

## 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	05/09/2018 13:41
Date Of Accident	03/09/2018 07:00
Exact Location Of Accident	KJE /TUAS BEFORE PIONEER RD NORTH EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLN5813Y
<b>Insured/Policyholder</b>	
Name Of Registered Owner	AHMAD MUSTAMAM BIN ISMAIL
NRIC No	S1249651F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81123843
Alternative Phone No	OFFICE-81123843

### Vehicle Particulars

Manufacturer	HONDA
Model	SHUTTLE
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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPPHQ18-002574
Cover Note Number	

### Driver

Name of Driver	SHAH RIDZWAN BIN AHMAD MUSTAMAM
NRIC No	S8816634E
Date Of Birth	09/05/1988
Occupation	INDOOR
Date Of Driving Pass	15/08/2008
Driving Experience	10 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81123843
Fax Number	
Contact Number	
EEmail Address	BURNSCARS_N_MEMORIES@HOTMAIL.COM

Address	HDB WOODLANDS, 658 WOODLANDS RING ROAD #07-120
Postcode	730658
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	PARENT
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 was travelling along KJE/Tuas just before PIONEER RD NORTH Exit, car in front of me suddenly jammed brake. I managed my car to stop in time. Car SKZ4403C that was behind me couldn't stop in time & hit onto rear of my car SLN5813Y. Due to the important, my car SLN5813Y moved forward & had slight contact onto rear of car SJB2973A that was in front of me. No injuries involved. (Total 03 vehicles involved in chain collision)

#### Attachment(s)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKZ4403C
Vehicle Make/Model/Colour	SUZUKI / SWIFT SPORT
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MUHAMMAD HATDRAHA
NRIC/Passport Number	S9022279A
Contact Number	92305454
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

## DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SJB2973A
Vehicle Make/Model/Colour	HONDA / STREAM
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TOH CHEE WEI
NRIC/Passport Number	S8825109A
Contact Number	81000225
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

# Sketch Plan

## SKETCH PLAN

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6. 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 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.

