# SINGAPORE ACCIDENT STATEMENT

## IMPORTANT NOTICE

EMail Address

- 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 <u>truthful and accurate</u> 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.

THE RESERVE OF THE PARTY OF THE	ACCIDENT STATEMENT
Date Of Report	08/06/2018 15:16
Date Of Accident	07/06/2018 18:15
Exact Location Of Accident	JUNCTION OF LOWER DELTA RD AND MOUNT FABER RD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLL7050D
Insured/Policyholder	
Name Of Registered Owner	GRAB RENTALS PTE LTD
Co Reg No	201617200G
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-66550005
Vehicle Particulars	
Manufacturer	MAZDA
Model	3
Exact Purpose for which vehicle was being used at time of accident	HIRE & REWARD
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	A29069766MKF
Cover Note Number	
Driver	
Name of Driver	NG JIN WEI FAVIAN
NRIC No	S8501292D
Date Of Birth	24/01/1985
Occupation	OUTDOOR
Date Of Driving Pass	11/04/2007
Driving Experience	11 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-97871370
Fax Number	
Contact Number	

NOEMAIL

Address

NA

Postcode

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 - CROSS JUNCTION

Weather Conditions CLEAR
Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? N

Number of vehicles involved in the accident

Was any body injured in the Accident? YES

Was any injured conveyed to hospital by

ambulance?

YES

NO

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME: :

: P1 : MALE

GENDER:

NAME: GENDER:

Passenger 2

: P2

: FEMALE

**Details of Police Action** 

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name

SENGKANG NPC

Police Station Address

ROAD: 2 SENGKANG SQUARE #01-02 , POSTCODE: 545025 , 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 POLICE REPORT NO: (T/20180507/2186) ON 07/06/2017 AT ABOUT 1815HRS, I WAS DRIVING MY GREY MAZDA 3 BEARING SLL7050D AT ALONG LOWER DELTA ROAD ON THE EXTREME RIGHT LANE AS A GRAB DRIVER AND THERE WERE TWO PASSENGERS WITH ME. WHILE APPROACHING IN TO A JUNCTION OF MOUNT FABER ROAD. I WAS ABOUT TO TURN RIGHT, I SLOWED DOWN MY CAR AND TAKE A LOOK AT THE ONCOMING SIDE FOR ON COMING VEHICLE. THUS, I PROCEED TO TURN RIGHT AS I SAW THE ROAD WAS CLEAR. AT THAT POINT OF TIME, THE TRAFFIC LIGHT WAS GREEN AND WAS IN MY FAVOR. SUDDENLY, I FELT AN IMPACT FROM THE REAR LEFT SIDE OF MY CAR. I ALIGHTED AND DISCOVERED THAT THERE WAS A MERCEDES BEARING SLS5212E HAD HIT ON TO MY REAR RIGHT SIDE OF MY VEHICLE WHICH CAME FROM THE ON COMING LANE. MY REAR LEFT DOOR WAS DENT AND HAD SCRATCHES, LEFT REAR TIRE WAS DAMAGED. THE DRIVER OF THE MERCEDES WAS CONVEYED TO HOSPITAL. TRAFFIC POLICE HAD ATTENDED TO THE SCENE.

## Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

YES

Remarks/ Reasons:

YES-RETRIEVING

Was there any audio recorded?

NO

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number SLS5212E

Vehicle Make/Model/Colour MERCEDES BENZ/A180 FL/GREY

**Details Of Properties** 

Vehicle Category PRIVATE CAR

Name of Driver UNKNOWN DRIVER

NRIC/Passport Number

Contact Number 81135550

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1** 

Name UNKNOWN DRIVER

Approximate Age Injuries Sustain

Injured person in which vehicle? SLS5212E

Were seat belts worn? YES

Was this injured conveyed to hospital by

ambulance?

YES

Address Postcode

#### SKETCH PLAN

#### IMPORTANT NOTICE

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  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.
  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") maylare permitted to collect, use, diaclose and/or process my personal datalpersonal information and disclose and transfer such Personal Information to all insurance who nave insured vehicles(s) involved in this accident (all insurance) who have insured vehicles(s) involved in this accident (all insurance) who have insured vehicles(s) involved in this accident (all insurance) who have insured vehicles(s) for the purpose(s) of
  (i) processing, handing and/or dealing with my claims including the settlement of the claims.

  8. Investigation the accident analize my interest.

  1. Investigation the accident analize my interest.

  - investigating the accident and/or my claims including the settlement of the claims.
     investigating the accident and/or my claims.
     investigating the accident and/or my claims.
     carrying out and/or dealing with my instructions or responding to any enquiries by me.
     city 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
- disclosure or certain personal data about the 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")

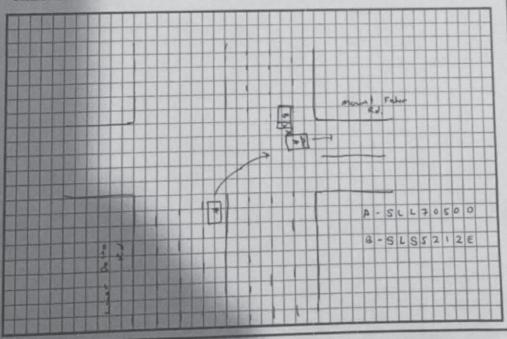
  (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes, and

  (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.

VERIFIED BY AJAX MARS REPORTING OFFICER MOHAMAD HELMY BIN ALEHAM

Policyholder's Signature / Date & Time Driver's Signature (If driver is not the policyholder) / Date & Time Witnessed by Reporting Centre

## Sketch Plan





T/2018060<sup>2</sup>

Date of Expiry:

Police Station Of Origin: Sengkang N.P.C 2 Sengkang Square #01-02 SINGAPORE 545025 Tel No: 1800-343 8999

Report No. 1/20180607/2186

REPORT OF A TRAFFIC ACCIDENT

SELF EMPLOYED

Date/Time Report Made Station Diary No. Vide Report No. 07/08/2018 21:53 D/20180607/0113 187 Informant's Particulars Name of Informant Address: NG JIN WEI, FAVIAN APT BLK 309C ANCHORVALE ROAD #11-57 SINGAPORE 543309 Contact No. ID Type / ID No. NRIC NO / \$8501292D Mobile: 97871370 Home/Office Nationality Email SINGAPORE CITIZEN Type of Informant Age: Date of Birth Sex: Driver 24/01/1985 Male Institution / School Name Race: Language English Chinese Driving Licence Information Occupation:

Class: 3

General Infor	mation of the Accident	Drink	Date/Time of	Type of Location:
Type of Accident	Attended by Police	Drive: No	Accident: 07/06/2018 18:15	X-Junction
LOWER DELT	ead 1 and Road 2 FA ROAD FR ROAD Pelta Road turning right in	Road Suriace.	ad	Road Speed Limit:
clear Dry Traffic Flow: Traffic Control: Traffic Light - Wo		orking	Traffic Volume: Moderate	
(wo Way Type of Collision Retween Movin	on: ng Vehicles - Head To S			Anyone conveyed by ambulance: Yes

		AGO	Teautet	Color	Condition	No of Passenge
		Make	Model	COIG		0
SLL7050D	Car					
SUS5212E	Car	2000				0

Any Pedestrian Involved: No
No of Pedestrians Injured: NIL Use of Pedestrian Crossing: NA



police Station Of Origin: Sangkang N.P.C 2 Sengkang Square #01-02 SINGAPORE 545025 Tel No: 1800-343 8999

2 of 3 Report No. T/20180607/2166

CONTINUATION OF REPORT

Driver						
Name	NG JIN WEI, FAVIAN		ID No	).	S8501292D	
Related Vehicle	SLL7050D (Car)			Conta	ect No.	97871370
Hospital/Clinic	NIL			Class of Driving Licence & Expiry Date		Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Disc	charge	NIL	
No. of Days granted Medical Leave NIL		NIL	Degree o	finjury	NIL	

## Brief Details.

On 07/06/2018 at about 1815hours, I was driving my Grey Mazda 3 bearing SLL 7050D at along Lower Delta Road on the extreme right lane as a GRAB driver and there were two passengers with me. While approaching into a junction of Mount Faber Road, I was about to turn right, I slowed down my car and take at look at the oncoming side for on coming vehicle. Thus, I proceed to turn right as I saw the road was clear. At that point of time, the traffic light was green and was in my favor. Suddenly, I feit an impact from the rear left side of my car. I alighted and discovered that there was a Mercedes bearing SLS 5212E had hit onto my rear right side of my vehicle which came from the on coming lane. My rear left door was dent and had scratches, left rear tire was damaged. The driver of the Mercedes was conveyed to hospital. Traffic police had attended to the scene. Traffic police had attended to the scene.



Police Station Of Origin: Sengkang N.P.C 2 Sengkang Square #01-02 SINGAPORE 545025 Tel No: 1800-343 8999 T/20180607/2186

3 of 3 Report No. T/20180607/2186

CONTINUATION OF REPORT

Sketch Plan

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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 F / Sgt 3 LEE JIN WEI

Signature Of Interpreter. Not applicable

Officer in Charge Of Case
TP / GIT /
SI MOHAMMAD ABDILLAH BIN PAUL
Contact No. 65476246

Authentication Stamp

Signature Of Informant

Date/Time: 07/06/2018 21:53

Classification Of Case

# > Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	7200G
Vehicle Details	
Vehicle No.:	SLL7050D
Vehicle to be Exported:	Yes
Intended De-registration Date:	08 Jun 2018
Vehicle Make:	MAZDA
Vehicle Model:	MAZDA3 4-DOOR SEDAN 1.5L SP.6EAT
Primary Colour:	Grey
Manufacturing Year:	2017
Engine No.:	P520432693
Chassis No.:	JM6BN22A8H0145333
Maximum Power Output:	88.0 kW (118 bhp)
Open Market Value:	\$14,688.00
Original Registration Date:	07 Mar 2017
First Registration Date:	07 Mar 2017
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$9,688.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	06 Mar 2027
PARF Rebate Amount: Intended COE Rebate Details	\$7,266.00
COE Expiry Date:	06 Mar 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$48,401.00
COE Rebate Amount:	\$38,720.00
Total Rebate Amount:	\$45,986.00

The information contained herein is correct as at 08 Jun 2018