

## 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 15:40
Date Of Accident	27/05/2018 14:00
Exact Location Of Accident	BLK 34 UPPER CROSS ST
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLQ6931S
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LCRF PTE LTD
Co Reg No	201624597k
Email Address	REPORTING@AUTOINSURE.COM.SG
Mobile Phone No	
Alternative Phone No	Office-31572626

### Vehicle Particulars

Manufacturer	MAZDA
Model	3-1.5 SEDAN EU6 (A)
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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE HIRE

### Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	999994993
Cover Note Number	

### Driver

Name of Driver	MOHAMMAD AIZUL BIN AB RASHID
NRIC No	S8008608C
Date Of Birth	05/04/1980
Occupation	OUTDOOR
Date Of Driving Pass	18/10/2004
Driving Experience	13 YEARS AND 7 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-98353103
Fax Number	
Contact Number	
EMail Address	NOEMAIL
Address	BLK 165A TECK WHYE CRESCENT #05-323
Postcode	681165
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	CHAIN COLLISION
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?	YES
Was any injured conveyed to hospital by ambulance?	YES
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: : NA Gender: : Male

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	WOODLANDS WEST NPC
Police Station Address	ROAD: 9 MARSILING LANE , POSTCODE: 739146 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO ATTACHMENT

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBA3678X
Vehicle Make/Model/Colour	
Details Of Properties	

Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	YUSRI B MAHFUB
NRIC/Passport Number	S7109773J
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SHA5727D
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	POR SEOU WAH
NRIC/Passport Number	S1509727B
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### DETAILS OF INJURED PERSON 1

Name	MOHAMMAD AIZUL BIN AB RASHID
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	
Address	
Postcode	

## Sketch Plan



**SINGAPORE  
POLICE FORCE**



T/20180528/2025

Police Station Of Origin:  
Woodlands West N.P.C.  
9 Marsiling Lane SINGAPORE 739146  
Tel No: 1800-363 9999

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Report No. T/20180528/2025

### CONTINUATION OF REPORT

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	MOHAMMAD AIZUL BIN AB RASHID	ID No.	S8008608C
Related Vehicle	SLQ6931S (Car)	Contact No.	98353103
Hospital/Clinic	SINGAPORE GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	27/05/2018	Date Discharge	27/05/2018
No. of Days granted Medical Leave	02	Degree of Injury	Slight

#### **Brief Details.**

On 27/05/2018 at about 1400hrs, I was travelling with V1) SLQ6931S along Upper Cross Street towards CTE on the 2nd lane of a 4 lane traffic when V2) SHA5727D in front of my vehicle had jam brake suddenly. I managed to brake in time before hitting V1, but V3) GBA3678X behind of my vehicle did not manage to stop in time and the front of V3 had hit the rear of my vehicle. The collision pushed my vehicle forward and my vehicle had hit V2 in front of me. I came out of the vehicle and made a check and found minor dents at the rear bumper of my vehicle, and dents at the front of my car plate. There was no damage to V2 and there was minor dent on the front bumper of V3. Both the driver for V2 and myself was conveyed to Singapore General Hospital due to neck pain due to the impact and I was given two days of MC. No other passenger was injured. Traffic police and ambulance was at scene and no other government property was damaged.

rashidah\_azman@spf.gov.sg



**SINGAPORE  
POLICE FORCE**



T/20180528/2025

Police Station Of Origin:  
Woodlands West N.P.C.  
9 Marsiling Lane SINGAPORE 739146  
Tel No: 1800-363 9999

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Report No. T/20180528/2025

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 28/05/2018 11:56	Vide Report No.:	Station Diary No.: 26
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Informant's Particulars			
Name of Informant: MOHAMMAD AIZUL BIN AB RASHID		Address: APT BLK 165A TECK WHYE CRESCENT #05-323 SINGAPORE 681165	
ID Type / ID No.: NRIC NO / S8008608C		Contact No.: Home/Office: 98353103      Mobile:	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 38	Date of Birth: 05/04/1980	Type of Informant: Driver
Race: Boyanesese		Language: English	Institution / School Name:
Occupation: Food/Drink stall assistant		Driving Licence Information: Class:      Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 27/05/2018 14:00	Type of Location: Straight Road
Location: Along Road 1 UPPER CROSS STREET				
Along Upper Cross Street towards CTE				
Weather: Cloudy		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBA3678X	Van				Slightly Damaged	1
SHA5727D	Car				No Damage	2
SLQ6931S	Car				Slightly Damaged	1

