

## 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	30/04/2018 12:42
Date Of Accident	22/04/2018 18:00
Exact Location Of Accident	BKE TOWARDS WOODLANDS
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBH3089J
<b>Insured/Policyholder</b>	
Name Of Registered Owner	GOLDBELL CAR RENTAL PTE LTD
Co Reg No	200710651D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91089371
Alternative Phone No	OFFICE-91089371

### Vehicle Particulars

Manufacturer	NISSAN
Model	NV200
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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	SD18V00032/VCZ/R03
Cover Note Number	

### Driver

Name of Driver	RAHMAN BIN PAUSI
NRIC No	S7312134E
Date Of Birth	12/04/1973
Occupation	OUTDOOR
Date Of Driving Pass	15/01/2013
Driving Experience	5 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91089371
Fax Number	
Contact Number	OTHERS-91089371
EEmail Address	NOEMAIL

Address	BLK 484 SEGAR ROAD #07-332
Postcode	670484
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	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	2
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
Number of Passengers (Including Driver)	1

#### 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

PLEASE REFER TO SKETCH AND POLICE REPORT T/2018

#### 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	YN7352T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	GANDHI MOHANDHAS
NRIC/Passport Number	G2519014P
Contact Number	86155479
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## Accident Sketch Plan

### SKETCH PLAN

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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 Traffic Police Department for investigation.
6. This report will be forwarded by the insurers to 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.
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 sending 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 envelope/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/are 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.

 <p>Policyholder's Signature _____ Date &amp; Time _____</p>	<p>Driver's Signature (if driver is not the policyholder) / Date &amp; Time _____</p>	<p>Witnessed by Reporting Centre Personnel _____ Date &amp; Time _____</p>
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Sketch Plan \*



# Accident Sketch Plan

Describe Circumstance of the Accident \*

ON 220418 AT DEONT 1800H, I WAS TRAVELLING  
ALONG BK8 TOWARDS WOODHURST. MY VEHICLE PLATE  
NUMBER IS GBH 3099J. SUDDENLY, THE Lorry ON MY  
LEFT STARTED TO MOVE TO MY LEFT LANE. I TRIED TO  
LANE SWAP TO THE RIGHT BUT COULD NOT DO IT IN TIME.  
AS SUCH, THE Lorry AND MY VAN SIDE SWIPED.  
SUBSEQUENTLY, I MANAGED TO CHANGE LANE TO THE  
RIGHT AND STOPPED ON THE ROAD SHOULDERS. EVENTUALLY,  
THE LEFT SIDE OF MY VAN IS DAMAGED. I CALLED  
FOR THE POLICE AT THE ROAD SHOULDERS.  
SHORTLY AFTER, POLICE AND AMBULANCE CAME  
DOWN TO SCENE. I EXCHANGED  
PARTICULARS WITH THE DRIVER OF THE  
Lorry. NO ONE WAS INJURED IN MY  
VAN.

POLICE REPORT: T/20680422/2090

## Declaration

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



Participant's Signature /

\*

Driver's Signature (if driver is not the policyholder) / Date  
& Time

Witnessed by Reporting Centre Personnel

# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20180422/2090

1 of 3

Report No. T/20180422/2090

Police Station Of Origin:  
Woodlands East N.P.C.  
3 Woodlands Drive 63 SINGAPORE 737890  
Tel No: 1800-7679999

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 22/04/2018 19:16	Vide Report No.:	Station Diary No.: 200
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Informant's Particulars			
Name of Informant: RAHMAN BIN PAUSI		Address: APT BLK 484 SEGAR ROAD #07-332 SINGAPORE 670484	
ID Type / ID No.: NRIC NO / S7312134E		Contact No.: Home/Office: Mobile: 91089371	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 45	Date of Birth: 12/04/1973	Type of Informant: Driver
Race: Boyanese		Language: English	Institution / School Name:
Occupation: TECHNICIAN		Driving Licence Information: Class: Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 22/04/2018 18:00	Type of Location: Straight Road
Location: Along Road 1 BUKIT TIMAH EXPRESSWAY				
Towards BKE				
Weather: Drizzling		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
GBH3089J	Van				Slightly Damaged	5
YN7352T	Lorry				Seriously Damaged	6

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



**POLICE REPORT**



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T/20180422/2090

Police Station Of Origin:  
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3 Woodlands Drive 63 SINGAPORE 737890  
Tel No: 1800-7679999

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Report No. T/20180422/2090

**CONTINUATION OF REPORT**

<b>Driver:</b>			
Name	RAHMAN BIN PAUSI		ID No. S7312134E
Related Vehicle	GBH3089J (Van)		Contact No. 91089371
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
<b>Driver:</b>			
Name	GANDHI MOHANDHAS		ID No. G2519014P
Related Vehicle	YN7352T (Lorry)		Contact No. 86155479
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	Slight

**Brief Details.**

On 22/04/2018 at about 1800hrs, I was travelling along BKE towards Woodlands. My vehicle plate number is GBH3089J. Suddenly, the lorry on my left started to move to my left. I tried to lane swap to the right but could not do it in time. As such, the lorry and my van side swiped. Subsequently, I managed to change lane to the right and stopped on the road shoulder eventually. The left side of my van is dented. I called for the police at the road shoulder. Shortly after, police and ambulance came down to scene. I exchanged particulars with the driver of the lorry. No one was injured in my van.

POLICE REPORT



SINGAPORE  
POLICE FORCE

Police Station Of Origin:  
Woodlands East N.P.C.  
3 Woodlands Drive 63 SINGAPORE 737890  
Tel No: 1800-7679999



T/20180422/2090

3 of 3

Report No. T/20180422/2090

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: **IN 139**

J /  
CHEN JIAN YU

Signature Of Interpreter: **Police Force**  
Not applicable

Officer In Charge Of Case:  
TP / GIT /  
SI MOHAMMED FADZLY BIN ABDUL AZIZ  
Contact No.: 65472078

Authentication Stamp  
NP168

Signature Of Informant:

Date/Time:  
22/04/2018 19:16

Classification Of Case:

Accident Photo





Accident Photo



Accident Photo



Accident Photo



**Accident Photo**



**Accident Photo**





**Accident Photo**



**Accident Photo**



Accident Photo



Accident Photo

