

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	06/09/2018 13:59
Date Of Accident	05/09/2018 14:50
Exact Location Of Accident	SIN MING AVENUE SLIP ROAD TWDS ANG MO KIO AVENUE1
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGU5955T
Insured/Policyholder	
Name Of Registered Owner	MD AZAHAR BIN ISMAIL
NRIC No	S1582491C
Email Address	SHIDAH_AMK@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-90663886
Alternative Phone No	OTHERS-90663886

Vehicle Particulars

Manufacturer	TOYOTA
Model	WISH 1.8 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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5091136234-01
Cover Note Number	

Driver

Name of Driver	AFIQ BIN MD AZAHAR
NRIC No	S9239365H
Date Of Birth	21/10/1992
Occupation	INDOOR
Date Of Driving Pass	19/06/2015
Driving Experience	3 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90295165
Fax Number	
Contact Number	OTHERS-90295165
Email Address	SHIDAH_AMK@HOTMAIL.COM

Address	BLK 601 ANG MO KIO AVENUE 5 #02-2609
Postcode	560601
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	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?	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?	YES
If Yes, Please state which Police Station	
Police Station Name	KEBUN BARU NPP
Police Station Address	ROAD: 111 ANG MO KIO AVE 4 , POSTCODE: 560111 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT : F/20180905/2156

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	SKB1676C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)	1
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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.

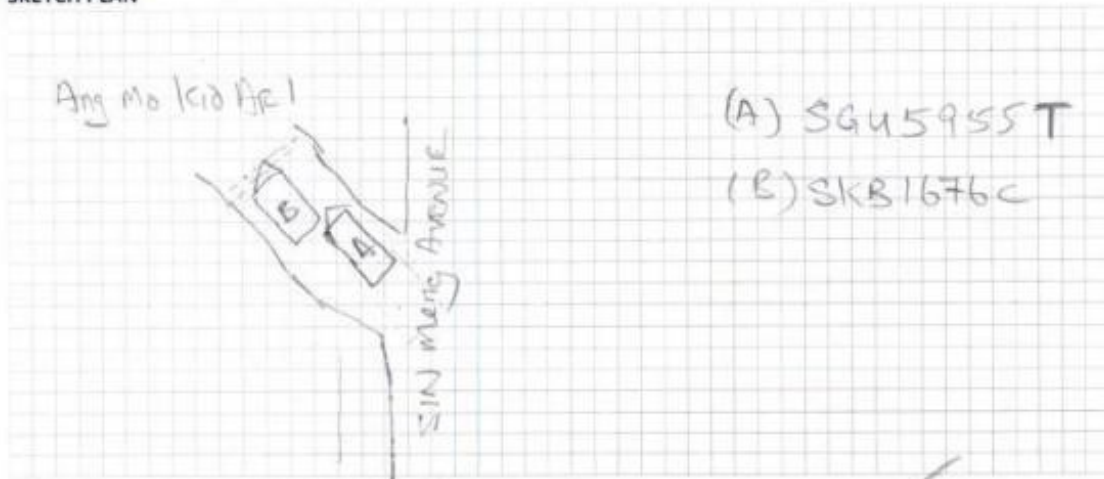
Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 06/04/2018
1304

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

P/s Refer to the Police Report
F/20180905/2156

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature
Date & Time:

(Signature) (Date & Time)

Driver's Signature
(If driver is not the policyholder)
Date & Time: 06/09/2018
1304

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Sketch Plan #3



**SINGAPORE
POLICE FORCE**



F/20180905/2156

1 of 2

POLICE REPORT (NP299)

Report No. F/20180905/2156

Police Station Of Origin
Kebun Baru NPP
111 Ang Mo Kio Avenue 4 SINGAPORE
560111
Tel No: 1800-4589999

Date/Time Report Made 05/09/2018 19:53	Vide Report No.	Station Diary No. 18
Name Of Informant AFIQ BIN MD AZAHAR	Address APT BLK 601 ANG MO KIO AVENUE 5 #02-2609 SINGAPORE 560601	
ID Type / ID No. NRIC NO / S9239365H	Contact No. Home/Office	Mobile 90295165
Nationality SINGAPORE CITIZEN	Email Address	
Occupation DISPATCH DRIVER	Sex Male	Age 25
Institution/School Name	Date of Birth 21/10/1992	Race Malay
Date/Time Of Incident 05/09/2018 14:50	Location Of Incident SIN MING AVENUE SINGAPORE SIN MING AVENUE, SLIP ROAD TOWARDS ANG MO KIO AVENUE 1	

Brief details.

On 05/09/2018 at about 1450hrs, I was driving my car, a Silver Toyota Wish (vehicle no. SGU5955T), along Sin Ming Avenue, along the road turning left towards Ang Mo Kio Avenue 1.

I was driving behind the car, a Grey Volkswagen (vehicle no. SKB1676C). Subsequently, whilst at the slip road, as I was checking for oncoming traffic, the Volkswagen stopped. As I could not react in time, my

Signature Of Officer Recording The Report: F / Sgt 2 IZWAN BIN SANI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 05/09/2018 19:53
Officer In-Charge Of Case: F / Ang Mo Kio North N.P.C / Sr Staff Sgt TOK WEI WEI, JEFFREY Contact No.: 64849999	Classification Of Case:

Authentication Stamp



**SINGAPORE
POLICE FORCE**



F/20180905/2156

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20180905/2156

car's front bumper collided onto the Volkswagen right rear bumper.

