

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	23/04/2018 16:56
Date Of Accident	22/04/2018 20:45
Exact Location Of Accident	UPPER CHANGI ROAD TOWARDS BEDOK RD AFTER SIMEI AVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJL422J
Insured/Policyholder	
Name Of Registered Owner	MUHAMMAD ABDULLAH BIN BUANG
NRIC No	S7370540A
Email Address	MUHDD2PRODUCTIONS@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96602447
Alternative Phone No	OFFICE-60000000

Vehicle Particulars

Manufacturer	HYUNDAI
Model	AVANTE-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA288767/1
Cover Note Number	

Driver

Name of Driver	MUHAMMAD ABDULLAH BIN BUANG
NRIC No	S7370540A
Date Of Birth	15/03/1973
Occupation	INDOOR
Date Of Driving Pass	06/08/1996
Driving Experience	21 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96602447
Fax Number	
Contact Number	OFFICE-60000000
EEmail Address	MUHDD2PRODUCTIONS@GMAIL.COM

Address BLK 606 BEDOK RESERVOIR ROAD #06 -730
 470606
 Postcode
 Was driver an employee of the Insured's Company NO
 If No, Relationship of the Driver with the Insured OWNER
 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? 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) 5

Passenger 1

NAME: : JAMAIH BTE ABAS

GENDER: : FEMALE

Passenger 2

NAME: : JURAI DAH BTE BUANG

GENDER: : FEMALE

Passenger 3

NAME: : HAMIZAWAH BTE AD HARIM

GENDER: : FEMALE

Passenger 4

NAME: : MUHANAD HALI ARYYAN BIN MUHAMAD ABDULLAH

GENDER: : MALE

Details of Police Action

Was the accident reported to the police? NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

Report Please refer to sketch plan

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 SJV2070A

Vehicle Make/Model/Colour

Details Of Properties

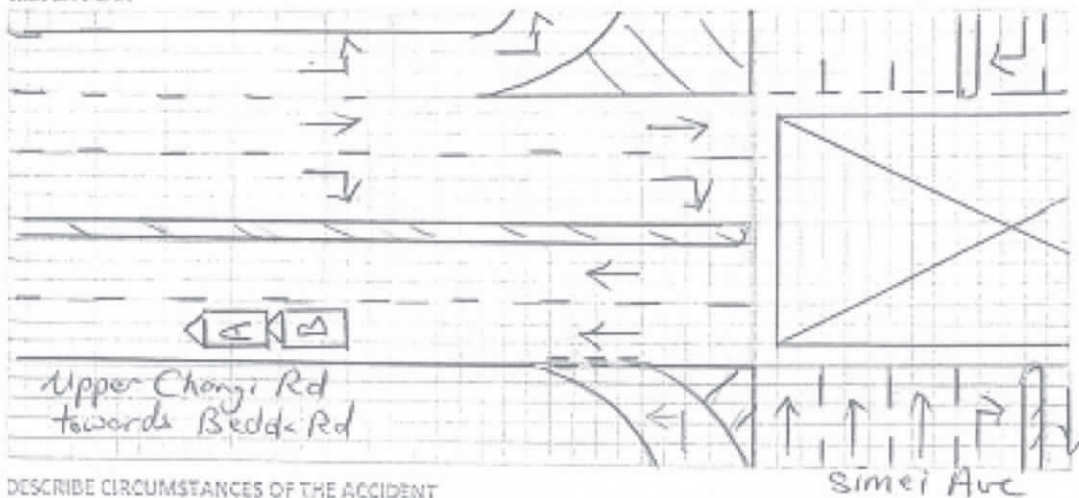
Vehicle Category

Name of Driver

PRIVATE CAR

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 22/04/2018 at about 2045 hrs at along Upper Changi Road towards Bedok Road after Simei Ave. I was travelling on the extreme left lane and when my front vehicle slow down and stop due to heavy traffic hence I follow suit. Suddenly I heard a loud bang from behind and when I alighted, I realised that it was Vehicle (B) who hit onto my Rear Portion of my Vehicle (A) causing damages to my vehicle. I have Four Passengers inside my vehicle.

(A) SJL 422 J

(B) SJV 20FOA

DECLARATION

I/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/ID No: