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 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	14/05/2018 21:13
Date Of Accident	12/05/2018 16:00
Exact Location Of Accident	NORTH - SOUTH HIGHWAY
Country/State of Loss	MALAYSIA/NEGERI SEMBILAN DARUL KHUSUS
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKS1486U
Insured/Policyholder	
Name Of Registered Owner	NOORMALA BINTE SUJUDDIN
NRIC No	S1466679F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90884636
Alternative Phone No	OTHERS-85001904
Vehicle Particulars	
Manufacturer	BMW
Model	318I 2.0L A/T ABS D/AIRBAG 2WD 4DR SR
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?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	ECICS LIMITED
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MPC17A00431101
Cover Note Number	
Driver	
Name of Driver	MUHAMMAD ZAHIL FADZULI BIN ZAKARIA
NRIC No	S9004068E
Date Of Birth	08/02/1990
Occupation	INDOOR
Date Of Driving Pass	13/08/2012
Driving Experience	5 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-85001904
Fax Number	
Contact Number	
EMail Address	MDZAHIL@YAH00.COM

Address	BLK 219 PASIR RIS ST 21 #02-164
Postcode	510219
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	DRIZZLING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	JRT2376 (PRIVATE CAR)
Number of vehicles involved in the accident	
Was any body injured in the Accident?	YES
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)	2
Passenger 1	NAME: : SHARIFAH HAYATUNNUR BINTE MOHAMED GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes,Please state which Police Station	
POLICE STATION NAME [OTHER]	TRAFFIC SEREMBAN/007817/18
Was notice of intended Prosecution given?	NO
If Yes,against whom?	

Circumstances of Accident

REFER TO M'SIA POLIRE REPORT.

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	JRT2376
Vehicle Make/Model/Colour	
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 2

Vehicle Registration Number	WA6466P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	SAFIZA BINTE BUANG
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	SHARIFAH HAYATUNNUR BINTE MOHAMED
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SKS1486U
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

SKETCH PLAN

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

FALCON-AIR AUTO SERVICES PTE LTD
FALCON AIR

Date of accident: 12/05/2018 Time: 17:40 Location: Lebuh Raya Utara Selatan.

Veh A: SKS 1486 U Veh B: JRT 2376 No of pax: 2 Weather: Clear/dry Rain/Wet

SKETCH PLAN

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report

Passenger : wife - Sharifah Hayatunnur Binte Mohamed

☐ Claim OD/TP at Falcon-Air ☐ Claim OD/TP at other workshop ☐ Reporting Only

Remarks : Please forward a copy of my efile accident report to :

My workshop :

Email address : mdzahil@yahoo.com

& myself :

Email address :

Note : Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

DECLARATION

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

90884636

S1466679F

FALCON-AIR AUTO SERVICES PTE LTD FALCON AIR

Policyholder's Signature	Driver's Signature	Reporting Centre Personnel's Signature
Date & Time:	(If driver is not the policyholder)	Name:
	Date & Time:	NRIC/FIN No.:

GIARMC SketchPlanForm_V3

KETUA POLIS DAERAH
IBU PEJABAT POLIS DAERAH SEREMBAN
70300 SEREMBAN
NEGERI SEMBILAN

Tel :066033222 Samb :3394

Ruj : SEREMBAN/JSPT/KST/02387/18
Tkh : 12/05/2018

MUHAMMAD ZAHIL FADZULI BIN ZAKARIA No KP :
APT BLK 219 PASIR RIS STREET 21 #02- 164 SINGAPORE
510219 - Motokar SKS1486U

KEPUTUSAN PENYIASATAN KES

No. Pengaduan Polis : TRAFIK SEREMBAN/007817/18
Tkh/Masa Rpt : 12/05/2018 17:40 HRS
Kesalahan : R10 LN166/59
Tkh/Masa Kemalangan : 12/05/2018 16:00 HRS
Tempat Kemalangan : LEBUH RAYA UTARA SELATAN

Dengan hormatnya saya merujuk kepada pengaduan yang dibuat sepertimana dinyatakan di atas.

