

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	13/01/2014 10:19
Date Of Accident	06/01/2014 02:45
Exact Location Of Accident	TPE TOWARDS SLE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	XB3787Z
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Insured/Policyholder

Name Of Registered Owner	SAM LAIN EQUIPMENT SERVICES PTE LTD
Co Reg No	-

Vehicle Particulars

Manufacturer	NISSAN
Model	CKB450BTNT
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL USE
Are you claiming under your own insurance policy for repair to your vehicle?	No
If No, Please state action to be taken	Reporting Only
Vehicle Category	Commercial Vehicle

Insurance Company

Name of Insurance Company	EQ Insurance Company Ltd
Type Of Coverage	Third Party
Fleet Policy	No
Policy Number	DMCPHQ14-000034
Cover Note Number	08/01/13 - 07/01/14

Driver

Name of Driver	ZAIHAN BIN MOHAMED ZAIN
NRIC No	S7932839A
Date Of Birth	27/10/1979
Occupation	Outdoor
Date Of Driving Pass	03/02/2006
Driving Experience	7 Years And 11 Months
Gender	Male
Mobile Number	(Local) +65-92332325
Fax Number	
Contact Number	Office-65677601
EEmail Address	NOEMAIL
Address	BLK 283 YISHUN AVE 6 #08-146
Postcode	760283
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 Collision- Head to Rear (TP Hit Insured)
Weather Conditions Raining
Road Surface Wet

Other Information

Was any foreign vehicle involved in this accident? No
Was any body injured in the Accident? Yes
Was any other material or property damaged? Yes
Was there any video captured by Car Camera? No

Details of Police Action

Was the accident reported to the police? Yes
If Yes, Please state which Police Station
Police Station Name Yishun North Neighbourhood Police Centre
Police Station Address **ROAD:** 31 Yishun Central , **POSTCODE:** 768827 , **COUNTRY:** Singapore
Police Station Contact **TEL NO:** 1800-8529999 - **FAX NO:** 68522299
Was notice of intended Prosecution given? No
If Yes, against whom?

Circumstances of Accident

REFER POLICE REPORT.

Are accident photos available for attachment? Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHB7609T
Vehicle Make/Model/Colour
Details Of Properties
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Details of Witness

Name
Phone Number
Email Address

DETAILS OF INJURED PERSON 1

Name (UNKNOWN -DRIVER)
Approximate Age
Injuries Sustain
Injured person in which vehicle? SHB7609T
Were seat belts worn?
Was injured conveyed to hospital by ambulance? Yes
Address

Postcode

DETAILS OF INJURED PERSON 2

Name (UNKNOWN -PASSENER)

Approximate Age

Injuries Sustain

Injured person in which vehicle? SHB7609T

Were seat belts worn?

Was injured conveyed to hospital by ambulance? Yes

Address

Postcode

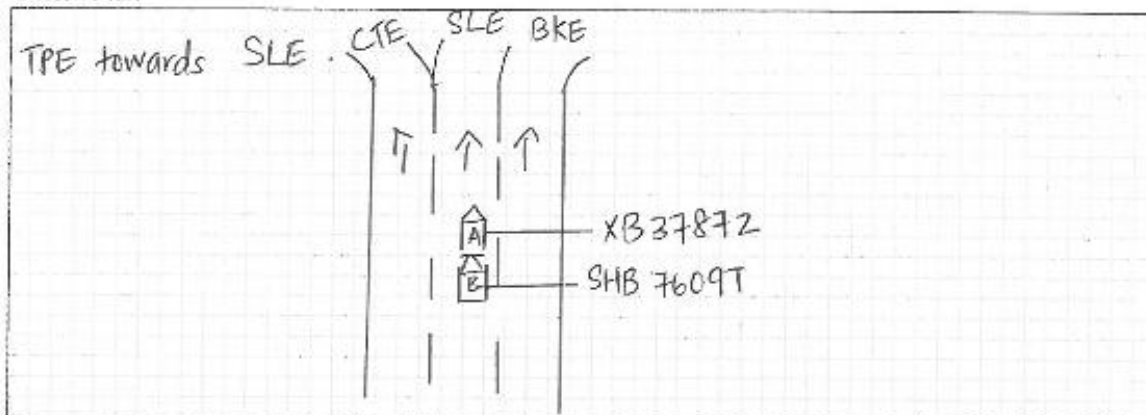
Sketch Plan

SKETCH PLAN

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Sketch Plan



Describe Circumstances of the Accident

Insurer = EQ Insurance Company Ltd.
Owner = Sam Iain Equipment Services Pte Ltd
Driver = Zaihan Bin Mohamed Zain
Vehicle No: XB 3787Z TYPE= Reporting Only.
DOA: 06/01/2014 2-45AM @ TPE Towards SLE.
Refer Police Report.

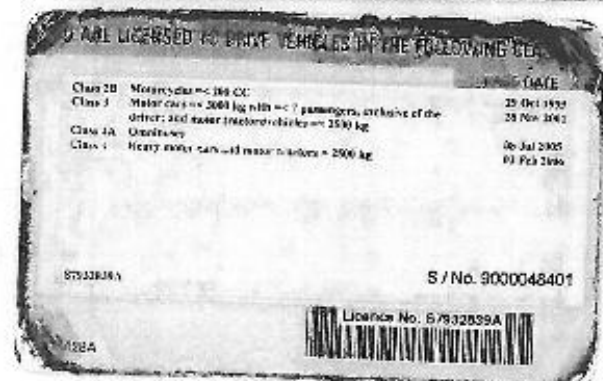
Declaration

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

Witnessed by Reporting Centre Personnel

LIC

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999



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Report No. T/20140106/4172

CONTINUATION OF REPORT

Name	ZAIHAN BIN MOHAMED ZAIN		ID No.	S7932839A
Related Vehicle	NIL		Contact No.	92332325
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 2B,3,4A,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL	
No. of Days granted Medical Leave (MC)	NIL	Degree of Injury	NIL	

Brief Details.

On 06/01/2013 at about 0245hrs, I was driving in my vehicle (XB3787Z) on the centre lane of Tampines Expressway (TPE) towards Seletar Expressway (SLE). Out of sudden, I felt an impact on the back, right side of vehicle. Subsequently, after I felt the impact, I saw one vehicle, SHB 7609T swerved onto the right side of the expressway and hit onto the divider before swerving back onto the left side and hit onto the divider on the road shoulder and came to a stop. Both Traffic Police and Ambulance at scene moments later. However, I do not suffer from any injuries and do not need any medical attention. My vehicle suffered damages on the back right side (signal light). I wish to inform that there is no in-built camera in my vehicle.



Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999



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Report No. T/20140106/4172

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 06/01/2014 21:34		Vide Report No.: F/20140106/0032		Station Diary No.: 72	
Informant Particulars					
Name of Informant: ZAIHAN BIN MOHAMED ZAIN			Address: APT BLK 283 YISHUN AVENUE 6 #08-146 SINGAPORE 760283		
ID Type / ID No.: NRIC NO / S7932839A			Contact No.: Home/Office: Mobile: 92332325		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 34	Date of Birth: 27/10/1979	Type of Informant: Driver		
Race: Javanese			Language: English		Institution / School Name:
Occupation: Driver			Driving Licence Information: Class: 2B,3,4A,4 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 06/01/2014 02:45	Type of Location: Straight Road
Location: Along Road 1 TPE SLE TPE >> SLE				
Weather: Heavy rain		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved									
Vehicle No.	Type	Make	Color	Condition	No. of Persons	Insurance	Insurance Affected	Expiry	Remarks
SHB7609 T	TAXI			Seriously Damaged	1				
XB3787Z	TRAILER			Slightly Damaged	0				

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

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999



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Report No. T/20140106/4172

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:

F / MUHD KHAI RI SUPYAN .

~~SARVANN MURTHY~~

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

VILTON HIA

Contact No.: 65476228

Signature Of Informant:

Date/Time:

06/01/2014 21:34

Classification Of Case:

Authentication Stamp

NP168



Signature :

SN 094

Singapore Police Force

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

