

MCD618036156-01 / ComfortDelGro Engineering Pte Ltd - L6y5HQ  
 ENTRY DATE & TIME: 16/03/2018 14:50  
 SUBMITTED BY: Catherine Per May Juan

### 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	16/03/2018 14:50
Date Of Accident	15/03/2018 20:00
Exact Location Of Accident	DORSET RD X DURHAM RD
Country/State of Loss	SINGAPORE

#### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHA7941M
<b>Insured/Policyholder</b>	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768
<b>Vehicle Particulars</b>	
Manufacturer	HYUNDAI
Model	I40
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	THIRD PARTY
Vehicle Category	TAXI
<b>Insurance Company</b>	
Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	MCOM0015
Cover Note Number	
<b>Driver</b>	
Name of Driver	RAZALI B RADI
NRIC No	S1483079J
Date Of Birth	28/05/1961
Occupation	OUTDOOR
Date Of Driving Pass	09/02/1990
Driving Experience	28 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
Email Address	ASRIDA18@YAHOO.COM.SG

Address 462 #07-58 TAMPINES STREET 44  
 Postcode 520462  
 Was driver an employee of the Insured's Company NO  
 If No, Relationship of the Driver with the Insured OTHER - TAXI DRIVER  
 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  
 Was any body injured in the Accident? YES  
 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: : -  
 GENDER: : MALE

**Details of Police Action**

Was the accident reported to the police? YES  
 If Yes,Please state which Police Station  
 POLICE STATION NAME [OTHER] TAMPINES NPC  
 Was notice of intended Prosecution given? NO  
 If Yes,against whom?

**Circumstances of Accident**

SEE POLICE REPORT.

**Attachment(s)**

Are accident photos available for attachment? YES  
 Was there any video captured by Car Camera? YES  
 Remarks/ Reasons: -  
 Was there any audio recorded? NO

**DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number SHC3190D  
 Vehicle Make/Model/Colour  
 Details Of Properties  
 Vehicle Category TAXI  
 Name of Driver JOGINDER DASS  
 NRIC/Passport Number S2018347J  
 Contact Number  
 Address  
 Postcode  
 Insurance Company Name

Nature Of Damage

RHT FRT

No. Of Passenger (Including Driver)

