brakes. I also braked hard and successfully stopped in time. Momentarily later, I felt an impact from the rear. The impact made my car jerk forward and collided with the rear of the taxi. I then alighted from my van and discovered that a blue Honda car (SKA934U) had collided with the rear of my van. The driver of the blue Honda then called for the ambulance as his wife (passenger sitting at the front left passenger seat) was complaining of chest pain. She was conveyed by ambulance. I made a check with the others involved and they were not injured by the collision. I am not injured. Then rear of the taxi bumper was dented. The front and rear of my van bumpers were dented. The front left side of the car bumper was dented due to the collision. There is no camera inside my van.



**SINGAPORE
POLICE FORCE**



T/20180106/2134

Police Station Of Origin:
Hong Kah South NPP
510 Jurong West Street 52 #01-90
SINGAPORE 640510
Tel No: 1800-5648999

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Report No. T/20180106/2134

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 /
Sgt 3 MUHAMMAD FADHIL KAMRODEN

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
06/01/2018 20:48

Officer In Charge Of Case:
TP / GIT /
Sr Staff Sgt YUS MASTARI I KHAZALI
Contact No.: 65476214

Classification Of Case:

Authentication Stamp
NP168

Singapore Police Force

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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