MSME18054568 / SME Motor Pte Ltd - Kaki Bukit ENTRY DATE & TIME: 25/04/2018 15:45 SUBMITTED BY: Chia Pei Ying

### 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</u> and <u>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	25/04/2018 15:45
Date Of Accident	24/04/2018 22:15
Exact Location Of Accident	JURONG LAKE LINK SLIP RD BOON LAY WAY
Country/State of Loss	SINGAPORE
호하다 살은 문 아이들 마음이 하는데 그들은 사람이 살아 하지만 사람들은 회사를 받았습니다. 하지만 보스스트를	

,		
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SLM6578A	
Insured/Policyholder		
Name Of Registered Owner	ALITO EL FETLEASE DTE LTD	

Name Of Registered Owner AUTO FLEETLEASE PTE LTD

Co Reg No 201608614Z
Email Address NOEMAIL

Mobile Phone No

Alternative Phone No OFFICE-96179470

Vehicle Particulars

Manufacturer TOYOTA
Model SIENTA

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 CAR

**Insurance Company** 

Name of Insurance Company AIG ASIA PACIFIC INSURANCE PTE. LTD.

Type Of Coverage COMPREHENSIVE

Fleet Policy NO

Policy Number 999994676

Cover Note Number

Driver

Name of Driver FAIZAL BIN ABDUL WAHAB

 NRIC No
 \$8026056C

 Date Of Birth
 02/09/1980

 Occupation
 INDOOR

 Date Of Driving Pass
 22/08/2005

Driving Experience 12 YEARS AND 8 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-96179470

Fax Number

Contact Number

EMail Address NOEMAIL

Address BLK 409 YISHUN RING ROAD #07-1805

Postcode 760409

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

√ehicle

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? 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 2

YES

Number of Passengers (Including Driver)

Passenger 1

NAME:

: UNKNOWN

GENDER:

: MALE

**Details of Police Action** 

Was the accident reported to the police?

If Yes, Please state which Police Station

in 100,1 10000 State Willer I one

Police Station Name TRAFFIC POLICE DIVISION HQ

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

SINGAPORE

Police Station Contact TEL NO: 65470000 - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

REFER TO POLICE REPORT: T/20180425/7003.

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 SLU849R

Vehicle Make/Model/Colour

Details Of Properties VEHICLE B
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 Pg. 1

#### SKETCH PLAN

## **IMPORTANT NOTICE**

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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 aforesald.
- 8. Consent under the Personal Data Protection Act (POPA)

Lunderstand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GtA") 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)
  - (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

with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time:

Oriver's fignature (If oriver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

NRIC/FIN No.:

OMBAC SketchFlinFoots ys

NEW HOLD TECK

# Sketch Plan #2 Pg. 1

SKETCH PLAN		
		JUVONG LATE LINE Slip Rd Boon layway
	A>	
	0	A: SLM6578A.
	4/4	B: SLU 849R
DESCRIBE CIRCUMSTANCES OF TH		10
Pleane refer to po	olice report: T/21	0180425/7003.
DECLARATION  I/We declare the foregoing parityulars are	true in every respect.	
* ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (		
Policyholder's Signature  Date & Time:	Driver's Signature of driver is not the policyholder Date & Time:	Reporting Centre Personnel's Signature r) Name: NRIC/FIN No.:

## Sketch Plan #3 Pg. 1





T/20180425/7003

Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20180425/7003

### REPORT OF A TRAFFIC ACCIDENT

	Time Report Made: 4/2018 11:42		Vide Report No.:	Station Diary No.:	
Informant	's Particul	ars			
Name of Informant: FAIZAL BIN ABDUL WAHAB			Address: APT BLK 409 YISHUN RING ROAD #07-1805 SINGAPORE 760409		
ID Type / ID No.: NRIC NO / S8026056C			Contact No.: Home/Office: Mobile: 96179470		
Nationality: SINGAPORE CITIZEN		Email: dadoxx1001@gmail.com			
Sex: Male	Age: 37	Date of Birth: 02/09/1980	Type of Informant: Driver		
Race: Malay		Language: Institution / School Name: English			
Occupation: PROJECT MANAGER		Driving Licence Information: Class: Date of Expiry:			

Type of Accident:	Non-Injury Hit and Run	Drink Drive:	Date/Time of Accident:	Type of Location: T-Junction	
Location:		l No	24/04/2018 22:1	<u> </u>	
JURONG LAI	KE LINK				
JURONG LAI	KE LINK SLIP ROAD I	BOON LAY WAY			
Weather:		Road Surface:		Road Speed Limit:	
Clear		Dry			
Traffic Flow:		Traffic Control: Traffic Light - Wor	Traffic Volume: Light		
Trainer low.					

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLM6578A		TOYOTA	SIENTA			0
SLU849R		MAZDA				0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

## Sketch Plan #4 Pg. 1





T/20180425/7003

Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20180425/7003

### CONTINUATION OF REPORT

Driver						
Name	FAIZAL BIN ABDUL WAHAB		ID No	•	S8026056C	
Related Vehicle	SLM6578A			Conta	ict No.	96179470
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL Date Disc			narge	NIL	
No. of Days granted Medical Leave NIL D			Degree of	Injury	NIL	

### Brief Details.

I was traveling straight along Jurong Lake Link on the left lane out of two lanes in vehicle no. "SLM6578A"

I slowed and stopped at the stop line at the slip road of Jurong Lake Link towards Boon Lay Way to check for oncoming traffic.

Suddenly, vehicle which was on the right of me encroached into my lane and hit onto the whole front right portion of my vehicle and caused damages.

After the impact, the vehicle did not stop and proceeded to drive off.

I reviewed my camera after the accident and saw that the third party vehicle carplate is SLU849R.

# Sketch Plan #5 Pg. 1





Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865

Of Ovicing

Tel No: 65470000

3 of 3 Report No. T/20180425/7003

CONTINUATION OF REPORT

Sketch Plan

NP168

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 25/04/2018 11:42
Officer In Charge Of Case: TP / TPIB / KALESWARI PALANI Contact No.: 65476902	Classification Of Case:
Authentication Stamp	