#### 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.

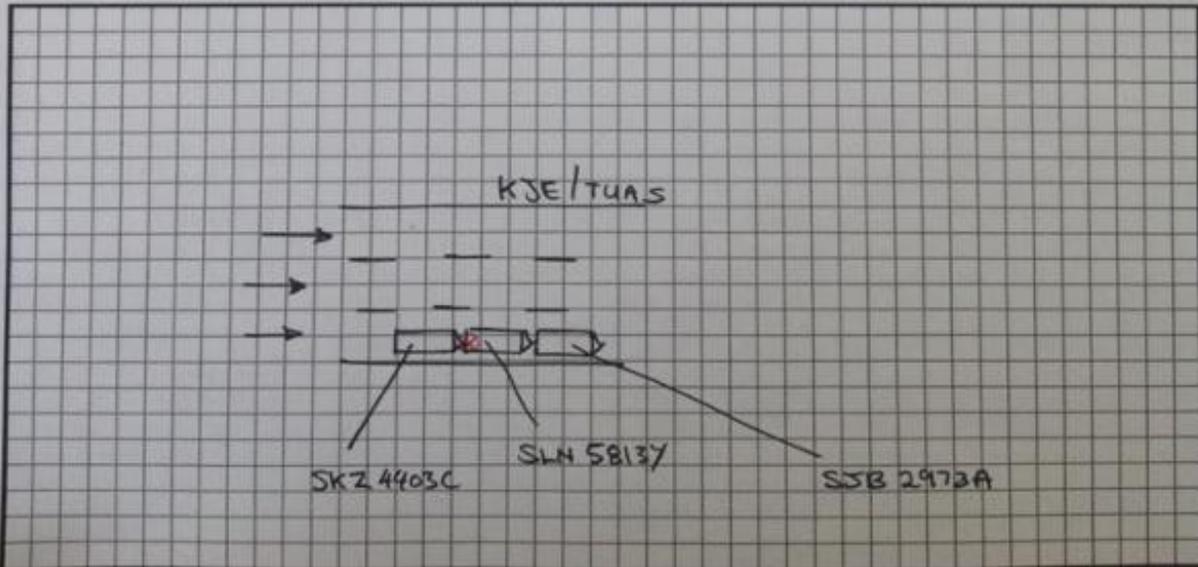
**VERIFIED BY AJAX MARS  
REPORTING OFFICER  
MOHD FADZLY BIN ISMAIL**

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

### Sketch Plan



Common Statement

**ACCIDENT STATEMENT (2000 characters)**

I was travelling along KJE/Tuas just before PIONEER RD NORTH Exit, car in front of me suddenly jammed brake. I managed my car to stop in time. Car SKZ4403C that was behind me couldn't stop in time & hit onto rear of my car SLN5813Y. Due to the important, my car SLN5813Y moved forward & had slight contact onto rear of car SJB2973A that was in front of me. No injuries involved.

(Total 03 vehicles involved in chain collision)

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 -  
MOHD FADZLY BIN ISMAIL

MARS Officer



Registered Owner or Driver's Signature

Job Complete Date/Time

5 September 2018 10:27 am

Date/Time:

5 September 2018 10:27 am

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Driving License

**REPUBLIC OF SINGAPORE**  
IDENTITY CARD NO. **S8816634E**



 Name  
**SHAH RIDZWAN BIN AHMAD  
MUSTAMAM**

Race  
**MALAY**

Date of birth  
**09-05-1988**

Country/Place of birth  
**SINGAPORE**

Sex  
**M**

**S8816634E**

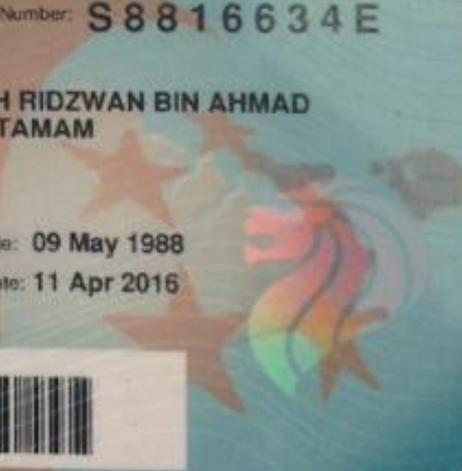
**REPUBLIC OF SINGAPORE** **DRIVING LICENCE**

Licence Number: **S8816634E**

Name:  
**SHAH RIDZWAN BIN AHMAD  
MUSTAMAM**

Birth Date: **09 May 1988**

Issue Date: **11 Apr 2016**



 002556243B

Driving License

5524858



NRIC No. S8816634E



Date of Issue  
20-08-2015

Address  
APT BLK 658 WOODLANDS RING ROAD  
#07-120  
SINGAPORE 730658



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

	EFFECTIVE DATE
Class 3 Motor cars with unladen weight $\leq$ 3000kg with $\leq$ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq$ 2500kg	15 Aug 2008

NP 428A

Licence No: S8816634E



Addendum Sheet Pg. 1



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: S66SS0020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MBHH18115112-01 Vehicle Registration No: SLN5813Y
Name(as shown in NRIC) : SHAH RIDZWAN BIN AHMAD MUSTAMAM/Passport No : S8816634E
(\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate
Address : Singapore( )
Contact (Tel) : Mobile No. : 81123843
Email Address : BURNSCARS\_N\_MEMORIES@HOTMAIL.COM
Date of Accident : 03/09/2018 Time of Accident : 0700HRS
Place of Accident : KJE /TUAS BEFORE PIONEER RD NORTH EXIT
Insurance Company: EQ INSURANCE COMPANY LTD

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

ATTACHED VIDEO FOOTAGE
[Multiple blank lines for additional information]

Policyholder / Driver's Signature
Date:

SUSAN
Reporting Centre Personnel's Signature
Name: F S NEO
NRIC/FIN No.:
Date: 08 SEPTEMBER 2018