

## 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	13/03/2018 11:26
Date Of Accident	12/03/2018 14:15
Exact Location Of Accident	PRIME SUPERMARKET OPEN SPACE CARPARK
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLE7583U
<b>Insured/Policyholder</b>	
Name Of Registered Owner	ISMAIL BIN HAMID
NRIC No	S0015644B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96640346
Alternative Phone No	OFFICE-96640346

### Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	E 200 K A
Exact Purpose for which vehicle was being used at time of accident	PRIVATE 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	PRIVATE CAR

### Insurance Company

Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SI17V12544/VPE/R00
Cover Note Number	

### Driver

Name of Driver	SITI ZAWIAH BINTE ISMAIL
NRIC No	S1540141I
Date Of Birth	07/10/1962
Occupation	INDOOR
Date Of Driving Pass	11/08/1997
Driving Experience	20 YEARS AND 7 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-96450732
Fax Number	
Contact Number	OFFICE-96450732
Email Address	NOEMAIL

Address	51 FIDELIO ST
Postcode	458439
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	SIDE SWIPE
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)	1

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	GEYLANG SERAI NEIGHBOURHOOD POLICE POST
Police Station Address	<b>ROAD:</b> BLK 111 ALJUNIED CRESCENT #01-102 , <b>POSTCODE:</b> 380111 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-7459999 - <b>FAX NO:</b> 67455673
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT - T/20180312/2117.

#### 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	UNKNOWN
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) 0

## Accident Sketch Plan

### 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)**

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.

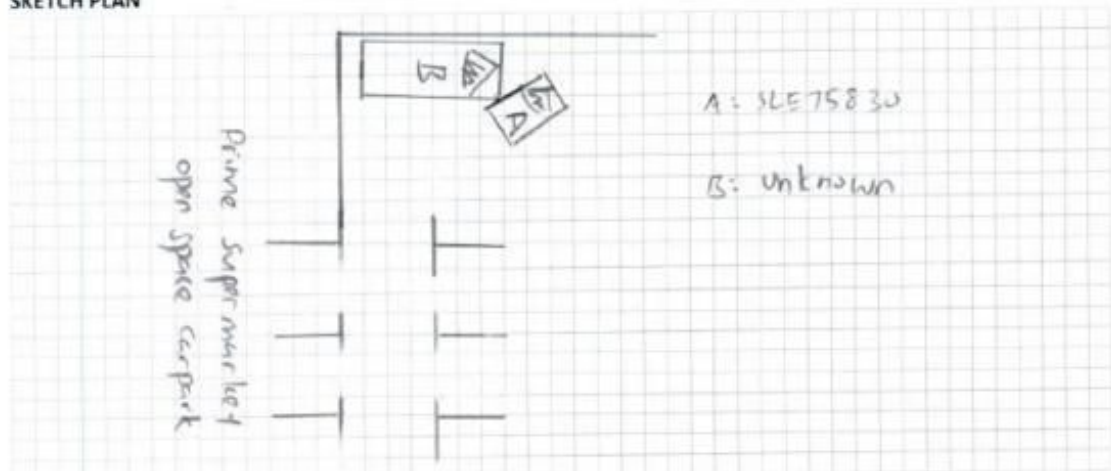
Policyholder's Signature  
Date & Time:

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

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

## Accident Sketch Plan

### SKETCH PLAN



### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

refer to police report - 7/20180312/217.

### 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:

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

# Police Report



**SINGAPORE  
POLICE FORCE**



T/20180312/2117

1 of 3

Report No. T/20180312/2117

Police Station Of Origin:  
Geylang Serai NPP  
111 Aljunied Crescent #01-102 SINGAPORE  
380111  
Tel No: 1800-7459999

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 12/03/2018 17:49	Vide Report No.:	Station Diary No.: 39
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### Informant's Particulars

Name of Informant: SITI ZAWIAH BINTE ISMAIL			Address: 51 FIDELIO ST SINGAPORE 458439		
ID Type / ID No.: NRIC NO / S15401411			Contact No.: Home/Office: 96450732      Mobile:		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 55	Date of Birth: 07/10/1962	Type of Informant: Driver		
Race: Malay			Language:		Institution / School Name:
Occupation: Housewife			Driving Licence Information: Class:      Date of Expiry:		

### General Information of the Accident

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 12/03/2018 14:15	Type of Location:
Location: Along Road 1 CHAI CHEE ROAD Carpark of Blk 25A Chai Chee Road				
Weather:		Road Surface:		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision:				Anyone conveyed by ambulance: No

### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLE7583U	Car				Slightly Damaged	0



## Police Report



**SINGAPORE  
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T/20180312/2117

2 of 3

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380111  
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### CONTINUATION OF REPORT

#### **Brief Details.**

On 12/03/2018 between 2pm to 2.30pm, I was looking for a parking lot at Blk 25A Chai Chee Road car park, behind Prime Supermarket. When I was reversing, I heard that my vehicle hit something, at the same time there was a car behind honking at me, but I did not realise that I had hit on to anything.

Since I cant get any parking lot there, I proceed to Marine parade to do my errands. It was then when I was placing my things at the back seat before leaving Marine Parade, only then I noticed that there was a dent on the rear left with some green paint on it.

I guessed that I had hit the lorry, I immediately drove back to the car park at Blk 25A Chai Chee to look for the lorry driver. I made a search for the vehicle that I might have accidentally hit on, but to no avail.

I would like to state that, I did not intentionally hit the vehicle and move off. Therefore I am lodging this report to cover myself and against any allegation that I hit the vehicle and move off.

Police Report



SINGAPORE  
POLICE FORCE



T/20180312/2117

3 of 3

Report No. T/20180312/2117

Police Station Of Origin:  
Geylang Serai NPP  
111 Aljunied Crescent #01-102 SINGAPORE  
380111  
Tel No: 1800-7459999

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:

G /

Staff Sgt KANG BAO LONG, JAMIE

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

12/03/2018 17:49

Officer In Charge Of Case:

TP / GIA /

Staff Sgt TANG SIEW PING

Contact No.: 65476430

Classification Of Case:

Authentication Stamp

NP168

SINGAPORE  
POLICE FORCE

SIGNATURE



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo

