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 <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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	18/06/2018 12:12
Date Of Accident	17/06/2018 09:35
Exact Location Of Accident	BUKIT BATOK WEST AVENUE 3 JUNCTION
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKB2965L
Insured/Policyholder	
Name Of Registered Owner	ABDUL RAHIM BIN MARIMOH
NRIC No	S0147405G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-83661740
Alternative Phone No	OTHERS-84818488
Vehicle Particulars	
Manufacturer	NISSAN
Model	SYLPHY-1.5 4AT ABS D/AB 2WD 4DR (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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 CAR
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100258217-07
Cover Note Number	

Driver

Name of Driver SHAHUL BIN ISMIN
NRIC No S7516746F
Date Of Birth 07/06/1975

Date Of Birth 07/06/1975
Occupation INDOOR
Date Of Driving Pass 25/06/1997

Driving Experience 20 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-84818488

Fax Number

Contact Number OTHERS-83661740

EMail Address NOEMAIL

Address BLK 115 POTONG PASIR AVENUE 1

#01-898

Postcode 350115

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured RELATIVE

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company 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

Was any body injured in the Accident? YES

Was any injured conveyed to hospital by

ambulance?

NO

NO

YES

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 1

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name JURONG POLICE DIVISIONAL HQ ('J' DIVISION)

Police Station Address ROAD: NO. 2 JURONG WEST AVENUE 5, POSTCODE: 649482,

country: Singapore

Police Station Contact TEL NO: 1800-7910000 - FAX NO: 68965649

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT J/20180617/7024

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 SLB7305Y
Vehicle Make/Model/Colour MAZDA 3

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver TOH WEI HAO JEREMY

NRIC/Passport Number S8315860C

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

DETAILS OF INJURED PERSON 1

SHAHUL BIN ISMIN Name

Approximate Age

Injuries Sustain

Injured person in which vehicle? SKB2965L

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

Address

Postcode

SLIGHT INJURY

YES

NO

Accident Sketch Plan

SKETCH PLAN

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- 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:
 - 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 dover is not the policyholder)

Date & Time:

Reporting Centre Personnel's Slanature

Name:

NRIC/FIN No.4

Accident Sketch Plan

SKETCH PLAN	CT BETOIC WAST	AVENUE 2 FUNCTION	N
	8 8	l a	
(A) SKB 3965L (B) SLB 7305Y		CIVIL SE RVICE CLUB	
DESCRIBE CIRCUMSTANCES			
Please ref	er to police report	(Report No. 5/30/80	5617 /7024)
ECLARATION We declare the foregoing particul	1//		1.1.0
officyholder's Signature	Driver's Signature	· pr	100/2018
ate & Time:	(If driver is not the policyholder)	Reporting Centre Personnel Name:	s signature

GANDAN SUBSIDIAN DOWN 93

POLICE REPORT





1 of 2

POLICE REPORT (NP299)

Police Station Of Origin Jurong Police Divisional HQ 2 Jurong West Avenue 5 SINGAPORE 649482 Tel No:1800-7910000 Report No. J/20180617/7024

Station Diary No.			
1 #01-898			
Home/Office: Mobile:			
ice			
yanese			
RE 659164			
)			

On Sunday 17 June 2018 at around 0937 hrs while stopping my vehicle of make and model Nissan sylfie bearing registration number SKB2965L at a controlled traffic light junction on a red light of Bukit Batok West Avenue 3. While waiting for the traffic light to change and be on my favour, I suddenly felt a bang and my can comes to a Jerk. I opened my car door to inspect and found that a car bearing registration number SLB7305Y and Make / Model Mazda 3 dark grey in colour had hit the rear of my car which results in some cracks and part of the rear bumber of my car came off. The driver of the Mazda vehicle namely Toh Wei Hao Jeremy of NRIC number S8315860C was behind the steering wheel during the time

Signature Of Officer Recording The Report:	Signature Of Informant: The identity of the person making this		
Not applicable	report has been authenticated by SingPass. No signature is required.		
Signature Of Interpreter: Not applicable	Date/Time: 17/06/2018 21:12		
Officer In-Charge Of Case:	Classification Of Case:		

Authentication Stamp

POLICE REPORT





POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20180617/7024

of incident.	There is no	injury and	we exchanged	particular fo	or insurance	claim ;	purposes	before	we
parted.									

No further police assistance is required. This report is for record purposes only.

Signature Of Officer Recording The Report:	Signature Of Informant:
Not applicable	The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 17/06/2018 21:12
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	













