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 witholding 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 aforesaid.	I hereby consent to the archiving of this report at the centre and to copies of the report being made available				
	ACCIDENT STATEMENT				
Date Of Report	11/11/2017 18:21				
Date Of Accident 10/11/2017 16:50					
Exact Location Of Accident CARPARK OF BLK 66 BEDOK SOUTH AVE 3					
Country/State of Loss	SINGAPORE				
	DETAILS OF OWN VEHICLE				
Vehicle Registration Number	YM289U				
Insured/Policyholder					
Name Of Registered Owner	STVE PTE LTD				
Co Reg No	198703585C				
Email Address	NOEMAIL				
Mobile Phone No					
Alternative Phone No	OFFICE-64942833				

Vehicle Particulars

Manufacturer ISUZU

NPR71L-4.6 D (M) Model

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?

If No, Please state action to be taken THIRD PARTY

Vehicle Category COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company FIRST CAPITAL INSURANCE LTD

Type Of Coverage THIRD PARTY

Fleet Policy YES

Policy Number D-17087422MFCV

Cover Note Number

Driver

Name of Driver MUHAMMAD RAMDAN BIN ABDUL AZIZ

NRIC No S8814739A Date Of Birth 06/05/1988 **OUTDOOR** Occupation **Date Of Driving Pass** 30/08/2016

1 YEAR AND 2 MONTHS **Driving Experience**

Gender MALE

Mobile Number (LOCAL) +65-86967108

Fax Number

Contact Number

EMail Address NOEMAIL Address

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - LESSEE

Vehicle Registration Number of Driver's Own

Vehicle

-

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident COLLISION - MAJOR/MINOR RD

Weather Conditions RAINING
Road Surface WET

Other Information

Was any foreign vehicle involved in this accident? NO
Was any body injured in the Accident? NO
Was any other material or property damaged? YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.
Number of Passengers (Including Driver) 2

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name BEDOK NORTH NEIGHBOURHOOD POLICE CENTRE

Police Station Address ROAD: 30 BEDOK NORTH ROAD, POSTCODE: 469676, COUNTRY:

SINGAPORE

Police Station Contact **TEL NO**: 1800-2449999 - **FAX NO**: 62447258

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT NO. T/20171110/2133:- ON THE 10TH NOVEMBER 2017 AT ABOUT 4:50PM, I WAS DRIVING MY COMPANY'S LORRY, YM289U. I WAS DRIVING IN THE CARPARK WHEN SUDDENLY A TAXI, SHC2113J, SUDDENLY CAME OUT OF THE PARKING LOT AND HIT ONTO MY LORRY'S LEFT PORTION. I WAS WITH MY COLLEAGUE NAMELY MUHAMMAD BAKTHIYAR BIN JAFFAR, S8508956J, CONTACT NUMBER: 83114219. I THEN ALIGHTED FROM MY LORRY AND TALKED TO THE TAXI DRIVER WHOM INFORMED ME TO GO TO THE POLICE STATION WITH HIM TO LODGE A POLICE REPORT. I DID NOT SEE ANY EXTERIOR DAMAGE AS OF NOW AS IT WAS RAINING. I HAVE ALSO YET TO SEE IF THERE'S ANY DAMAGE TO THE GOODS IN MY COMPANY'S LORRY. AS I WAS FINDING A PARKING LOT NEAR TO THE POLICE STATION, THE TAXI DRIVER STOPPED IN FRONT OF ME AND TOLD ME THAT HE WILL BE BRINGING HIS IN-CAR CAMERA FOOTAGE TO THE TRAFFIC POLICE AND LEFT. HE DID NOT EXCHANGE HIS PARTICULARS WITH ME. I DO NOT HAVE ANY IN-CAR CAMERA BUT THERE WAS A CAR SLN4933R, THAT STOPPED IN MY OPPOSITE DIRECTION AND MIGHT HAVE AN IN-CAR CAMERA THAT CAUGHT THE WHOLE ACCIDENT.

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 SHC2113J

Vehicle Make/Model/Colour

Details Of Properties VEH B

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

1

Details of Witness

Name

Phone Number

Email Address

SKETCH PLAN

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- 5. Any false reporting may be referred to the Police for investigation.
- 6. The 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 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)

lunderstand, acknowledge, agree and consent that:

- 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)
 - (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
- 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.
- 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
 - 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)

MY2894

Date & Time:

Reporting Centre Personnel's Signature

NRIC/FIN No.:

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REFER TO	POLICE R	EPORT NO.	T/20171110	/2133	
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DECLARATION

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

Policyholder's Signature Date & Time:

GIARMC Sketch* vollorm_V3

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

Date & Time:

