

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 16:29
Date Of Accident	27/08/2018 09:20
Exact Location Of Accident	THE HERENCIA,46 KIM YAN RD DROP OF POINT.
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLK9182Z
Insured/Policyholder	
Name Of Registered Owner	AUTOBAHN RENT A CAR PTE. LTD.
Co Reg No	201607970Z
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-86089649

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS
Exact Purpose for which vehicle was being used at time of accident	GRAB
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 HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	5079864471-02
Cover Note Number	

Driver

Name of Driver	KOH HAO YANG,RYAN
NRIC No	S9534805Z
Date Of Birth	28/09/1995
Occupation	OUTDOOR
Date Of Driving Pass	19/12/2015
Driving Experience	2 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91386048
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 114 DEPOT ROAD #22-1037
Postcode	100114
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	COLLISION - OPENING DOOR OF VEHICLE
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)	2
Passenger 1	NAME: : UNKNOWN GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT MERAH WEST NPC
Police Station Address	ROAD: 500 BUKIT MERAH VIEW #01-01 , POSTCODE: 159682 , 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: T/20180827/2122

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	FBG2683E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	SALIHIN BIN ABDUL GANI
NRIC/Passport Number	S9225219A
Contact Number	87495399
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.



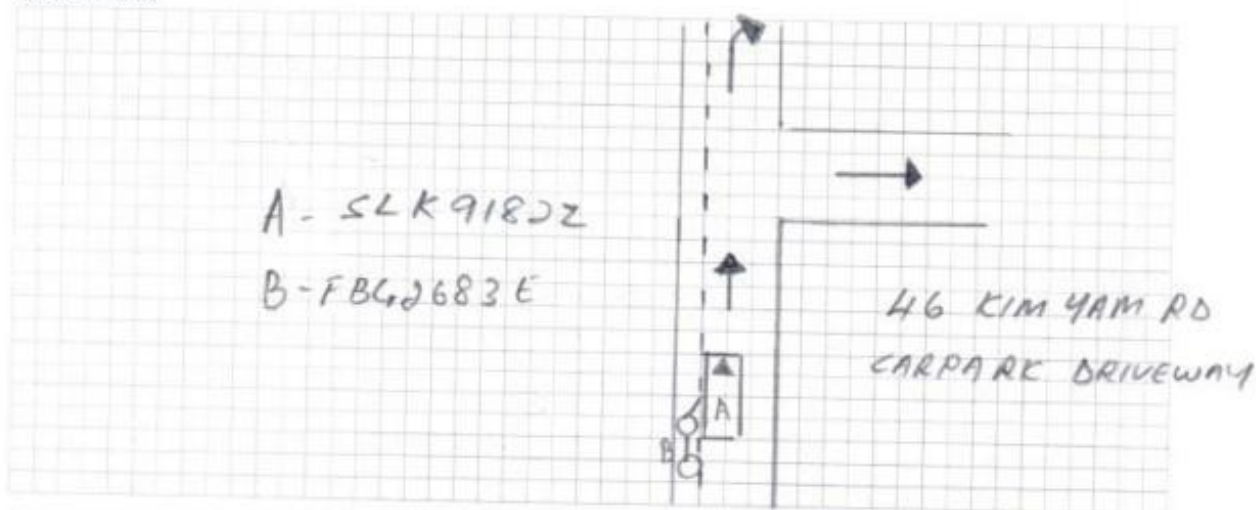
Policyholder's Signature
Date & Time:

 4/4/18
Driver's Signature
(If driver is not the policyholder)
Date & Time:

 06/09/18
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Pls refer to the police report: 7/20180822/2112

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.: _____

Individual Statement



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Bukit Merah West N.P.C
500 Bukit Merah View #01-01 SINGAPORE
159682
Tel No. 1800-3779999



T12018082712122

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Report No. T12018082712122

CONTINUATION OF REPORT

Rider			
Name	SALIHIN BIN ABDUL GANI		ID No. S9225219A
Related Vehicle	FBG2683E (Motorcycle)		Contact No. 87495399
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	KOH HAO YANG, RYAN		ID No. S9534805Z
Related Vehicle	SLK9182Z (Car)		Contact No. 91386048
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details:

On 27/08/2018 at about 0920hrs, I allop my vehicle at The Herencia for my Passenger to alight. My passenger opened the left rear door and a motorcycle collided into it. He fell down after colliding into it however nobody is injured.