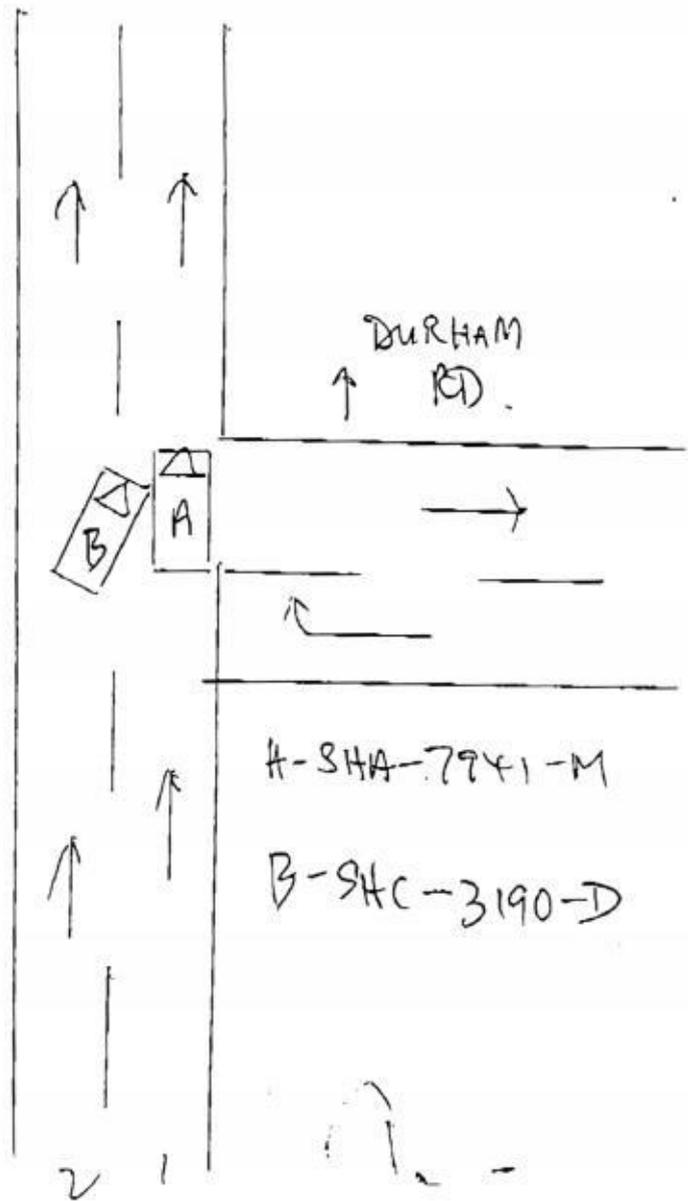
**DETAILS OF INJURED PERSON 1**

Name	RAZALI B RADI
Approximate Age	57
Injuries Sustain	NECK,BACK,SHOULDER
Injured person in which vehicle?	SHA7941M
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	





# Dorset Road



16-03-18  
 RAZALI B. RADI  
 S1483079 J.


**SINGAPORE  
POLICE FORCE**


T/20180316/2045

1 of 3

Police Station Of Origin:  
Tampines N.P.C  
6 Tampines Avenue 4 SINGAPORE 529682  
Tel No: 1800-5871999

Report No. T/20180316/2045

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 16/03/2018 11:36	Vide Report No.:	Station Diary No.: 45
--	------------------	--------------------------

**Informant's Particulars**

Name of Informant: RAZALI BIN RADI		Address: APT BLK 462 TAMPINES STREET 44 #07-58 SINGAPORE 520462	
ID Type / ID No.: NRIC NO / S1483079J		Contact No.: Home/Office: Mobile: 91449665	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 56	Date of Birth: 28/05/1961	Type of Informant: Driver
Race: Javanese		Language:	Institution / School Name:
Occupation: Taxi driver		Driving Licence Information: Class: Date of Expiry:	

**General Information of the Accident**

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 15/03/2018 20:00	Type of Location: Straight Road
Location: Along Road 1 DORSET ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHA7941M	Car	HYUNDAI	I40 1.7 CRDI F/L AT ABS AIRBAG 4DR	Blue		0
SHC3190D	Car	HYUNDAI	I40 1.7L CRDI AT ABS AIRBAG 4DR	Blue		0


**SINGAPORE  
POLICE FORCE**


T/20180316/2045

2 of 3

Police Station Of Origin:  
Tampines N.P.C  
6 Tampines Avenue 4 SINGAPORE 529682  
Tel No: 1800-5871999

Report No. T/20180316/2045

## CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	RAZALI BIN RADI	ID No.	S1483079J
Related Vehicle	SHA7941M (Car)	Contact No.	91449665
Hospital/Clinic	W Y TEH FAMILY CLINIC AND SURGERY	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	16/03/2018	Date Discharge	NIL
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Driver			
Name	JOGINDER DASS	ID No.	S2018347J
Related Vehicle	NIL	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 15/3/2018 at about 2000hrs, I was driving along Dorset Road towards Orchard Road. I was in the right lane at that time.

As I was driving, there was another taxi from the other lane which had signaled his intention to change lane. However, he had immediately attempted to change his lane once he had signaled. As a result, the other taxi had collided into the left side of my taxi.

I had made a check and there were no visible injuries on parties involved. I had then taken photos of the scene and exchanged particulars with the other driver. As a result of the accident, my left front passenger door was dented.

On 16/3/2018, I woke up and felt pain in my lower back and neck. As such I went to W Y Teh Clinic for outpatient treatment and I received medical leave from 16/3/18-18/3/18.



# SINGAPORE POLICE FORCE



T/20180316/2045

Police Station Of Origin:  
Tampines N.P.C  
6 Tampines Avenue 4 SINGAPORE 529682  
Tel No: 1800-5871999

3 of 3

Report No. T/20180316/2045

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 /  
Sgt 2 BRYAN LIM GHIM SONG 

Signature Of Informant:  


Signature Of Interpreter:  
Not applicable

Date/Time:  
16/03/2018 11:36

Officer In Charge Of Case:  
TP/ AEIT /  
 SSI SITI MARSLIA BINTE BOHARI  
SINGAPORE POLICE FORCE  
Contact No.: 65476219

Classification Of Case:

Authentication Stamp  
NP168   
SIGNATURE