Sketch Plan #3



**SINGAPORE  
POLICE FORCE**



T/20180528/2025

Police Station Of Origin:  
Woodlands West N.P.C.  
9 Marsiling Lane SINGAPORE 739146  
Tel No: 1800-363 9999

3 of 3


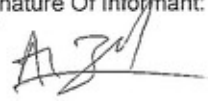
Report No. T/20180528/2025

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: J/ Sgt 1 NG YUTING 20/5/18 Date 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 28/05/2018 11:56
Officer In Charge Of Case: TP / GIT / Sgt 3 RASHIDAH BINTE AZMAN Contact No.: 65476216	Classification Of Case:
Authentication Stamp NP168	

Sketch Plan #4

## SKETCH PLAN


### IMPORTANT NOTICE

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#### B. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

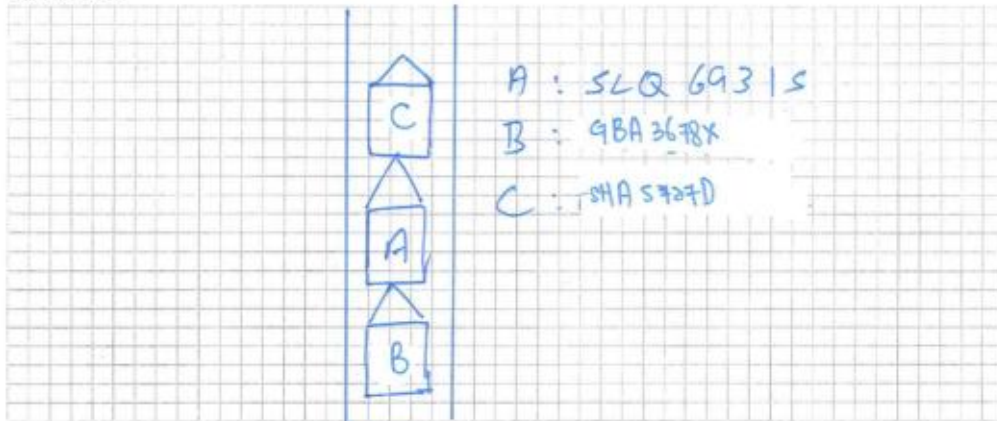
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.:

# SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER POLICE REPORT

T/20180528/2025

## 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/FIN No.:

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REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S8008608C

Name: MOHAMMAD AIZUL BIN AB RASHID

Birth Date: 05 Apr 1980

Issue Date: 30 Oct 2017

0027384790

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S8008608C

Name: MOHAMMAD AIZUL BIN AB RASHID

محمد ايتول بن عبدالرشيد

Race: BOYANESE

Date of Birth: 05-04-1980

Sex: M

Country of Birth: SINGAPORE

S8008608C

Land Transport Authority

VOCATIONAL LICENCE

Licence No: S8008608C

Name: MOHAMMAD AIZUL BIN AB RASHID

Issue Date: 8/5/2017

Please visit [www.lta.gov.sg](http://www.lta.gov.sg) to check the status of this vocational licence

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

	EFFECTIVE DATE
Class 2B Motorcycles <= 200 cc	17 Mar 2000
Class 2A Motorcycles between 201 cc and 400 cc	05 Feb 2008
Class 2 Motorcycles > 400 cc	12 May 2009
Class 3 Motor cars with unladen weight <= 3000kg with <= 7 passengers, exclusive of driver; and other motor vehicles with unladen weight <= 2500kg	18 Oct 2004

Licence No-S8008608C

NP 42BA

4381988

S8008608C

Date of Issue: 15-04-2013

Address: APT BLK 165A, TECK WHYE CRESCENT #05-323 SINGAPORE 681165

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to the LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
02	TAXI VL	01/03/2011
03	BUS VL	08/05/2017
04	BUS ATTENDANT	08/05/2017

Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





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