

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	07/02/2018 19:16
Date Of Accident	06/02/2018 10:50
Exact Location Of Accident	WOODLANDS AVE 9 BEFORE JUNC WOODLANDS AVE 2
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKQ2346U
Insured/Policyholder	
Name Of Registered Owner	AUTOHOME TRADING
Co Reg No	52827128L
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90088701
Alternative Phone No	OFFICE-90088701

Vehicle Particulars

Manufacturer	TOYOTA
Model	WISH 1.8 AUTO
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
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 FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	5083939856-01
Cover Note Number	

Driver

Name of Driver	MUHAMMAD FARID BIN SARIP
NRIC No	S9002493J
Date Of Birth	22/01/1990
Occupation	OUTDOOR
Date Of Driving Pass	27/03/2012
Driving Experience	5 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97921842
Fax Number	
Contact Number	OFFICE-97921842
EEmail Address	NOEMAIL

Address	BLK 879 YISHUN STREET 81 #03-249
Postcode	760879
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 - CHANGE/CROSS LANE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
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)	2
Passenger 1	NAME: : - GENDER: : MALE

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 - SINGAPORE CITY
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20180206/7007.

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	YM510E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver) 1

Accident Sketch Plan

SKO 2346U_SKETCH PLAN0001.jpg

7/2/16 5:22 pm

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/or 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 (a) 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) in 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.:

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Accident Sketch Plan

SKQ 2346U_SKETCH PLAN0002.jpg

7/2/18 5:22 pm

SKETCH PLAN



A SKQ 2346U

B: 7M 510E

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report - 7/20180206/7207

DECLARATION



foregoing particulars are true in every respect.

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

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

about:blank

Police Report



**SINGAPORE
POLICE FORCE**



T/20180206/7007

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

1 of 3

Report No. T/20180206/7007

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 06/02/2018 12:12		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: MUHAMMAD FARID BIN SARIP			Address: APT BLK 751 WOODLANDS CIRCLE #01-590 SINGAPORE 730751		
ID Type / ID No.: NRIC NO / S9002493J			Contact No.: Home/Office: Mobile: 97921842		
Nationality: SINGAPORE CITIZEN			Email: farid_dila@hotmail.com		
Sex: Male	Age: 28	Date of Birth: 22/01/1990	Type of Informant: Driver		
Race: Javanese			Language: English		Institution / School Name:
Occupation: Other car and light goods vehicle drivers nec			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 06/02/2018 10:50	Type of Location: Straight Road
Location: WOODLANDS AVENUE 9 BEFORE TRAFFIC JUNCTION OPPOSITE REPUBLIC POLYTECHNIC				
Weather: Clear	Road Surface: Dry	Road Speed Limit: 60 Km/h		
Traffic Flow: Two Way	Traffic Control: Traffic Light - Working	Traffic Volume: Moderate		
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKQ2346U	Car	TOYOTA	WISH	Grey	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/20180206/7007

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

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Report No. T/20180206/7007

CONTINUATION OF REPORT

Driver			
Name	MUHAMMAD FARID BIN SARIP	ID No.	S9002493J
Related Vehicle	SKQ2346U (Car)	Contact No.	97921842
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.

JUST PICK UP A PASSANGER FROM 844 WOODLAND AVE 4 .WHILE IM DRIVING AT WOODLAND AVE 9 GOING STRAIGHT WHEN A LORRY(YM510E) SUDDENTLY CHANGE LANE AND HIT MY RIGHT REAR SIDE.DRIVER STOP AWHILE TO MAKE A PHONE CALL AND TOOK PHOTO THEN DRIVE OFF.DRIVER REFUSE TO EXCHANGE PATICULAR WHEN ASK TO.

Police Report



**SINGAPORE
POLICE FORCE**

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



T/20180206/7007

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Report No. T/20180206/7007

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:

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:
06/02/2018 12:12

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