2. Untuk makluman, pihak yang bertanggungjawab melakukan kesalahan di atas telah disaman polis (RM 300) pada 12/5/2018 (CARS180093909).

3. Butir-butir pihak yang disalahkan adalah seperti berikut :-
FATIN NADIA BINTI AHMAD KAMIL KP : 920911015062
13 A KAMPUNG GUDANG GARAM SEGAMAT
85000
JRT2376 PEMANDU Motokar

"BERHATI-HATI DI JALAN RAYA"

(SAIFUL BAHTHIAR BIN ISMAIL) SJN 194887
PEN. PEG PENYIASAT
UNIT SIASATAN LEBUHRAYA
IPD S.P.T BUKIT AMAN

(R194887 - SAIFUL BAHTHIAR BIN ISMAIL)
AIO TRAFIK
70300 SEREMBAN

s . k KST No : SEREMBAN/JSPT/KST/02387/18
[Notis ini hanya sebagai makluman anda sahaja]

POLIS DIRAJA MALAYSIA
REPOT POLIS

Balai : TRAFIK SEREMBAN
Daerah : SEREMBAN
Kontinjen : NEGERI SEMBILAN
No Repot : TRAFIK SEREMBAN/007817/18
Tarikh : 12/05/2018
Waktu : 1740 PM
Bahasa Diterima : B. Malaysia

Pegawai Penyiasat : R194887
No Repot Bersangkut : TRAFIK SEREMBAN/007807/18

Butir-butir Penerima Repot
Nama : SAIFUL BAHTHIAR BIN ISMAIL **No Personel :** R194887 **Pangkat :** SJN

Butir-butir Jurubahasa (Jika Ada)
Nama : --- **No K/P (Baru) :** --- **No Polis/Tentera:** ---
No Paspot: --- **Bahasa Asal :** ---
Alamat: ---

Butir-butir Pengadu
Nama : MUHAMMAD ZAHIL FADZULI BIN ZAKARIA
No K/P (Baru) : --- **No Polis/Tentera :** --- **No Paspot :** K0285532G
No Sijil Beranak : ---
Jantina : Lelaki **Tarikh Lahir :** 08/02/1990 **Umur :** 28 tahun 3 bulan
Keturunan : Melayu **Warganegara :** Singapore
Pekerjaan : IMAM
Alamat Tempat Tinggal : APT BLK 219 PASIR RIS STREET 21, #02- 164 SINGAPORE, 510219
Alamat Ibu/Bapa : ---
Alamat Pejabat : ---
No Tel (Rumah) : 6585001904 **No Tel (Pejabat) :** --- **No Tel (HP) :** ---
Emel : ---

Pengadu Menyatakan:-

PADA 12/05/2018 JAM LEBIH KURANG 1600 PETANG, SAYA MEMANDU MOTOKAR NOMBOR SKS1486U JENIS BMW DARI SINGAPORE ,MENGHALA KE KUALA LUMPUR. PADA KETIKA ITU, APABILA SAYA SAMPAI DI KM 257 (U) LEBUH RAYA UTARA SELATAN. SAYA MEMPERLAHANKAN KENDERAAN SAYA KERANA SEBUAH M/KAR NO WA6466P MEMPERLAHAN KENDERAANYA. PADA MASA YANG SAMA, SAYA DENGAR BUNYI YANG KUAT DARI ARAH BELAKANG. SAYA TURUN DAN DAPATI SEBUAH MOTOKAR NOMBOR JRT2376 TELAH MELANGGAR KENDERAAN SAYA. SAYA TIDAK MENGALAMI KECEDERAAN MENAKALA ISTERI SAYA NO PASPORT E4468116N, SHARIFAH HAYATUNNUR BINTE MOHAMED MENGALAMI SAKIT PADA BAHAGIAN ANGGOTA BADAN. KEROSAKAN MOTOKAR SAYA IALAH BUMPER BELAKANG KEMEK, BUMPER HADAPAN KEMEK, EKZOS JATUH, BONET KEMEK, DAN LAIN- LAIN KEROSAKAN TIDAK PASTI.

Tandatangan Pengadu: Tandatangan Jurubahasa(Jika ada) : Tandatangan Penerima Repot:

SALINAN DIAKUI SAH
UNTUK TINDAKAN
CIVIL DAN INSURANS

ID Pencetak | Tarikh @ Masa Cetak : R125880 / 13/05/2018 06:21:30 AM

PEG. PEG PENYIASAT
UNIT SIASATAN LEBUHRAYA
J.S.P.T BUKIT AMAN

POLIS DIRAJA MALAYSIA

REPOT POLIS

Balai : TRAFIK SEREMBAN
Daerah : SEREMBAN
Kontinjen : NEGERI SEMBILAN
No Repot : TRAFIK SEREMBAN/007813/18
Tarikh : 12/05/2018
Waktu : 1700 PM
Bahasa Diterima : B. Malaysia

Pegawai Penyiasat : R194887
No Repot Bersangkut : TRAFIK SEREMBAN/007807/18

Butir-butir Penerima Repot
Nama : SAIFUL BAHTHIAR BIN ISMAIL **No Personel :** R194887 **Pangkat :** SJN

Butir-butir Jurubahasa (Jika Ada)
Nama : --- **No K/P (Baru) :** --- **No Polis/Tentera:** ---
No Paspot: --- **Bahasa Asal :** ---
Alamat: ---

Butir-butir Pengadu
Nama : FATIN NADIA BINTI AHMAD KAMIL
No K/P (Baru) : 920911015062 **No Polis/Tentera :** --- **No Paspot :** ---
No Sijil Beranak : ---
Jantina : Perempuan **Tarikh Lahir :** 11/09/1992 **Umur :** 25 tahun 8 bulan
Keturunan : Melayu **Warganegara :** Malaysia
Pekerjaan : GURU
Alamat Tempat Tinggal : 13 A KAMPUNG GUDANG GARAM 85000 SEGAMAT JOHOR MALAYSIA
Alamat Ibu/Bapa : ---
Alamat Pejabat : ---
No Tel (Rumah) : --- **No Tel (Pejabat) :** --- **No Tel (HP) :** 013-7005405
Emel : ---

Pengadu Menyatakan:-

PADA 12/05/2018 JAM LEBIH KURANG 1600 PETANG, SAYA MEMANDU MOTOKAR NOMBOR JRT2376 JENIS PRODUA ALZA DARI JOHOR MENGHALA KUALA LUMPUR. PADA KETIKA ITU, APABILA SAYA SAMPAI DI KM 257 9U) LEBUH RAYA UTARA SELATAN, SAYA LIHAT SEBUAH MOTOKAR NOMBOR SKS1486U YANG BERADA DI HADAPAN SAYA, BERHENTI SECARA MENGEJUT. KETIKA ITU JALAN LICIN DAN BASAH, SAYA TERUS MENEKAN BREK DAN CUBA MENGELAK TETAPI TERKENA JUGA DI BAHAGIAN BUMPER BELAKANG KENDERAAN TERSEBUT . DALAM KEJADIAN ITU, SAYA TIDAK MENGALAMI APA-APA KECEDERAAN. KEROSAKAN MOTOKAR SAYA IALAH BUMPER HADAPAN ROSAK, RADIATOR PECAH, LAMPU BESAR PECAH,BONET KEMEK, PINTU KIRI KANAN ROSAK, AIR BEG DUA-DUA KELUAR DAN LAIN-LAIN KEROSAKAN TIDAK PASTI.

Tandatangan Pengadu: Tandatangan Jurubahasa(Jika ada) : Tandatangan Penerima Repot:

SALINAN DIAKUI SAH
UNTUK TINDAKAN
CIVIL DAN INSURANS

ID Pencetak | Tarikh @ Masa Cetak : R125880 | 13/05/2018 06:25:36 AM

(SAIFUL BAHTHIAR)
PEN. PEG PENTADBIR
UNIT SIASATAN LEBUHRAYA
I.S.P.T BUKIT AMAN

POLIS DIRAJA MALAYSIA

REPOT POLIS

Balai : TRAFIK SEREMBAN
Daerah : SEREMBAN
Kontinjen : NEGERI SEMBILAN
No Repot : TRAFIK SEREMBAN/007807/18
Tarikh : 12/05/2018
Waktu : 1642 PM
Bahasa Diterima : B. Malaysia

Pegawai Penyiasat : R194887

Butir-butir Penerima Repot
Nama : SAIFUL BAHTHIAR BIN ISMAIL **No Personel :** R194887 **Pangkat :** SJN

Butir-butir Jurubahasa (Jika Ada)
Nama : --- **No K/P (Baru) :** --- **No Polis/Tentera:** ---
No Paspot: --- **Bahasa Asal :** ---
Alamat: ---

Butir-butir Pengadu
Nama : SAFIZA BINTI BUANG
No K/P (Baru) : 660208015820 **No Polis/Tentera :** A0372140 **No Paspot :** ---
No Sijil Beranak : ---
Jantina : Perempuan **Tarikh Lahir :** 08/02/1966 **Umur :** 52 tahun 3 bulan
Keturunan : Melayu **Warganegara :** Malaysia
Pekerjaan : PERUNDING
Alamat Tempat Tinggal : NO 21 JALAN SS 5D/1 KELANA JAYA 47301 PETALING JAYA SELANGOR MALAYSIA
Alamat Ibu/Bapa : ---
Alamat Pejabat : ---
No Tel (Rumah) : --- **No Tel (Pejabat) :** --- **No Tel (HP) :** 012-2778182
Emel : ---

Pengadu Menyatakan:-

PADA 12/05/2018 JAM LEBIH KURANG 1600 PETANG, SAYA MEMANDU MOTOKAR NOMBOR WA6466P JENIS HONDA ACCORD DARI JOHOR MENGHALA KE SELANGOR. PADA KETIKA ITU, APABILA SAYA SAMPAI DI KM 257 (U) LEBUH RAYA UTARA SELATAN, SAYA MEMPERLAHANKAN KENDERAAN SAYA KERANA TERDAPAT SATU KEMALANGAN DI HADAPAN SAYA. PADA MASA YANG SAMA, SAYA DENGAR BUNYI YANG KUAT DARI ARAH BELAKANG. SAYA TURUN DAN DAPATI SEBUAH MOTOKAR NOMBOR SKS1486U TELAH MELANGGAR KENDERAAN SAYA DARI ARAH BELAKANG. DALAM KEJADIAN ITU, SAYA TIDAK MENGALAMI APA-APA KECEDERAAN. KEROSAKAN MOTOKAR SAYA IALAH BUMPER BELAKANG KEMEK, BONET KEMEK SENSOR ROSAK DAN LAIN- LAIN KEROSAKAN TIDAK PASTI. SEKIAN LAPORAN SAYA.

Tandatangan Pengadu: Tandatangan Jurubahasa (Jika ada) : Tandatangan Penerima Repot:

SALINAN DIAKUI SAH
UNTUK TINDAKAN
CIVIL DAN INSURANS

ID Pencetak | Tarikh @ Masa Cetak : R125880 | 13/05/2018 06:19:37 AM

(SAIFUL BAHTHIAR BIN ISMAIL) SJN 194887
PEN. PEG PENYIASAT
UNIT SIASATAN LEBUHRAYA
J.S.P.T BUKIT AMAN

KUNCI RAJAH KASAR KEMALANGAN JALN RAYA
SEREMBAN (T) REPORT NO 7807/18
BERTARIKH 12/05/2018
DI KM 257 (U) L/RAYA UTARA SELATAN

