

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	02/04/2018 15:48
Date Of Accident	31/03/2018 13:30
Exact Location Of Accident	PIE TOWARDS TUAS (NEAR KALLANG EXIT)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLX1032H
Insured/Policyholder	
Name Of Registered Owner	MICRO CREDIT (CAR LEASING) PTE LTD
Co Reg No	200910504E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90499954
Alternative Phone No	OFFICE-90499954

Vehicle Particulars

Manufacturer	HONDA
Model	SHUTTLE-1.5 G (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	THIRD PARTY
Vehicle Category	PRIVATE HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5098445727 (CLASSIC)
Cover Note Number	

Driver

Name of Driver	MAS AGUS HARRYANTO BIN ARPONEN
NRIC No	S8915631I
Date Of Birth	04/05/1989
Occupation	OUTDOOR
Date Of Driving Pass	13/06/2008
Driving Experience	9 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90499954
Fax Number	
Contact Number	OFFICE-90499954
EEmail Address	NOEMAIL

Address	2 JALAN BUKIT MERAH #11-5158
Postcode	S150002
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - RENTAL
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?	YES
Was any injured conveyed to hospital by ambulance?	YES
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)	3
Passenger 1	NAME: : - GENDER: : FEMALE
Passenger 2	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	QUEENSTOWN N.P.C
Police Station Address	ROAD: 3 QUEENSWAY #01-03 , POSTCODE: 149073 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4719999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE SEE ATTACHED POLICE REPORT. ATTENDED BY : SUSAN

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	SLD4551L
Vehicle Make/Model/Colour	TOYOTA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LOW LEONG CHAI

NRIC/Passport Number	S1249204I
Contact Number	983023592
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLV7964P
Vehicle Make/Model/Colour	SALOON
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)	

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SKA8182U
Vehicle Make/Model/Colour	SALOON
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)	

DETAILS OF INJURED PERSON 1

Name	DRIVER / PASSENGER
Approximate Age	
Injuries Sustain	REFER TO POLICE REPORT
Injured person in which vehicle?	SLV7964P
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

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:

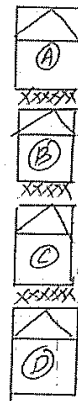
Driver's Signature
(If driver is not the policyholder)
Date & Time:

- 2 APR 2018

IDAC BUKIT BATOK (VAC)

511 Bukit Batok Street 23
Singapore 659545
Tel: 6560 3312 Fax: 6569 0722
Email: vacbh@singnet.com.sg
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

P.F. towards Thas.
Near Kallang Exit.



(A) = SIX1032H
 (B) = SLD4551Z
 (C) = SLV77741D
 (D) = SKA81824

Please Refer to Police Report

Report No: 7/20180331/2019

I/We declare the foregoing particulars are true in every respect.

Signature _____
is not the police
name: _____

511 Bukit Batok Street 23
Singapore 659545
Tel: 6560 3312 Fax: 6569 0722
Email: vacbb@singnet.com.sg

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



**SINGAPORE
POLICE FORCE**



T/20180331/2069

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

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Report No. T/20180331/2069

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 31/03/2018 16:07		Vide Report No.: G/20180331/0133		Station Diary No.: 33	
Informant's Particulars					
Name of Informant: MAS AGUS HERRYANTO BIN SARPONEN			Address: APT BLK 2 JALAN BUKIT MERAH #11-5158 SINGAPORE 150002		
ID Type / ID No.: NRIC NO / S8915631I			Contact No.: Home/Office: Mobile: 90499954		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 28	Date of Birth: 04/05/1989	Type of Informant: Driver		
Race: Javanese			Language: English		Institution / School Name:
Occupation: GRAB DRIVER			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 31/03/2018 13:30	Type of Location: Straight Road
Location: Along Road 1 PAN ISLAND EXPRESSWAY Along PIE towards Tuas, near to Kallang exit				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLD4551L	Car	TOYOTA	SIENTA HYBRID 1.5X A	Blue	Slightly Damaged	2
SLX1032H	Car	HONDA	SHUTTLE HYBRID 1.5 AUTO	Black	Slightly Damaged	2



**SINGAPORE
POLICE FORCE**



T/20180331/2069

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

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Report No. T/20180331/2069

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LOW LEONG CHAI	ID No.	S1249204I
Related Vehicle	SLD4551L (Car)	Contact No.	98302592
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
Driver			
Name	MAS AGUS HERRYANTO BIN SARPONEN	ID No.	S8915631I
Related Vehicle	SLX1032H (Car)	Contact No.	90499954
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 31/03/2018 at about 1330 hrs, I was driving my car, SLX1032H along PIE towards Tuas, near to Kallang exit. I was on the most right lane. The traffic flow was slightly congested thus vehicles were moving slowly and intermittent. The vehicle in front of me came to a stop thus I stepped on my brake and came to a stop.

Suddenly, the car, SLD4551L behind me collided onto my car. My car inched forward due to the collision however did not hit onto the vehicle in front of me. I then got out of my car and realized that it is a chain collision. Total 4 cars were involved including my car. The last car, SKA8182U had collided onto the third car, SLV7964P who then hit onto the car behind my car. Due to the impact of collision between the fourth and third car, the car behind me got pushed forward and collided onto my car. I am sure that the car behind me had come to a stop before colliding onto my car.

Due to the collision, there are scratches and dents on the rear bumper and boot of my vehicle. There are also dents and scratches on the front and rear bumper of SLD4551L due to collision. I do not sustained injuries neither the driver and passenger of the car behind. However, the driver and a passenger of the third car were conveyed by Ambulance.

I wish to add that I do not have the particulars of the driver and passenger of the third and fourth car. Traffic Police and Ambulance were at scene. No government property damaged. I am lodging this report for insurance purposes.



**SINGAPORE
POLICE FORCE**



T/20180331/2069

Police Station Of Origin:
Queenstown N.P.C
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Tel No: 1800-4719999

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Report No. T/20180331/2069

CONTINUATION OF REPORT



**SINGAPORE
POLICE FORCE**



T/20180331/2069

Police Station Of Origin:
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3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

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Report No. T/20180331/2069

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: D / Sgt 2 HIDAYAT BIN SELAMAT	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 31/03/2018 16:07
Officer In Charge Of Case: TP / GIT / Sgt 2 MARIAH BINTE ZAKARIA Contact No.: 65476433	Classification Of Case:
Authentication Stamp NP168	

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