I then stepped out of my car and gave my particulars to the driver, a Female Chinese in her late 20s (HP: 82336768). I then offered to meet her after office hours at her workshop so that we can settle privately and she agreed.

At about 1735hrs, I met with the driver at 160 Sin Ming Drive. Whilst at the workshop, the driver did not wish to provide me with her particulars and decided that she will go through insurance claim. When I asked for her particulars she claimed that she had forgotten to bring her particulars with her. She then insisted that she will go through insurance claims.

Afterwards she messaged me the name "Loh Chee Liang IC: S1228739I". However, I am unsure if that is her particulars.

I am lodging this report for my own record and action.

Signature Of Officer Recording The Report:

F / Sgt 2 IZWAN BIN SANI

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:
F / Ang Mo Kio North N.P.C /
Sr Staff Sgt TOK WEI WEI, JEFFREY
Contact No.: 64849999

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Signature Of Informant:

[Handwritten Signature]

Date/Time:
05/09/2018 19:53

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



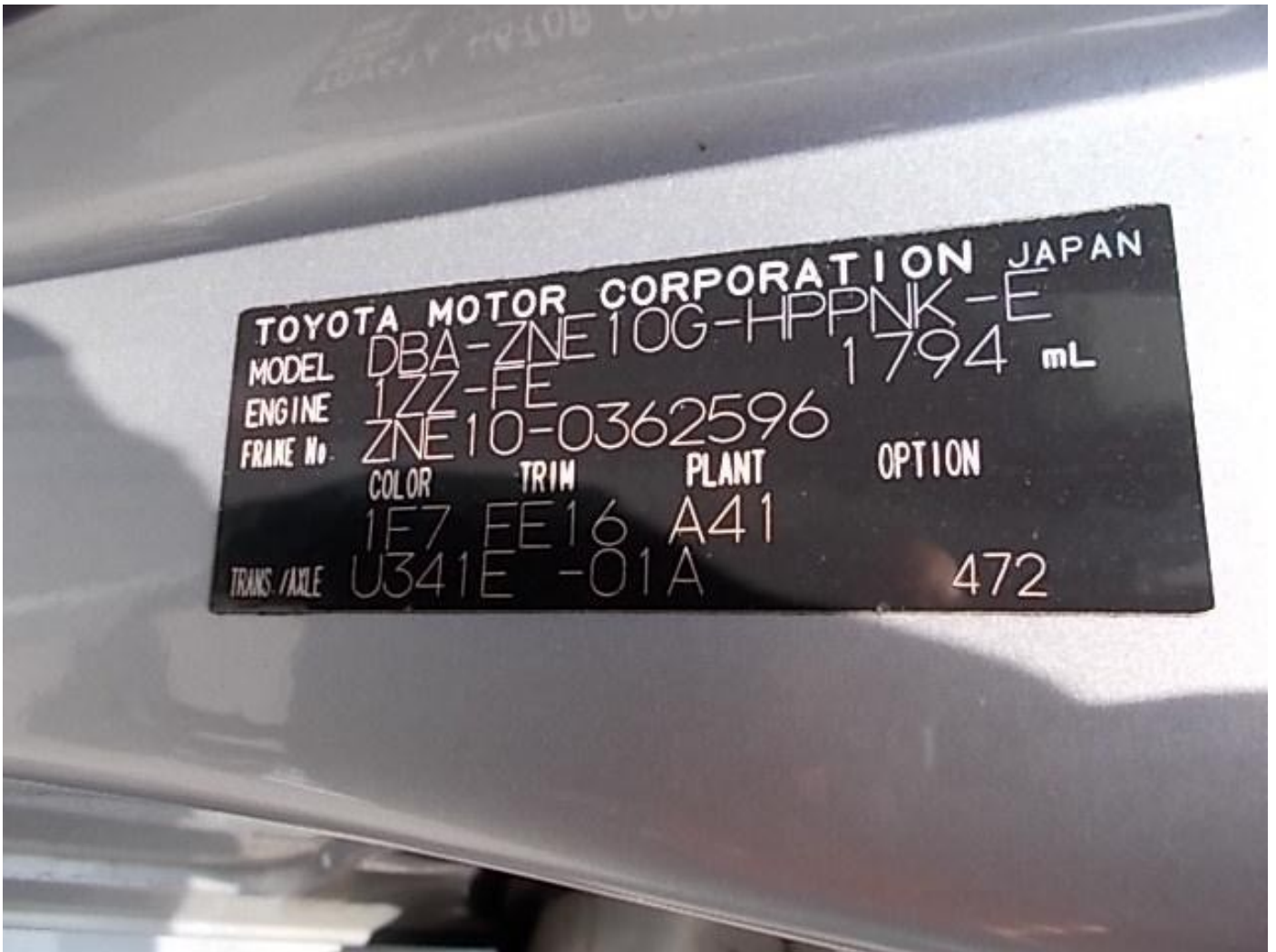
Accident Photo



Accident Photo



Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



F/20180905/2156

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Police Report



**SINGAPORE
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Signature Of Interpreter:
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Sr Staff Sgt TOK WEI WEI, JEFFREY
Contact No.: 64849999

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Signature Of Informant:

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Classification Of Case: