

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	28/05/2018 13:56
Date Of Accident	27/05/2018 00:30
Exact Location Of Accident	100 METRES BEFORE WOODLANDS CHECKPOINT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJC6810E
Insured/Policyholder	
Name Of Registered Owner	MUHAMMAD KAMIL BIN SALEH
NRIC No	S1546757F
Email Address	MDFIQ_90@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-96256206
Alternative Phone No	OTHERS-81286176

Vehicle Particulars

Manufacturer	HONDA
Model	STREAM
Exact Purpose for which vehicle was being used at time of accident	TRAVELLING HOME
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 CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5074257467-02
Cover Note Number	

Driver

Name of Driver	MUHAMMAD SHAFIQ BIN MUHAMMAD KAMIL
NRIC No	S9046072B
Date Of Birth	30/11/1990
Occupation	INDOOR
Date Of Driving Pass	04/09/2013
Driving Experience	4 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81286176
Fax Number	
Contact Number	OTHERS-96256206
EEmail Address	MDFIQ_90@HOTMAIL.COM

Address	BLK 140 PASIR RIS STREET 11 #07-183
Postcode	510140
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	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?	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)	4
Passenger 1	NAME: : PASSENGER GENDER: : MALE
Passenger 2	NAME: : PASSENGER GENDER: : MALE
Passenger 3	NAME: : PASSENGER GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	PASIR RIS NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 1 PASIR RIS DRIVE 4 , POSTCODE: 519457 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5852999 - FAX NO: 65855261
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

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	SLM6110R
Vehicle Make/Model/Colour	TOYOTA HARRIER
Details Of Properties	

Vehicle Category	PRIVATE CAR
Name of Driver	DAVE WEE
NRIC/Passport Number	
Contact Number	83388363
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan

SKETCH PLAN

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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: 28/5/2018 @ 12:40pm

Driver's Signature

(If driver is not the policyholder)

Date & Time: 28/05/2018 12:40pm

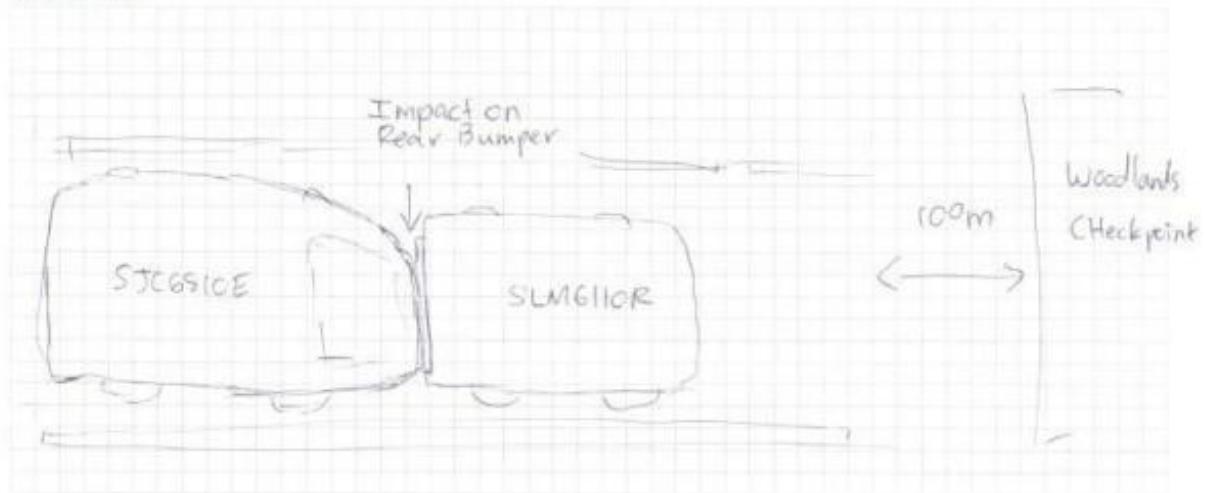
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

At 0029 Hrs, on 27 May 2018, the traffic condition before wetlands quite jam packed. While I was driving, I noticed that the front vehicle came to sudden stop. I was not able to stop the vehicle in time and ~~the~~^{my} vehicle hit the rear bumper of the front vehicle (SLM 6110p).

Everyone disembarked from the vehicle and confirmed that nobody was injured. Afterwards, we all took photos of the vehicle accident and exchanged particulars.

DECLARATION

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

Policyholder's Signature _____
Date & Time: 28/5/2018 @ 1240pm

Driver's Signature _____
(If driver is not the policyholder)
Date & Time: 28/09/2019 12:46pm

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

CONFIDENTIAL

ANNEX E

NOTICE OF REPORTING

This is to confirm that MUHAMMAD SHAFIQ BIN MUHAMMAD KAMIL NRIC / FIN S9046072B reported to the Police a non injury traffic accident which occurred about 100m before Woodlands Checkpoint on 27/05/2018 at 0029hrs involving the following vehicles;

- A) SJC6810E – Dark Blue Honda Stream
- B) SLM6110R – Dark Blue Toyota Harrier

Complainant informed that he was driving his vehicle (Vehicle A) towards Woodlands Checkpoint. There were a lot of vehicles and it was quite packed. The vehicle in front (Vehicle B) suddenly applied its brakes. Complainant was unable to stop in time and bumped into the rear of Vehicle B lightly. Nobody was injured. Both drivers exchanged particulars and took pictures of the scene before leaving the area. Driver Dave Wee, HP: 83388363.

2 If this accident was reported to the Police within 24 hours of its occurrence then he/she has complied with Sec 84 (2) of the Road Traffic Act, Cap 276

Rank / Name of Issuing Officer: Sgt T160020 Chan Xiang Da

Date: 27/05/2018 Time: 1750hrs

S/D Ref No: 91

Police Post / Unit: Pasir Ris NPC

Original to be issued to complainant
Duplicate to be submitted to Traffic Police

Pasir Ris NPC
No. 1 Pasir Ris Drive
401-01 Singapore 510107
Tel: 1800-4551889

CONFIDENTIAL

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

