

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 | 23/03/2018 10:12 |
| Date Of Accident | 10/02/2018 17:20 |
| Exact Location Of Accident | PASIR RIS DR 3 TWDS LOYANG |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------------------|
| Vehicle Registration Number | SJF7099U |
| Insured/Policyholder | |
| Name Of Registered Owner | NEEDS CARS |
| Co Reg No | 53360290D |
| Email Address | NOEMAIL |
| Mobile Phone No | (LOCAL) +65-90678767 |
| Alternative Phone No | OFFICE-90678767 |

Vehicle Particulars

| | |
|--|---------------------|
| Manufacturer | TOYOTA |
| Model | WISH 1.8X LIMITED A |
| Exact Purpose for which vehicle was being used at time of accident | COMMERCIAL |
| 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 | NTUC INCOME INSURANCE CO-OPERATIVE LTD |
| Type Of Coverage | THIRD PARTY |
| Fleet Policy | YES |
| Policy Number | 5091731828 |
| Cover Note Number | |

Driver

| | |
|----------------------|----------------------------|
| Name of Driver | HAJI SHAMSURI BIN A RAHMAN |
| NRIC No | S7017324G |
| Date Of Birth | 02/06/1970 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 19/03/1998 |
| Driving Experience | 19 YEARS AND 10 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-92472366 |
| Fax Number | |
| Contact Number | OFFICE-92472366 |
| Email Address | NOEMAIL |

| | |
|---|--------------------------------------|
| Address | BLK 234 PASIR RIS DRIVE 4 #09-468 |
| Postcode | 510234 |
| Was driver an employee of the Insured's Company | NO |
| If No, Relationship of the Driver with the Insured | OTHER - HIRER |
| Vehicle Registration Number of Driver's Own Vehicle | - |
| | - |
| | - |
| Insurance Company of Driver's Own Vehicle | - |
| | - |
| | - |

General Information of the Accident

| | |
|--------------------|--------------|
| Type Of Accident | NO COLLISION |
| 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? | |
| 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 | PASIR RIS NEIGHBOURHOOD POLICE CENTRE |
| Police Station Address | ROAD: 1 PASIR RIS DRIVE 4 , POSTCODE: 519457 , COUNTRY: SINGAPORE |
| Police Station Contact | TEL NO: 1800-5852999 - FAX NO: 65855261 |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

REFER TO POLICE REPORT - G/20180318/2147.

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 | SHD7132R |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | TAXI |
| Name of Driver | |
| NRIC/Passport Number | |
| Contact Number | |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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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 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 - G/20180318/2147.

DECLARATION

1/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**



G/20180318/2147

1 of 2

Report No. G/20180318/2147

POLICE REPORT (NP299)

Police Station Of Origin
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

| | | |
|---|---|-------------------------|
| Date/Time Report Made 18/03/2018 23:41 | Vide Report No. | Station Diary No. 78 |
| Name Of Informant HAJI SHAMSURI BIN A RAHMAN | Address APT BLK 234 PASIR RIS DRIVE 4 #09-468 SINGAPORE 510234 | |
| ID Type / ID No. NRIC NO / S7017324G | Contact No. Home/Office | Mobile 92472366 |
| Nationality SINGAPORE CITIZEN | Email Address | |
| Occupation SAFETY COORDINATOR | Sex Male | Age 47 |
| Institution/School Name | Date of Birth 02/06/1970 | Race Javanese |
| Date/Time Of Incident 18/03/2018 21:40 | Location Of Incident 234 PASIR RIS DRIVE 4 #09-468 HDB-PASIR RIS SINGAPORE 510234 Through Whatsapp | |

Brief details.

On 28/02/2018, I returned the rented vehicle (SJF7099U) back to the rental company "Needs Cars". After returning the rented vehicle, I have a grace period of 2 weeks before receiving my deposit of SGD1000/- back from the rental company.

On 15/03/2018, I still did not receive my deposit from my rental company. The staff from the rental

| | |
|--|--------------------------------|
| Signature Of Officer Recording The Report: G / Staff Sgt MOHAMAD ADHA BIN MOHAMAD ADAM | Signature Of Informant: |
| Signature Of Interpreter: Not applicable | Date/Time: 18/03/2018 23:41 |
| Officer In-Charge Of Case: G / Bedok Police Divisional Investigation Branch / SI SEAH MING HUI, ROGER Contact No.: 62447698 | Classification Of Case: |

Authentication Stamp



Police Report



SINGAPORE
POLICE FORCE



G/20180318/2147

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20180318/2147

company informed that he was driving and would return back my deposit to my bank account later. On the next day, I still did not receive my deposit and again I contacted the staff of the rental company. The person claimed to have forgotten to return my deposit. Till the 18/03/2018, I did not receive my deposit. I contacted the person again and this time round he responded by sending me 2 photos of letters from NTUC Income stating that the vehicle that I rented was involved in an accident with another vehicle (SHD7132R) on 10/02/2018. The claim expected on the letter was SGD2716/-

I wish to state that I was not involved in any accident during the period that I rented the vehicle. When I requested for the original NTUC Income letter, the person refused to provide me with it. The letter only stated the vehicles involved in the accident and the date the accident took place. There was no indication of the location of the accident. The person only showed me the letter through "WhatsApp" on 18/03/2018. The letter was dated 27/02/2018 however I was not informed of the accident previously. I am lodging the report to bring up the matter to IDAC to check if there was indeed any claim made for this particular accident.

Signature Of Officer Recording The Report:

G / Staff Sgt MOHAMAD ADHA BIN MOHAMAD
ADAM

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:
G / Bedok Police Divisional Investigation Branch /
SI SEAH MING HUI, ROGER
Contact No.: 62447698

Authentication Stamp



SINGAPORE
POLICE FORCE

SIGNATURE

Signature Of Informant:

Date/Time:
18/03/2018 23:41

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