KUNCI RAJAH KASAR.
==========

A1- KEDUDUKAN PENGHADANG BESI DI SEBELAH KIRI, DARI ARAH SELATAN MENGHALA KE UTARA

A2- KEDUDUKAN GARISAN LURUS DI SEBELAH KIRI, DARI ARAH SELATAN MENGHALA KE UTARA

A3- KEDUDUKAN GARISAN LURUS PUTUS- PUTUS DI SEBELAH KIRI DARI ARAH SELATAN MENGHALA KE UTARA

A4- KEDUDUKAN GARISAN LURUS PUTUS- PUTUS DI SEBELAH KANAN DARI ARAH DARI ARAH SELATAN MENGHALA KE UTARA

A5- KEDUDUKAN PENGHADANG BESI DI SEBELAH KANAN, DARI ARAH SELATAN MENGHALA KE UTARA

UKURAN DALAM METER.
==========

1) A1--------A2 3.00METER

2) A2--------A3 3.70METER

3) A3--------A4 3.70METER

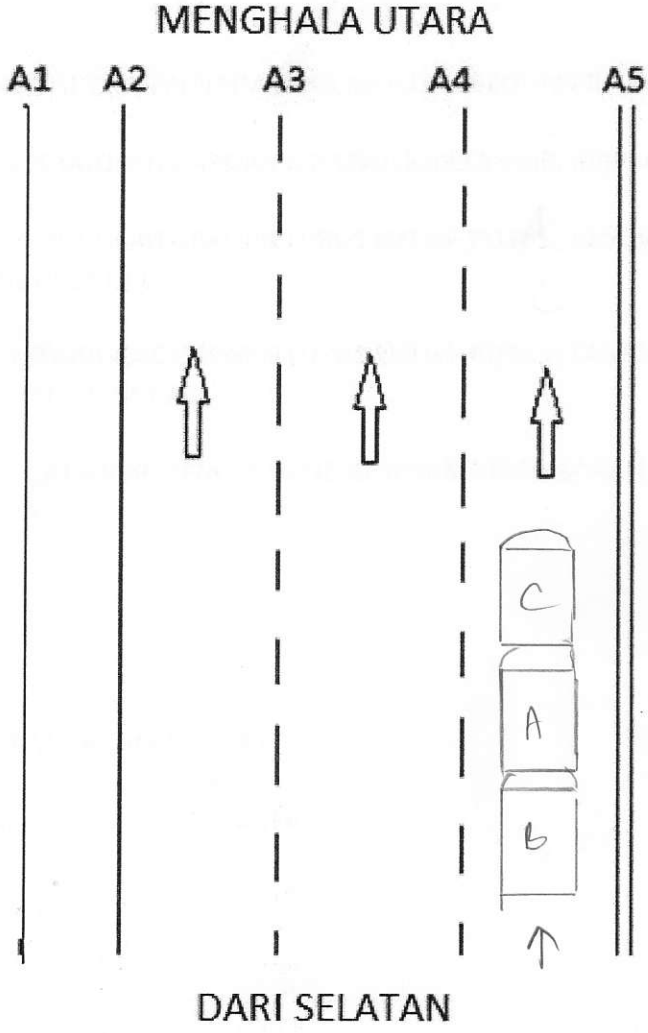
4) A4--------A5 3.70METER

SALINAN DIAKUI SAH
UNTUK TINDAKAN
CIVIL DAN INSURANS

(SAIFUL BARTHAR BIN ISMAIL) SJN 19487
PEN. PEG PENYIASAT
UNIT SIASATAN LEBUHRAYA
J.S.P.T BUKIT AMAN

R 265/30/R19. KINFOREST
235/357/219 94-

RAJAH KASAR KEMALANGAN JALN RAYA
SEREMBAN (T) REPORT NO 7807/18
BERTARIKH 12/05/2018
DI KM 257 (U) L/RAYA UTARA SELATAN



NOTA: KENDERAAN TERLIBAT TELAH DIALIHKAN DARI TEMPAT KEJADIAN

SALINAN DIAKUI SAH
UNTUK TINDAKAN
CIVIL DAN INSURANS)

(SAIFUL BAHTIAR BIN ISMAIL) SJN [illegible]
PEN. PEG PENYIASAT
UNIT SIASATAN LEBUHRAYA
J.S.P.T BUKIT AMAN