

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	27/06/2018 19:49
Date Of Accident	26/06/2018 17:55
Exact Location Of Accident	TPE AFTER PASIR RIS EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKX876H
Insured/Policyholder	
Name Of Registered Owner	ASIM MASOOD ANWAR
NRIC No	S7260983B
Email Address	ASIMMASOOD.ANWAR@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91172691
Alternative Phone No	OFFICE-91172691

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	FWD SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	PNPV2017-00007350
Cover Note Number	

Driver

Name of Driver	ASIM MASOOD ANWAR
NRIC No	S7260983B
Date Of Birth	11/06/1972
Occupation	INDOOR
Date Of Driving Pass	21/12/2003
Driving Experience	14 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91172691
Fax Number	
Contact Number	OFFICE-91172691
E-Mail Address	ASIMMASOOD.ANWAR@GMAIL.COM

Address	NIL
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
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	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?	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

I (SKX0876H) was driving along TPE on the second lane when a car (SJG5699X) in front brakes and stop. I braked but didnt manage to stop in time and as a result I hit the back of the car. Due to the impact, the car moved forward and hit another car (SLW1849Z) in front of him. Total of a three car collision. No injuries involved.

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	SJG5699X
Vehicle Make/Model/Colour	MITSUBISHI LANCER 1.6 A / BLACK
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	RIDWAN BIN SALLEH
NRIC/Passport Number	S1312943F
Contact Number	85339620
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLW1849Z
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Vehicle Make/Model/Colour	MAZDA3 SEDAN 1.5 AT
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LIM KIM HOCK
NRIC/Passport Number	S2199802H
Contact Number	93869705
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

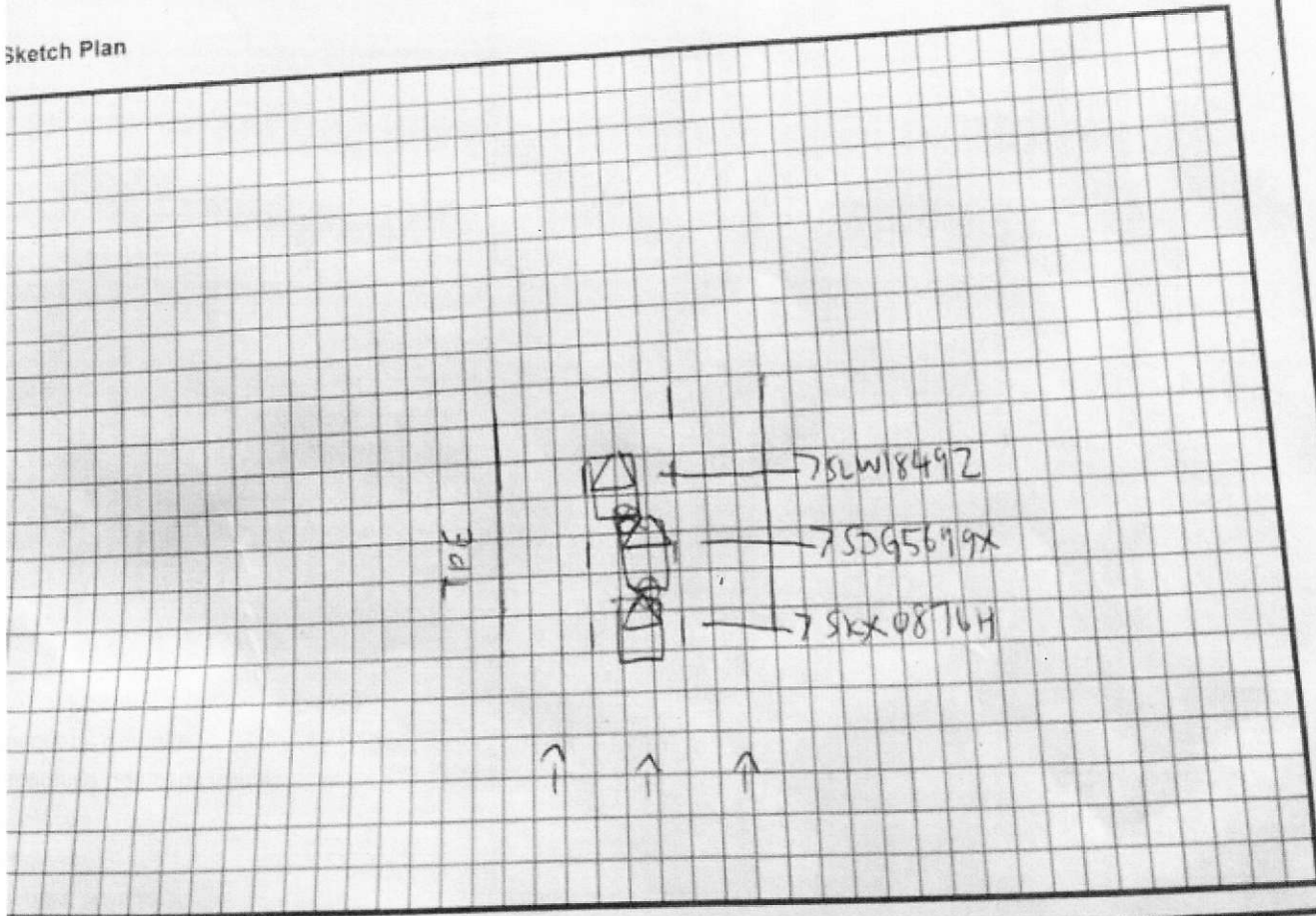
Sketch Plan

1. Please report correctly the details of the Policyholder and the accident.
2. This Form must be completed by the Policyholder and as possible.
3. Information provided must be as truthful and accurate as possible.
4. allow insurance companies to repudiate policy liability.
5. The issue and acceptance of this form by insurance companies is not an admission of policy.
6. Any false reporting may be referred to the Police for investigation.
7. The report will be forwarded by the insurers of the GIA Records Management Centre established by the Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available applicable.
8. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the cost of the insurer.
9. being made available aforesaid.
10. Consent under the Personal Data Protection Act (PDPA)
 - (a) I understand, acknowledge, agree and consent that 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.

VERIFIED BY AJAX MARS
REPORTING OFFICER
MOHAMMAD SULHANDI BIN
MOHD AFFANDI

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

Sketch Plan



ACCIDENT STATEMENT (2000 characters)

I (SKX0876H) was driving along TPE on the second lane when a car (SJG5699X) in front brakes and stop. I braked but didnt manage to stop in time and as a result I hit the back of the car. Due to the impact, the car moved forward and hit another car (SLW1849Z) in front of him. Total of a three car collision. No injuries involved.

Taxi Voucher No.:

DECLARATION

I/We declare that the above particulars & information provided above are true in every aspect

VERIFIED BY AJAX MARS REPORTING OFFICER -
MOHAMMAD SULHANDI BIN MOH AFFANDI

MARS Officer



Registered Owner or Driver's Signature

Job Complete Date/Time

27 June 2018 at 2:04 PM

Date/Time:

27 June 2018 at 2:04 PM