# 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 | 04/06/2018 17:26 |
| Date Of Accident | 04/06/2018 08:15 |
| Exact Location Of Accident | ALONG AYE AFTER ALEXANDRA ROAD |
| Country/State of Loss | SINGAPORE |
| **DETAILS OF OWN VEHICLE** | |
| Vehicle Registration Number | GBG140T |
| **Insured/Policyholder** | |
| Name Of Registered Owner | ROBINSON CAR RENTAL PTE LTD |
| Co Reg No | - |
| Email Address | FAUZIAH_JABBAR@CERTISSECURITY.COM |
| Mobile Phone No | (LOCAL) +65-98552521 |
| Alternative Phone No | OFFICE-98552521 |
| **Vehicle Particulars** | |
| Manufacturer | NISSAN |
| Model | NV350 |
| Exact Purpose for which vehicle was being used at time of accident | WORK |
| Are you claiming under your own insurance policy for repair to your vehicle? | YES |
| If No, Please state action to be taken | |
| Vehicle Category | COMMERCIAL VEHICLE |
| **Insurance Company** | |
| Name of Insurance Company | MS FIRST CAPITAL INSURANCE LTD |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | D-18090225MFCV/21 |
| Cover Note Number | |
| **Driver** | |
| Name of Driver | FAUZIAH BINTE JABBAR |
| NRIC No | S9025652A |
| Date Of Birth | 23/07/1990 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 30/01/2013 |
| Driving Experience | 5 YEARS AND 4 MONTHS |
| Gender | FEMALE |
| Mobile Number | (LOCAL) +65-98552521 |
| Fax Number | |
| Contact Number | OTHERS-98552521 |
| EMail Address | FAUZIAH_JABBAR@CERTISSECURITY.COM |

| | |
|---|---|
| Address | BLK 815A CHOA CHU KANG AVENUE 7<br>#11-13 |
| Postcode | 681815 |
| 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 | -<br>-<br>- |
| Insurance Company of Driver's Own Vehicle | -<br>-<br>- |

**General Information of the Accident**

| | |
|---|---|
| Type Of Accident | COLLISION - HEAD TO REAR |
| Weather Conditions | DRIZZLING |
| Road Surface | WET |

**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? | 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**

PLS REFER TO THE ATTACHED STATEMENT.

**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 | SJL9084S |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | PRIVATE CAR |
| Name of Driver | HWEE SEE CHEONG |
| NRIC/Passport Number | S0044879F |
| Contact Number | 98581077 |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |
| No. Of Passenger (Including Driver) | |

## SKETCH PLAN

### IMPORTANT NOTICE

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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.

ROBINSON CAR RENTAL PTE LTD

Policyholder's Signature
Date & Time:

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

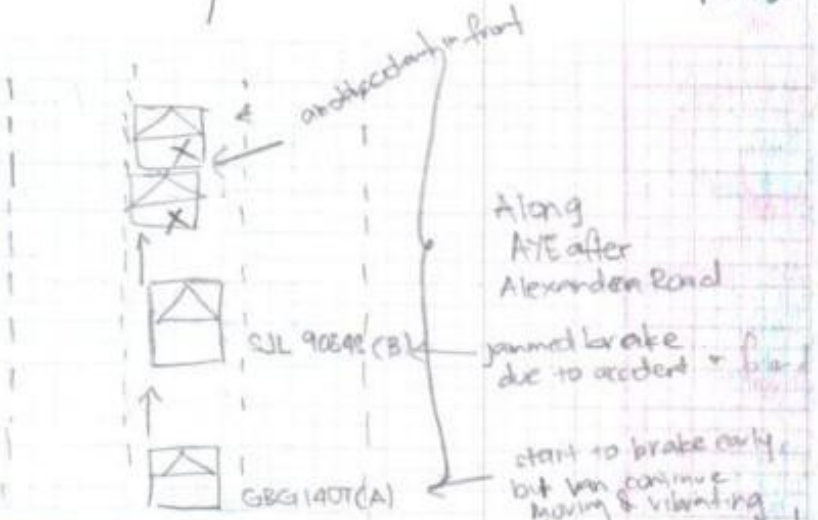
4/6/2018

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

**Sketch Plan #2**

AYE (CITY) after Alexandra Road.

**SKETCH PLAN**




**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

Pls Refer to the Attached

**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:

4/6/2018

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

**Sketch Plan #3**

Fauziah Binte Jabbar (56808)
Supervisor (SWRO)
NEA MosTrap

4 June 2018

Lim Sok Heng
Operation Manager

Hi Sir,

**Incident report @ along AYE after Alexandra Road on 4 June 2018, 8.15am**

I was alone driving the company vehicle, Dark Grey Nissan Panel Van NV350 of plate number GBG 140T, on my way to Certis CISCO Paya Lebar HQ via Ayer Rajah Expressway (AYE).

It was drizzling, heavy traffic and the condition of the road was wet and slippery. I've kept my distance and speed in check. Along the way, from quite a distance I noticed the immediate car in front of me, Silver Honda of plate number SJL 9084S, had stopped as there was an accident further down. So instantly, I've stepped on the brake hard as well. Unfortunately, to my disbelief, the van that I was driving did not stop. It continued moving forward slowly, making noises and the whole van was vibrating thus it was also unavoidable not to hit the car in front.

Quickly, I put on the hazard lights and went down the van and meet the driver, Mdm Cheong. She was travelling with a passenger. Thankfully no one was injured. As it was both our first ever time involved in any road accident, we are shocked and unsure what to do. Moments later, an LTA officer arrived and assessed the situation. He first checked with everyone to see if anyone is injured and the three of us confirmed no injury was sustained. He then advised us to exchange particulars (name, NRIC, contact info and plate no) and take photos for us to call and report to our insurances for claim. Subsequently, as both vehicles are still operable, he told us to continue our journey. We then left the scene at 8.26am.

The particulars of the driver are as follows:

Name: Hwee See Cheong
NRIC: S0044879F
Contact No: 9858 1077
Vehicle Make/No: Silver Honda, SJL 9084 S

Attached with this are the photos taken as well. If you need any clarification, please contact me at my mobile stated below. Thank you.

Best Regards,

Fauziah Binte Jabbar
NRIC: S9025652A
Mobile: 9855 2521
Email: fauziah_jabbar@certissecurity.com

**Accident Photo**

**Accident Photo**

**Accident Photo**

**Accident Photo**

**Accident Photo**

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**Accident Photo**

**Addendum Sheet**

GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: 5665500206 / GST Reg. No.: M400017735

**IMPORTANT NOTE:** Please submit the completed Addendum form to the **same** Authorised Reporting Centre with whom you submitted the Original Report.

## ADDENDUM

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No : MNA1180724 36 Vehicle Registration No: GBG140T

Name(as shown in NRIC) : ~~ROBINSON CAR RENTAL PTE LTD~~ FAUZIAH BINTE JABBAR NRIC/FIN/Passport No : ~~200414041W~~ S9025652A

(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate

Address : ~~21 JALAN MASJID~~ BLK 815A CHOA CHU KANG AVENUE 7, #11-13 Singapore(~~418946~~) 681815

Contact (Tel) : ~~67492002~~ Mobile No. : 98552521

Email Address : CAR.RENTAL@SIANGHOCK.COM.SG

Date of Accident : 04.06.2018 Time of Accident : 08.15 AM

Place of Accident : ALONG AYE AFTER ALEXANDRA ROAD

Insurance Company : MS FIRST CAPITAL PTE LTD

**(B) ADDITIONAL INFORMATION / AMENDMENTS:**

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

CLAIMING OWN DAMAGES.

X

Policyholder / Driver's Signature
Date:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:
Date: 7/6/2018