

## 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	06/03/2018 16:42
Date Of Accident	03/03/2018 17:40
Exact Location Of Accident	911 PUNGGOL RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLL1037H
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LCRF PTE LTD
Co Reg No	201604597K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	Office-62414992

### Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL HYBRID-1.5 RS (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	REPORTING ONLY
Vehicle Category	PRIVATE HIRE

### Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	999995174
Cover Note Number	

### Driver

Name of Driver	MUHAMMAD RAZI BIN HARUN
NRIC No	S1656006E
Date Of Birth	30/06/1964
Occupation	OUTDOOR
Date Of Driving Pass	23/01/1995
Driving Experience	23 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL

Address	NOADDRESS
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	PAID DRIVER
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
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)	2
Passenger 1	Name: : NONAME Gender: : Male

### 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	<b>ROAD:</b> 30 BEDOK NORTH ROAD , <b>POSTCODE:</b> 469676 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-2449999 - <b>FAX NO:</b> 62447258
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

### Circumstances of Accident

REFER TO SKETCH PLAN

### 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	SGU6343C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
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

### 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 willful misrepresentation or withholding of material facts may allow insurance companies to reputate policy liability.
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. 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 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.
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.

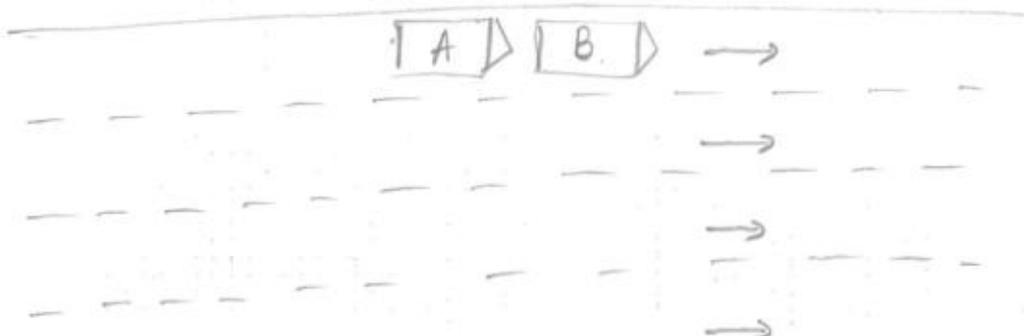


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



A: SLL103TH  
B: SGU 6348C

Sketch Plan #2

Describe Circumstances of the Accident

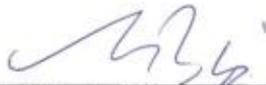
Refer to Police Report.

Declaration

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



**SINGAPORE  
POLICE FORCE**



G/20180305/2073

1 of 2

**POLICE REPORT (NP299)**

Report No. G/20180305/2073

Police Station Of Origin  
Bedok North N.P.C  
30 Bedok North Road SINGAPORE 469676  
Tel No: 1800-2449999

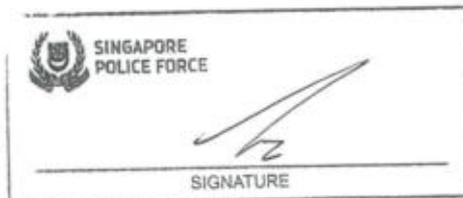
Date/Time Report Made 05/03/2018 13:28		Vide Report No.		Station Diary No. 40	
Name Of Informant MUHAMMAD RAZI BIN HARUN		Address APT BLK 64 NEW UPPER CHANGI ROAD #11-1160 SINGAPORE 460064			
ID Type / ID No. NRIC NO / S1656006E		Contact No. Home/Office		Mobile 90592992	
Nationality SINGAPORE CITIZEN		Email Address			
Occupation UBER DRIVER		Sex Male	Age 53	Date of Birth 30/06/1964	Race Malay
Institution/School Name		Language English			
Date/Time Of Incident 03/03/2018 17:40 - 03/03/2018 18:20		Location Of Incident 911 PUNGGOL ROAD SINGAPORE 829170 Actual location is along TPE before Punggol Rd exit under the over head bridge			

**Brief details.**

On the 03/03/2018, I was driving along TPE with a passenger in my vehicle Honda Vezel (SLL1037H). While driving along the said road, there is a vehicle MercedesE200 in-front of me bearing registration plate number SGU6343C. Suddenly the said vehicle made a stop but however I was not aware of it and subsequently banged my front vehicle to the said vehicle's rear. No injuries on all parties no ambulance was called no damage on government properties I am lodging this report for insurance purposes.

Signature Of Officer Recording The Report: G / Staff Sgt MUHAMMAD TARMIZI BIN ABDUL WAHAB	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 05/03/2018 13:28
Officer In-Charge Of Case: G / Bedok Police Divisional Investigation Branch / SI SHAFIE BIN OSMAN Contact No.: 62447200	Classification Of Case:

Authentication Stamp



**Sketch Plan #4**



**SINGAPORE  
POLICE FORCE**



G/20180305/2073

2 of 2

POLICE REPORT (NP299)

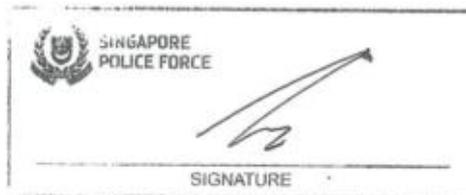
CONTINUATION OF REPORT

Report No. G/20180305/2073

Signature Of Officer Recording The Report: G / Staff Sgt MUHAMMAD TARMIZI BIN ABDUL WAHAB
Signature Of Interpreter: Not applicable
Officer In-Charge Of Case: G / Bedok Police Divisional Investigation Branch / SI SHAFIE BIN OSMAN Contact No.: 62447200

Signature Of Informant: 
Date/Time: 05/03/2018 13:28
Classification Of Case:

Authentication Stamp



Sketch Plan #5

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1656006E



Name: MUHAMMAD RAZI BIN HARUN  
محمد رازي بن هارون

Race: MALAY  
Date of Birth: 30-06-1964 Sex: M  
Country of Birth: SINGAPORE

S1656006E

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S1656006E



Name: MUHAMMAD RAZI BIN HARUN

Birth Date: 30 Jun 1964  
Issue Date: 05 Jul 2003

990634307B

1055885



NRIC No: S1656006E



Blood Group: O+ Date of issue: 23-08-1993

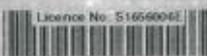
NRIC No: S1656006E Date: 12-02-1999 No: 2837092

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES:

Class	Description	PASS DATE
Class 2B	Motorcycles not exceeding 200 cc	27 Mar 1991
Class 2A	Motorcycles between 201 cc and 400 cc	17 Feb 1993
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	23 Jan 1995

NP 428A

Licence No: S1656006E



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



**Accident Photo**



Accident Photo



Accident Photo



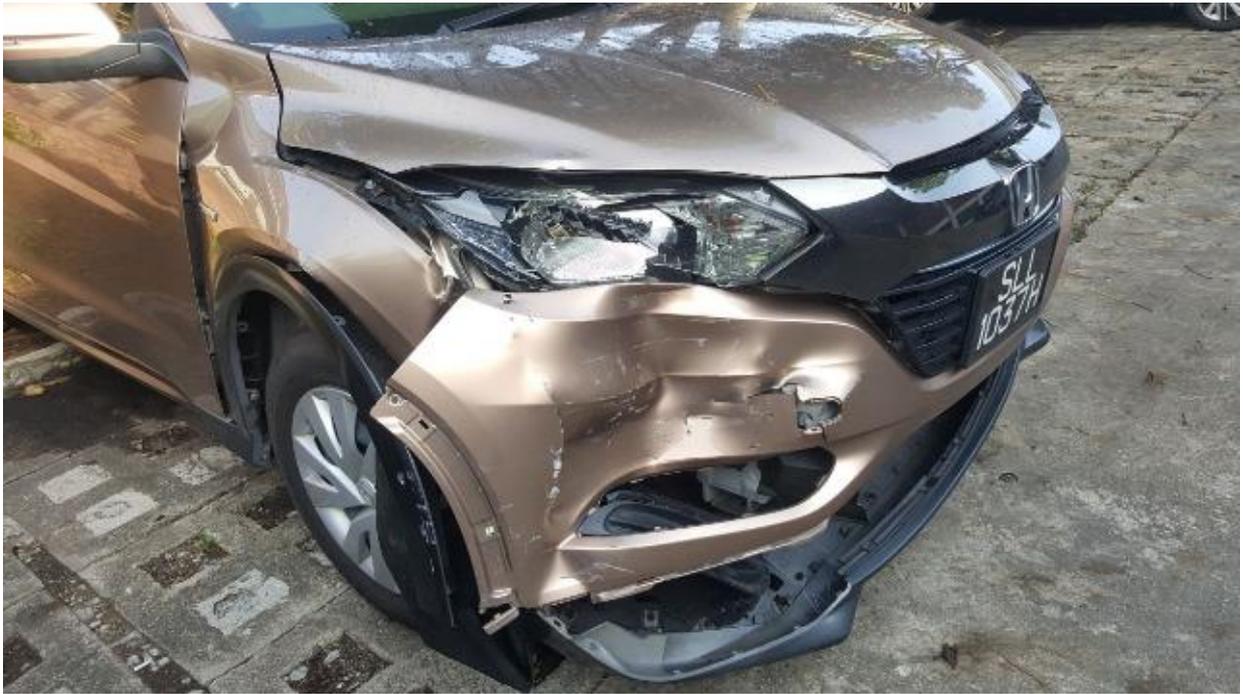
Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



**Accident Photo**



Accident Photo



Accident Photo



**Accident Photo**



Accident Photo

