

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	11/01/2018 14:53
Date Of Accident	08/01/2018 15:30
Exact Location Of Accident	PIE TOWARDS CHANGI (NEAR OLD POLICE ACADEMY)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC5550R
Insured/Policyholder	
Name Of Registered Owner	SEA WHEEL TRAVEL PTE LTD
Co Reg No	199301539Z
Email Address	COACH@SEAWHEEL.COM.SG
Mobile Phone No	(LOCAL) +65-91463388
Alternative Phone No	OFFICE-65332164

Vehicle Particulars

Manufacturer	KING LONG
Model	XMQ6117K-6.7 (A)
Exact Purpose for which vehicle was being used at time of accident	
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	BUS

Insurance Company

Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	SD17V04307/VBS/R03
Cover Note Number	

Driver

Name of Driver	HAMZAH BIN ABU
NRIC No	S1783980B
Date Of Birth	26/10/1966
Occupation	OUTDOOR
Date Of Driving Pass	17/05/2001
Driving Experience	16 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82567433
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 266 BUKIT BATOK EAST AVENUE 4 #11-236
Postcode	650266
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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?	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?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT BATOK NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 21 BUKIT BATOK EAST AVE 4 , POSTCODE: 659840 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-6659999 - FAX NO: 66655793
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

AS PER ATTACHED POLICE REPORT. (REPORT NO. T/20180108/2206). PLEASE REFER TO ATTACH VIDEO FOOTAGE.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBA9419M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	GOODS VEHICLE
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

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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)**

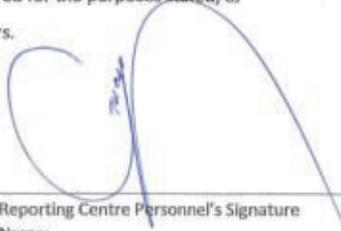
I understand, acknowledge, agree and consent that:

- (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: 11 JAN 2019 11:30am

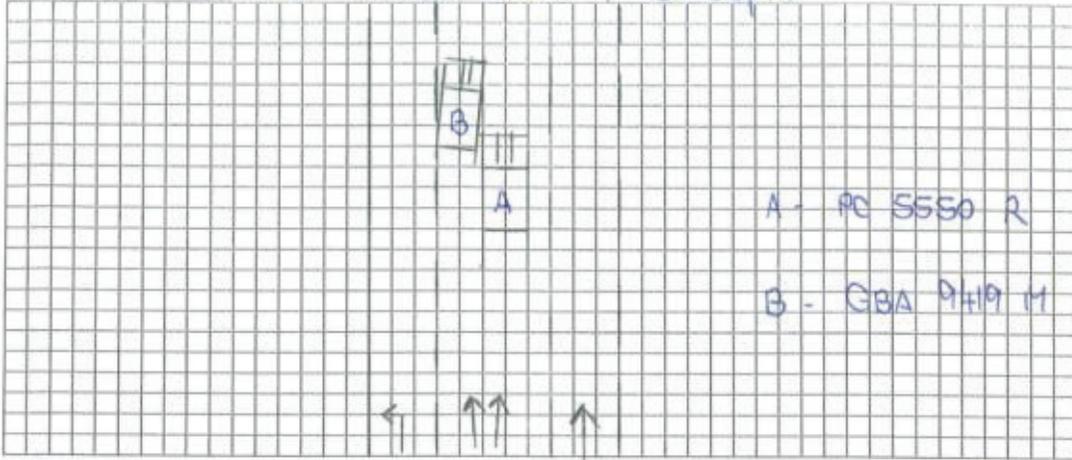



Driver's Signature
(If driver is not the policyholder)
Date & Time: 11 JAN 2019 11:30am


Reporting Centre Personnel's Signature
Name: ANG WEI GUANG
NRIC/FIN No.: S8410708E

Sketch Plan #2

SKETCH PLAN D. O. A 08. 01. 2018 3. 30pm



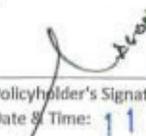
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As per attached police report. (Report No. T/20180108/2206)

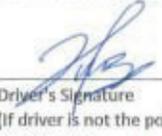
Please refer to attach video footage

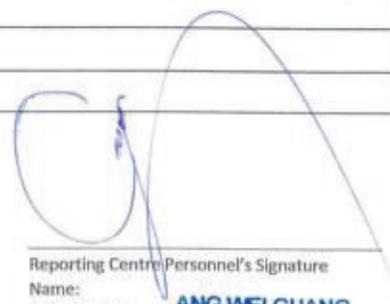
DECLARATION

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

Policyholder's Signature 
 Date & Time: 11 JAN 2013



Driver's Signature 
 (If driver is not the policyholder)
 Date & Time: 11 JAN 2013

Reporting Centre Personnel's Signature 
 Name: ANG WEI GUANG
 NRIC/FIN No.: S8410708E



**SINGAPORE
POLICE FORCE**



T/20180108/2206

1 of 3

Police Station Of Origin:
Bukit Batok N.P.C
21 Bukit Batok East Avenue 4 SINGAPORE
659840
Tel No: 1800-6659999

Report No. T/20180108/2206

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/01/2018 22:08	Vide Report No.:	Station Diary No.: 98
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Informant's Particulars

Name of Informant: HAMZAH BIN ABU		Address: APT BLK 266 BUKIT BATOK EAST AVENUE 4 #11-236 SINGAPORE 650266	
ID Type / ID No.: NRIC NO / S1783980B		Contact No.: Home/Office: Mobile: 82567433	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 51	Date of Birth: 26/10/1966	Type of Informant: Driver
Race: Indonesian		Language:	Institution / School Name:
Occupation: Bus driver		Driving Licence Information: Class: 3,4	Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 08/01/2018 15:30	Type of Location: Straight Road
Location: Along Road 1 PAN ISLAND EXPRESSWAY PIE going towards Changi, Near Old Police Academy.				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control:	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBA9419M	Van					0
PC5550R	Bus/Coach/Minibus				Slightly Damaged	0

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20180108/2206

2 of 3

Report No. T/20180108/2206

Police Station Of Origin:
Bukit Batok N.P.C
21 Bukit Batok East Avenue 4 SINGAPORE
659840
Tel No: 1800-6659999

CONTINUATION OF REPORT

Driver			
Name	HAMZAH BIN ABU	ID No.	S1783980B
Related Vehicle	PC5550R (Bus/Coach/Minibus)	Contact No.	82567433
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 the 08/01/2018 at about 1530hrs, I was driving along PIE heading towards the direction of Changi, near the Old Police Academy. At the point of time, the traffic was heavy and moving slowly. Out of a sudden, a vehicle bearing the registration number GBA9419M suddenly cut into my lane, and had collided onto my vehicle's left passenger side bumper, resulting in some scratches on the bumper. After the accident the driver did not stop and there was no particulars that was exchanged at the point of time.



SINGAPORE
POLICE FORCE



T/20180108/2206

Police Station Of Origin:
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21 Bukit Batok East Avenue 4 SINGAPORE
659840
Tel No: 1800-6659999

3 of 3

Report No. T/20180108/2206

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 2 ANG YU WEI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 08/01/2018 22:08
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt ESTHER CHONG Contact No.: 65476368	Classification Of Case:
Authentication Stamp NP168	