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 <u>truthful and accurate</u> 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 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	20/03/2018 11:21
Date Of Accident	11/07/2017 08:15
Exact Location Of Accident	ALONG JALAN ISMAIL
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
/ehicle Registration Number	GBF3536X
nsured/Policyholder	
Name Of Registered Owner	IFFAH SERVICES
Co Reg No	53073373X
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96697916
Alternative Phone No	OFFICE-96697916
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	HIACE DX 3.0 M
Exact Purpose for which vehicle was being used at ime of accident	WORK
Are you claiming under your own insurance policy or repair to your vehicle?	NO
f No, Please state action to be taken	REPORTING ONLY
/ehicle Category	COMMERCIAL VEHICLE
nsurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5084208378
Cover Note Number	
Driver	
Name of Driver	ROSLAN BIN AHMAT
NRIC No	S1612340D
Date Of Birth	16/11/1963

NRIC No S1612340D

Date Of Birth 16/11/1963

Occupation OUTDOOR

Date Of Driving Pass 01/01/2016

Driving Experience 1 YEAR AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96697916

Fax Number

Contact Number OTHERS-96697916

EMail Address NOEMAIL

BLK 627 HOUGANG AVE 8 Address

#04-140

Postcode 530627

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

COLLIDED INTO PEDESTRIAN Type Of Accident

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

NO

NO

YES

NO

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name TRAFFIC POLICE DIVISION HQ

ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY: Police Station Address

SINGAPORE

Police Station Contact TEL NO: 65470000 - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20170711/2039 / 171014942711

Attachment(s)

YES Are accident photos available for attachment? Was there any video captured by Car Camera? NO Was there any audio recorded? NO

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- This Form must be completed by the Policyholder and/or the Authorised Driver.
- Information provided must be as <u>truthful and accurate as possible</u>, Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
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- 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.
- 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 :
 - 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:
 - 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.

X

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

Name: NRIC/FIN No.:

- GBF3536K - Pedestrian	RB Jin Ismail
Jin Evnus	
DESCRIBE CIRCUMSTANCES OF THE ACCID	
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	(1)
DECLARATION.	
DECLARATION I/We declare the foregoing particulars are true in	every respect.

Sketch Plan #3



T/20170711/2039

2 of 3

Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 Report No. T/20170711/2039

CONTINUATION OF REPORT

Brief Details.

AT THE ABOVE MENTIONED TIME AND LOCATION, I JUST FINISHED DELIVERY AT JALAN ISMAIL AND THERE WERE A LOT OF CARS PARKED ON THE SIDE OF THE ROAD. I WAS IN ONE OF THE SMALL ROADS AND IN ORDER FOR ME TO EXIT, I HAD TO REVERSE INTO THE MAIN ROAD. CHECKED THE ROAD WAS CLEAR FOR ME TO REVERSE. WHILE REVERSING, SUDDENLY I SAW FROM MY REAR VIEW MIRROR SOMEONE FELL AT BACK OF MY VEHICLE AND I STOPPED IMMEDIATELY AND WENT DOWN TO CHECK AND FOUND OUT THAT I COLLIDED ONTO A PEDESTRIAN WHO IS AN OLD LADY.

Sketch Plan #4



ROAD TRAFFIC ACT (CHAPTER 276) (SECTIONS 133, 134)

Traffic Police
Singapore Police Force
10, Util Avenue 3
Singapore 408865
Tel: 6547 0000
Fax: 6547 4749

Report No. 1710 1494 2711

Driving Licence/ID No./Ref:

S1612340D

(TP/IP/35715/2017)

DATE OF ISSUE: 20 Nov 2017

RR740762340SG

ROSLAN BIN AHMAT APT BLK 627 HOUGANG AVENUE 8 #04-140 SINGAPORE 530627

REGISTERED

Dear Sir / Madam,

NOTICE TO ATTEND COURT

You are now charged with the following charge(s):

Charge(s):

