SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Date Of Birth

Occupation

Gender

Date Of Driving Pass

Driving Experience

Mobile Number

Fax Number Contact Number 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

aforesaid.	,
	ACCIDENT STATEMENT
Date Of Report	26/06/2018 13:44
Date Of Accident	25/06/2018 09:25
Exact Location Of Accident	BKE BEFORE PIE GANTRY
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKW2544H
Insured/Policyholder	
Name Of Registered Owner	FARIDAH BTE JANTAN
NRIC No	S1247750C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93868640
Alternative Phone No	OFFICE-93868640
Vehicle Particulars	
Manufacturer	HONDA
Model	VEZEL 1.5S CVT
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	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	M494047
Cover Note Number	-
Driver	
Name of Driver NRIC No	DINAH DIYANAH BINTE KAMSAIM S8923621E
INTIC INC	30323021E

18/07/1989

27/05/2008

10 YEARS AND 0 MONTHS

(LOCAL) +65-93860553

INDOOR

FEMALE

NOEMAIL

BLK 124 MARSILING RISE #06-114 Address

Postcode 730124

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 **CHAIN COLLISION**

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? YES

Was any injured conveyed to hospital by NO

ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO 3

Number of Passengers (Including Driver)

Passenger 1

NAME: : FARIDAH BTE JANTAN

: FEMALE GENDER:

Passenger 2 NAME: : DANIAL KAMSAIM

> GENDER: : MALE

Details of Police Action

YES Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name TRAFFIC POLICE DIVISION HQ

ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY: Police Station Address

SINGAPORE

TEL NO: 65470000 - FAX NO: Police Station Contact

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

NO

Vehicle Registration Number SLX2023C

Vehicle Make/Model/Colour

Was there any audio recorded?

Details Of Properties

Vehicle Category PRIVATE CAR ARIFIN BIN AZIZ Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SJB5280X

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR
Name of Driver CHIA KOON TECK

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name DINAH DIYANAH BINTE KAMSAIM

Approximate Age

Injuries Sustain NECK

Injured person in which vehicle? SKW2544H

Were seat belts worn? YES

Was this injured conveyed to hospital by

ambulance?

NO

Address Postcode

DETAILS OF INJURED PERSON 2

Name FARIDAH BTE JANTAN

Approximate Age

Injuries Sustain NECK AND BRUISES ON HAND AND FACE

Injured person in which vehicle? SKW2544H

Were seat belts worn? YES

Was this injured conveyed to hospital by

ambulance?

NO

Address Postcode

DETAILS OF INJURED PERSON 3

Name DANIAL KAMSAIM

Approximate Age

Injuries Sustain BODY

Injured person in which vehicle? SKW2544H

Were seat belts worn? YES

Was this injured conveyed to hospital by

ambulance?

NO

Address

Postcode

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 5. Any false reporting may be referred to the Police for investigation.
- 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.
- 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 driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name: NRIC/FIN No.:

Accident Sketch Plan

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	A = 5kw 2544 H B = 51X 2023 C A B = 5JB 5280X
1 1	BKE Before PIE Gantry
I CIRCUMSTANCES OF TI	
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Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

1 of 4 Report No. T/20180625/7025

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/06/2018 23:13		Made:	Vide Report No.:	Station Diary No.:		
Informan	t's Partic	ulars		山 加州的16年6月2月2日 1880		
	Informant: IYANAH E	BINTE KAMSAIM	Address: APT BLK 124 MARSILING RI 730124	ISE #06-114 SINGAPORE		
ID Type / NRIC NO	ID No.: / S89236	21E	Contact No.: Home/Office:	Mobile: 93860553		
Nationality: SINGAPORE CITIZEN		EN	Email: dinahsaim@gmail.com			
Sex: Female	Age: 28	Date of Birth: 18/07/1989	Type of Informant: Driver			
Race: Javanese			Language: English	Institution / School Name:		
Occupation: Shipping clerk			Driving Licence Information: Class: 3A	Date of Expiry:		

	nation of the Acci			The Libertuan Inc.	
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 25/06/2018 09:25	Type of Location Straight Road	
	BKE/PIE Gantry				
Weather: Drizzling		Road Surface: Wet		Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by	

Details of V	ehicle Invo	lved			TO ME TO SE	
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SJB5280X	Car		Honda Civic	White		0
SKW2544H	Car					0
SLX2023C	Car		Kia Cerrato	Gold		0





Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 4 Report No. T/20180625/7025

CONTINUATION OF REPORT

	volved: No						
No. of Pedestrian		Use of	Pedestrian	Cross	ing: NA		
Driver	PER STATE OF THE S	B	FE FORSE	R DWG			
Name	Chia Koon Teck		ID No		S6900967J		
Related Vehicle	SJB5280X (Car)		Conta	ct No.	NIL		
Hospital/Clinic	NIL		Class Drivin Licens Expiry	g	Class: NIL Date of Expiry: NIL		
Date Treatment	NIL	Discharge	NIL				
	ted Medical Leave NIL		e of Injury				
Driver			bio Carlotta	A MINES			
Name	DINAH DIYANAH BINTE KAMSAIM		ID No		S8923621E		
Related Vehicle	SKW2544H (Car)		Conta	ct No.	93860553		
Hospital/Clinic	BANYAN CLINIC PTE LTD.		Class Drivin Licend Expin	g	Class: 3A Date of Expiry: NIL		
Date Treatment	25/06/2018 Date Di		Discharge	NIL			
	ted Medical Leave 02	Degre	e of Injury	Sligh	1		
Driver		建筑建筑的 医	5-20 0000	DE SOLE	PER		
Name	Arifin Bin Aziz		ID No		S7809419B		
Related Vehicle	SLX2023C (Car)		Conta	ct No.	NIL		
Hospital/Clinic	NIL		Class Drivin Licen Expir	g	Class: NIL Date of Expiry: NIL		
Date Treatment	NIL	Date I	Discharge	NIL			
the first of a second street of the	ted Medical Leave NIL		e of Injury	NIL			

Brief Details.

I was driving the car to work on 25 Jun/AM. The traffic was slow as it was raining and during peak hours. It was stop and move kind of traffic in BKE.

As i just tapped on my accelerator to move forward, the car in front of me, Honda Civic SJB5280X jam break (sudden break) and I immediately hit my brake and managed to stop my car from hitting the car in front. After a few seconds later, the car behind, KIA Cerato SLX2023C hit the rear of my car and caused my car to hit the car in front of me. My foot was on my brake and the brake assist of my car was alerady activated.

POLICE REPORT



T/20180625/7025

Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 4 Report No. T/20180625/7025

CONTINUATION OF REPORT

I would like to express that I feel that the Kia Cerato was driving at relatively high speed for a slow moving traffic as the impact of the damages was very bad.

When we were communicating with the other drivers and exchanging details, the driver of the Honda Civic said that the traffic was normal and didnt jam break, however, i strongly suspected it was a jam break incident as i noticed the car in front of him suddenly signaled left to change lane. That might have cause the sudden break.

I had my brother and my mother in the car with me. My brother was in the front passenger seat and did not suffer any injuries. My mum and I, however, are feeling major discomfort on our necks and my mum suffered bruises on her hand and her face. We have visited the doctor earlier today and was given medication and 2 days MC.

POLICE REPORT





Report No. T/20180625/7025

Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

CONTINUATION OF REPORT

Sketch Plan		١
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Authentication Stamp

NP168

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 25/06/2018 23:13
Officer In Charge Of Case: TP / TPHQ / SITIMARSITA BINTE BOHARI Contact No.: 65476219	Classification Of Case:















































