

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	11/05/2018 14:24
Date Of Accident	13/04/2018 17:40
Exact Location Of Accident	ALONG POSTDOWN FLYOVER
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJM1869S
Insured/Policyholder	
Name Of Registered Owner	STABLE PTE LTD
Co Reg No	201707058N
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-83689393
Alternative Phone No	OFFICE-83689393

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS 1.6 AUTO
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
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	5096905677
Cover Note Number	

Driver

Name of Driver	MOHAMMED SIRAJ BIN SAYED ISHAK
NRIC No	S9220855I
Date Of Birth	20/06/1992
Occupation	OUTDOOR
Date Of Driving Pass	11/07/2013
Driving Experience	4 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91473716
Fax Number	
Contact Number	OFFICE-91473716
EEmail Address	NOEMAIL

Address	BLK 210A BUKIT BATOK STREET 21 #05-258
Postcode	651210
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	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	2
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	GEYLANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 132 PAYA LEBAR ROAD , POSTCODE: 409014 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8486999 - FAX NO: 68486799
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - G/20180511/2039.

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	SHC8829M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	MOHAMAD RIDZUAN BIN DAUD
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

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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.

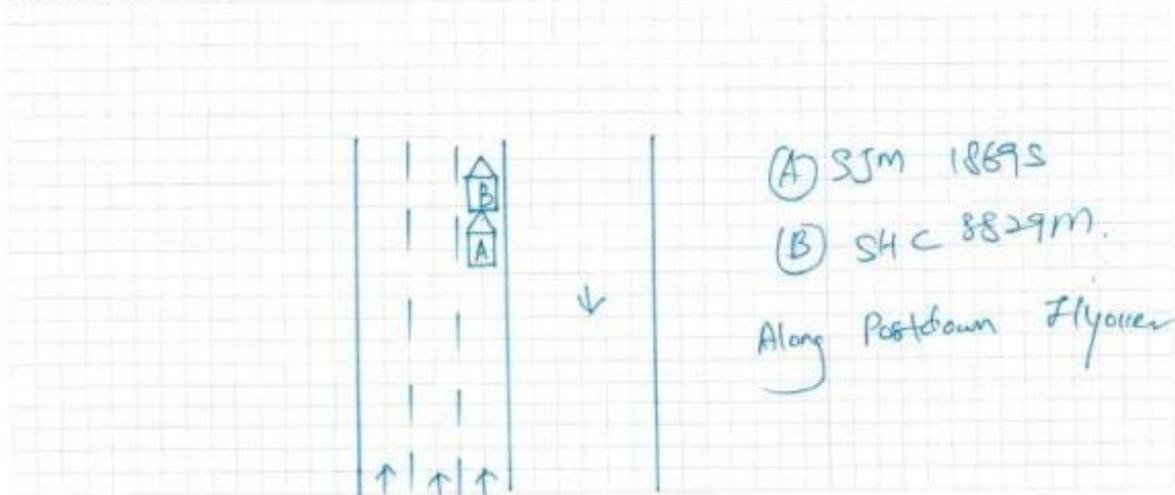
Policyholder's Signature
Date & Time:

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

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

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 05 May 2018 I received a letter from Centro Legal Law Corporation and be informed that our company vehicle's insurance being claimed by SHC 8829M. Our driver: Mr. Mohammed Siraj Bin Sayed Ishaq did mentioned to us this accident is settled by privately but we unable to contact the driver currently.

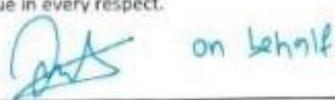
DECLARATION

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


Policyholder's Signature

Date & Time:




Driver's Signature
on behalf

(If driver is not the policyholder)
Date & Time:


Reporting Centre Personnel's Signature

Name:
NRIC/FIN No.:

Police Report



**SINGAPORE
POLICE FORCE**



G/20180511/2039

1 of 2

POLICE REPORT (NP299)

Report No. G/20180511/2039

Police Station Of Origin
Geylang N.P.C
132 Paya Lebar Road SINGAPORE 409014
Tel No: 1800-8486999

Date/Time Report Made 11/05/2018 11:04	Vide Report No.	Station Diary No. 50
Name Of Informant SAMUEL TENG WEI TAT	Address APT BLK 122A SENGKANG EAST WAY #05-39 SINGAPORE 541122	
ID Type / ID No. NRIC NO / S9333661E	Contact No. Home/Office	Mobile 83689393
Nationality SINGAPORE CITIZEN	Email Address	
Occupation SALES EXECUTIVE	Sex Male	Age 24
Institution/School Name	Date of Birth 10/09/1993	Race Chinese
Date/Time Of Incident 05/05/2018 21:00	Location Of Incident 412 PASIR RIS DRIVE 6 #03-365 HDB-PASIR RIS SINGAPORE 510412 STABLE PTE LTD	

Brief details.

On the 05/05/2018 at about 2100hrs, I had opened my letterbox and received a letter of demand from Centro-Legal Law Corporation informing us that our rented vehicle, a silver in color Toyota Altis bearing the license plate number SJM1869S, was involved in a traffic accident with a taxi bearing the license plate number SHC8829M on the 13/04/2018 along Postdown Flyover. On the letter also stated that they demand a compensation of about SGD\$14,000.00/- for lawyer fees and medical compensation.

Signature Of Officer Recording The Report: G / Sgt 2 TOO YONG FOOK		Signature Of Informant:
Signature Of Interpreter: Not applicable		Date/Time: 11/05/2018 11:04
Officer In-Charge Of Case: G / Bedok Police Divisional Investigation Branch / Sgt 2 MUNIRA BEE BINTE YAHAYA Contact No.: 62440000		Classification Of Case:

Authentication Stamp



Police Report



**SINGAPORE
POLICE FORCE**



G/20180511/2039

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20180511/2039

I wish to inform that at that point of time, our vehicle was rented out to a hirer by the name of Mohammed Siraj Bin Sayed Ishak, IC: S9220855I, Apt B/210A Bukit Batok Street 21 #05-258, cont: 91473716. I also wish to inform that he had not been contactable for the past few days, and he owes my company rental of SGD\$1400/- that he had yet to pay up as well. I am lodging this report to disclaim any liabilities with regards to this matter.

Signature Of Officer Recording The Report: G / Sgt 2 TOO YONG FOOK	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 11/05/2018 11:04
Officer In-Charge Of Case: G / Bedok Police Divisional Investigation Branch / Sgt 2 MUNIRA BEE BINTE YAHAYA Contact No.: 62440000	Classification Of Case:
Authentication Stamp 	

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