Demerit Points

9

YOU ROSLAN BIN AHMAT ARE CHARGED THAT YOU ON 11 JULY 2017 AT ABOUT 8.15 AM ALONG JALAN ISMAIL SINGAPORE, DID DRIVE/RIDE MOTOR VEHICLE GBF3536X WITHOUT REASONABLE CONSIDERATION FOR OTHER PERSONS USING THE ROAD, TO WIT, BY FAILING TO KEEP A PROPER LOOKOUT WHILE REVERSING, THUS RESULTING IN A COLLISION WITH A PEDESTRIAN, NAMELY ONE LOO CHEN LAN, FEMALE CHINESE, 83 YEARS OLD, WHO WAS CROSSING THE ROAD FROM YOUR LEFT TO RIGHT, AND YOU HAVE THEREBY COMMITTED AN OFFENCE PUNISHABLE UNDER SECTION 65(b) OF THE ROAD TRAFFIC ACT, CHAPTER 276.

You are hereby required to appear on 17 Jan 2018 at 9.30 am in person before Court No. 21 of the State Courts at 1 Havelock Square, Singapore 059724, and you are hereby warned that if you, without just excuse, fail to appear before the Court on the said date and time, a warrant of arrest may be issued to compel your attendance and you may be required to show cause why you should not be punished for failing to attend Court.

Yours faithfully,

HEAD INVESTIGATION TRAFFIC POLICE

This is computer generated and does not require a signature.

NP 404

Page 1 of 1

Status of Driving Licence

QUALIFIED DRIVING LICENCE

Qualified Driving Licence No. :

S1612340D

Status of Qualified Driving Licence: Invalid

Class of Qualified Driving Licence:

Valid for life unless revoked,

Expiry Date:

suspended or disqualified. 28/02/2018 To: 29/04/2018

Disqualification Date:

PROVISIONAL DRIVING LICENCE

Provisional Driving Licence No.:

S1612340D

Status of Provisional Driving Licence : No Licence Class of Provisional Driving Licence :

Expiry Date :

The above information is accurate as at 19/03/2018 12:01 AM.

Kirzy 2000 Com Organistic Com

https://eddies.police.gov.sg/licencestatus/xhtml/layout/Frame.xhtml

3/19/2018





























Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20170711/2039

REPORT	F A TRAFFIC	CACCIDENT			
Date/Time Report Made: 11/07/2017 10:24		fade:	Vide Report No.:	Station Diary No.	
Informa	nt's Partic	ulars	BE DATE TO BE		
Name of Informant: ROSLAN BIN AHMAT			Address: APT BLK 627 HOUGANG AVE 8 #04-140 HDB-HOUGANG SINGAPORE 530627		
ID Type / ID No.: NRIC NO / \$1612340D		40D	Contact No.: Home/Office:	Mobile: 96697916	
National SINGAP	ity: ORE CITIZ	EN	Email:		
Sex: Male	Age: 53	Date of Birth: 16/11/1963	Type of Informant: Driver		
Race: Javanese			Language: Malay	Institution / School Name:	
Occupation: Postman			Driving Licence Information Class: 3	Date of Expiry:	

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 11/07/2017 08:30	Type of Location T-Junction	
Location: Along Road 1 JALAN ISMA Weather: Clear		Road Surface:	F	Road Speed Limit:	
Traffic Flow: Traffi		Traffic Control:	1.00	Traffic Volume: No Traffic	
Traffic Flow: One Way		Not Controlled	P	lo Traffic	

Details of Vehicle Involved				一		
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
GBF3536X	Van				No Damage	0





2 of 3

Report No. T/20170711/2039

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

CONTINUATION OF REPORT

Brief Details.

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Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20170711/2039

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: TP / AZRUL AZWAN BIN MD SA'AD	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 11/07/2017 10:24
Officer In Charge Of Case: TP / GIT / Staff Sgt SYED ZAYID MUHAMMAD BIN SYED ABDUL WAHID ALHINDUAN Contact No.: 65476394	Classification Of Case:



ROAD TRAFFIC ACT (CHAPTER 276) (SECTIONS 133, 134)

Traffic Police Singapore Police Force 10, Ubi Avenue 3 Singapore 408865 Tel: 8547 0000 Fax: 6547 4749

Report No. 1710 1494 2711

Driving Licence/ID No./Ref :

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