My vehicle left rear door was forced out and not able to close it. The motorcycle turn signal slightly dislodged. No police or ambulance at scene. Both exchanged particulars and I was instructed to go to Police station to lodge a police report by him. The rider was wearing a Certia Cisco Polo T Shirt and he informed that he will need to lodge a police report due to his job nature and he advised me to lodge a police report within 24hrs prior to the accident that happened. Thus, I came down to lodge a police report.

I have already informed my vehicle rental company and had left a feedback for Grab company. Currently, I am waiting for the follow up from my rental company.

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



T20180827/2122

Police Station Of Origin:
Bukit Merah West N.P.C
500 Bukit Merah View #01-01 SINGAPORE
159662
Tel No: 1800-3779899

1 of 3
Report No: T20180827/2122

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 27/08/2018 16:31
Vide Report No:
Station Diary No.: 26

Informant's Particulars

Name of Informant: KOH HAO YAN, RYAN			Address: APT BLK 114 DEPOT ROAD #22-1037 SINGAPORE 100114		
ID Type / ID No: NRIC NO / S95348052			Contact No: Home/Office: Mobile: 91386048		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 22	Date of Birth: 28/08/1995	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: GRAB DRIVER			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident: Non-Injury Others	Drink Drive: No	Date/Time of Accident: 27/08/2018 09:20	Type of Location: DROP OFF POINT
Location: Along Road 1 KIM YAM ROAD THE HERENCIA, 46 KIM YAM ROAD, DROP OFF POINT			
Weather: Clear		Road Surface: Dry	Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light
Type of Collision: HEAD TO REAR OPEN DOOR			Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBG2683E	Motorcycle				Slightly Damaged	0
SLK9182Z	Car				Slightly Damaged	1

Details of Person Involved

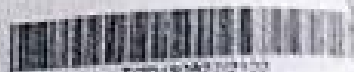
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

Police Report



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Bukit Merah West N.P.C
500 Bukit Merah View #01-01 SINGAPORE
156682
Tel No: 1800-3779999



T12018062712120

2 of 3

Report No: T12018062712120

CONTINUATION OF REPORT

Rider			
Name	SALIHIN BIN ABDUL GANI		ID No. 59235219A
Related Vehicle	FBG2583E (Motorcycle)		Contact No. 87495399
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge: NIL
No. of Days granted Medical Leave	NIL		Degree of Injury: NIL
Driver			
Name	KOH HAO YANG, RYAN		ID No. 59534505Z
Related Vehicle	SLK9182Z (Car)		Contact No. 91386048
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge: NIL
No. of Days granted Medical Leave	NIL		Degree of Injury: NIL

Brief Details

On 21/08/2018 at about 0930hrs, I stop my vehicle at The Herencia for my Passenger to alight. My passenger opened the left rear door and a motorcycle collided into it. He fell down after colliding into it however nobody is injured.

My vehicle left rear door was forced out and not able to close it. The motorcycle turn signal slightly dislodged. No police or ambulance at scene. Both exchanged particulars and I was instructed to go to Police station to lodge a police report by him. The rider was wearing a Caria Cisco Polo T Shirt and he informed that he will need to lodge a police report due to his job nature and he advised me to lodge a police report within 24hrs prior to the accident that happened. Thus, I came down to lodge a police report.

I have already informed my vehicle rental company and had left a feedback for Grab company. Currently I am waiting for the follow up from my rental company.

Police Report



SINGAPORE
POLICE FORCE

Police Station Of Origin:
Bukit Merah West N.P.C.
500 Bukit Merah View #01-01 SINGAPORE
159682
Tel No: 1800-3779999



T05/160527/2122

3 of 3

Report No: T05/160527/2122

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474805 stating the report number as reference.

Signature Of Officer Recording The Report:
D.F.
Sgt 2 BEE ZHI CHYE

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time
27/05/2018 14:31

Officer In Charge Of Case:
TP / GIA /
Staff Sgt WONG SIEU LUI
Contact No.: 65475151

Classification Of Case:

Authentication Stamp:
16712