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

2

Police Report





Police Station Of Origin: Bedok North N.P.C

30 Bedok North Road SINGAPORE 469676

Tel No: 1800-2449999

/20171110/2133 1 of 3

Report No. T/20171110/2133

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/11/2017 17:24			Vide Report No.:	Station Diary No.: 98			
Informa	nt's Partic	ulars					
MUHAM AZIZ ID Type	/ ID No.:	DAN BIN ABDUL	310106 Contact No.:	TOA PAYOH #06-345 SINGAPORE			
National	O / S88147: ity: PORE CITIZ		Home/Office: Mobile: 86967108 Email:				
Sex: Male	Age: 29	Date of Birth: 06/05/1988	Type of Informant: Driver				
Race: Malay			Language: Institution / School Name				
Occupation: DELIVERY DRIVER			Driving Licence Information: Class: Date of Expiry:				

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 10/11/2017 16:50	Type of Location Car Park
	TH AVENUE 3	ur nark		
Weather: Raining	on godin / Worldo o co	Road Surface: Wet	R	oad Speed Limit:
Traffic Flow:		Traffic Control:	T	raffic Volume:

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SHC2113J	TAXI					0
YM289U	Lorry					1

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

Police Report





Police Station Of Origin: Bedok North N.P.C

30 Bedok North Road SINGAPORE 469676

Tel No: 1800-2449999

2 of 3 Report No. T/20171110/2133

Name	MUHAMMAD RAMI	ID No		S8814739A		
				1.00.10		
Related Vehicle	YM289U (Lorry)			Conta	ct No.	86967108
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL Date Disc			charge	NIL	
No. of Days gran	ted Medical Leave					

CONTINUATION OF REPORT

Brief Details.

On the 10th November 2017 at about 4.50pm, I was driving my company's lorry, YM289U. I was driving in the car park when suddenly a taxi, SHC2113J, suddenly came out of the parking lot and hit onto my lorry's left portion. I was with my colleague namely Muhammad Bakhtiyar bin Jaffar, S8508956J, contact number: 83114219.

I then alighted from my lorry and talked to the taxi driver whom informed me to go to the police station with him to lodge a police report. I did not see any exterior damage as of now as it was raining. I have also yet to see if there's any damage to the goods in my company's lorry.

As I was finding a parking lot near to the police station, the taxi driver stopped in front of me and told me that he will be bringing his in-car camera footage to the traffic police and left. He did not exchange his particulars with me.

I do not have any in-car camera but there was a car SLN4933R, that stopped in my opposite direction and might have an in-car camera that caught the whole accident.

Police Report





Police Station Of Origin: Bedok North N.P.C

30 Bedok North Road SINGAPORE 469676

Tel No: 1800-2449999

3 of 3

Report No. T/20171110/2133

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 Reco G / Sgt 2 MOHAMED NASZF			Signature Of Informant:	
Signature Of Interpreter: Not applicable		ľ	Date/Time: 10/11/2017 17:24	
Officer In Charge Of Cas TP / HRT / SI ABDUL KAREEM BIN Contact No.: 65476079			Classification Of Case:	
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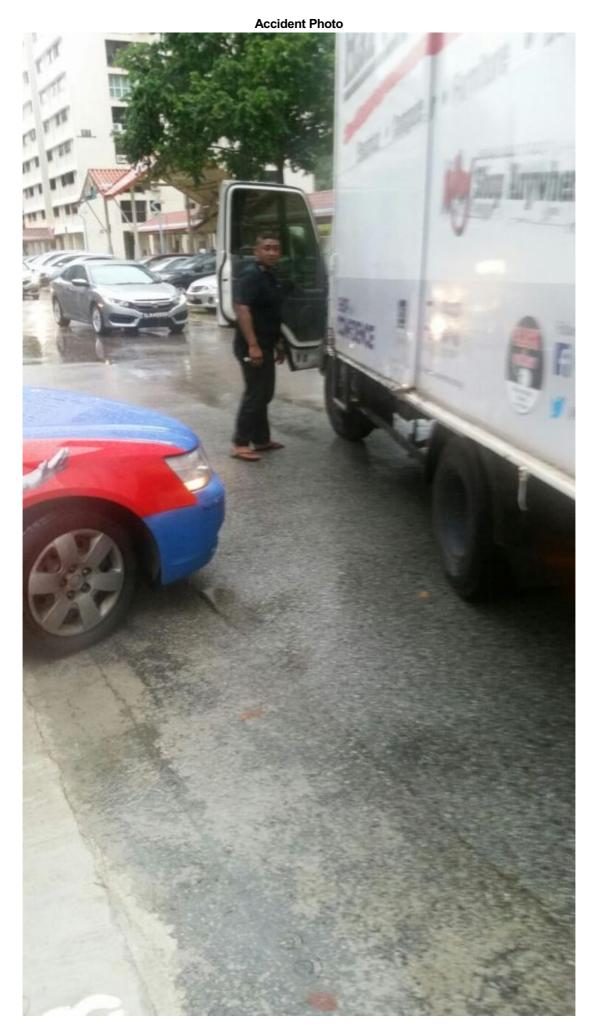












Driving License



CLASS 3 ~ 30 AUG 2016