

## 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	28/06/2018 16:52
Date Of Accident	11/06/2018 16:50
Exact Location Of Accident	NEAR 705 BEDOK NORTH RD RESERVOIR RISE CARPARK
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GW8215R
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SYSTEM PEST CONTROL SERVICES PTE LTD
Co Reg No	199004930W
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-67488966

### Vehicle Particulars

Manufacturer	ISUZU
Model	NHR69E
Exact Purpose for which vehicle was being used at time of accident	WORKING
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5084825735-01
Cover Note Number	-

### Driver

Name of Driver	SENIN BIN PUKARI
NRIC No	S1125841G
Date Of Birth	07/02/1955
Occupation	OUTDOOR
Date Of Driving Pass	28/01/1982
Driving Experience	36 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96701366
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 8 FRENCH RD #04-16
Postcode	200008
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLIDED INTO PROPERTY
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?	NO
Was any injured conveyed to hospital by ambulance?	
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?	YES
If Yes, Please state which Police Station	
Police Station Name	PAYA LEBAR NEIGHBOURHOOD POLICE POST
Police Station Address	<b>ROAD:</b> BLK 114 HOUGANG AVENUE 1 #01-1270 , <b>POSTCODE:</b> 530114 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-2899999 - <b>FAX NO:</b> 62815961
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
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	PROPERTY
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	GOVERNMENT
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

# Accident Sketch Plan

## SKETCH PLAN

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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.



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

SKETCH PLAN

Unable to provide sketch

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to Police Report

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.:

*[Signature]*  
911 BISHALE  
*[Signature]*

POLICE REPORT



**SINGAPORE  
POLICE FORCE**



F/20180627/2083

1 of 1

**POLICE REPORT (NP299)**

Report No. F/20180627/2083

Police Station Of Origin  
Paya Lebar NPP  
114 Hougang Avenue 1 #01-1270  
SINGAPORE 530114  
Tel No: 1800-2899999

Date/Time Report Made 27/06/2018 14:44		Vide Report No.		Station Diary No. 23	
Name Of Informant CHONG KOK SANG		Address 133 HEMMANT ROAD #02-01 SINGAPORE 438686			
ID Type / ID No. NRIC NO / S2580833I		Contact No. Home/Office		Mobile 96701366	
Nationality MALAYSIAN		Email Address			
Occupation Company director		Sex Male	Age 60	Date of Birth 17/05/1958	Race Chinese
Institution/School Name		Language			
Date/Time Of Incident 26/06/2018 14:00 - 26/06/2018 15:00		Location Of Incident 10 UBI CRESCENT #06-81 UBI TECHPARK SINGAPORE 408564			

**Brief details.**

On 26/06/2018 at about 1400hrs, I received a letter from NTUC Income stating that my company lorry bearing registration number GW8215R is involved in an accident. I wish to inform that I do not know of any accident as the company lorry was driven by my ex-employee namely, Senin Bin Pukari (IC: S1125841G Blk 8 French road #04-16 HP: 82667828). The purpose of me making this police report is to inform that the said person is no longer my employee and also to show the insurance side this report.

Signature Of Officer Recording The Report: F / Sgt 2 MUHAMMAD IZZUWAN BIN SYED	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 27/06/2018 14:44
Officer In-Charge Of Case: F / Hougang N.P.C / Sr Staff Sgt TAN SZE HERNG Contact No.: 64890999	Classification Of Case:

Authentication Stamp

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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