

MVA318115519 / VAC - Kaki Bukit
ENTRY DATE & TIME: 06/09/2018 12:30
SUBMITTED BY: Norhaini Bte Abdul Majid

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 willful 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 12:30
Date Of Accident	05/09/2018 23:45
Exact Location Of Accident	BIDEFORD ROAD TOWARDS CTE (SLE)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR6796K
Name Of Registered Owner	NOR MUHAMMAD SOFI BIN JOBRI
NRIC No	S8704656G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-82370636
Alternative Phone No	OFFICE-82370636

Manufacturer	VOLKSWAGEN
Model	NEW GOLF 1.4 AT 5K13G5
Exact Purpose for which vehicle was being used at time of accident	
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

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5094574987 CLASSIC
Cover Note Number	

Name of Driver	NOR MUHAMMAD SOFI BIN JOBRI
NRIC No	S8704656G
Date Of Birth	06/03/1987
Occupation	INDOOR
Date Of Driving Pass	10/04/2007
Driving Experience	11 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82370636
Fax Number	
Contact Number	OFFICE-82370636
Email Address	NOEMAIL

Address BLK 251 #02-428 TAMPINES STREET 21
 Postcode 520251
 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 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 2
 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 MARINA BAY NPC
 Police Station Address ROAD: 70 MARINA VIEW , POSTCODE: 018962 , COUNTRY: SINGAPORE
 Police Station Contact TEL NO: - FAX NO:
 Was notice of intended Prosecution given? NO
 If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT ATTACHED

Attachments

Are accident photos available for attachment? YES
 Was there any video captured by Car Camera? YES
 Remarks/ Reasons: WITH OWNER
 Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLC25X
 Vehicle Make/Model/Colour FERRARI CALIFORNIA 4.3 A
 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)

Sketch Plan Pg. 1

SKETCH PLAN**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 reassess policy liability.
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. 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 upon application by interested parties.
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.

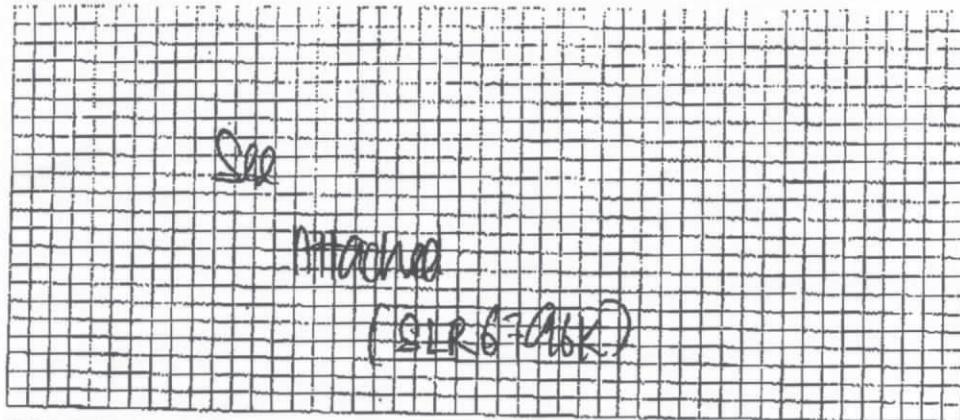
IDAC KAKI BUKIT (VAC)
 23 Kaki Bukit Ave 4
 Singapore 415933
 Tel: 67416697 Fax: 67492305
 Email: kaki@idac.com.sg
 Name:
 NRIC/FIN No.:

Policyholder's Signature
 Date & Time: 6 SEP 2018

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

Sketch Plan #2 Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to
Police Report

DECLARATION

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

Policyholder's Signature
Date & Time:

- 6 SEP 2018

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

IDAG KAKI BUKIT (VAC)

23 Kaki Bukit Ave 4

Singapore 415933

Tel: 67416697 Fax: 67492305

Email: yackb@sinonet.com.sg

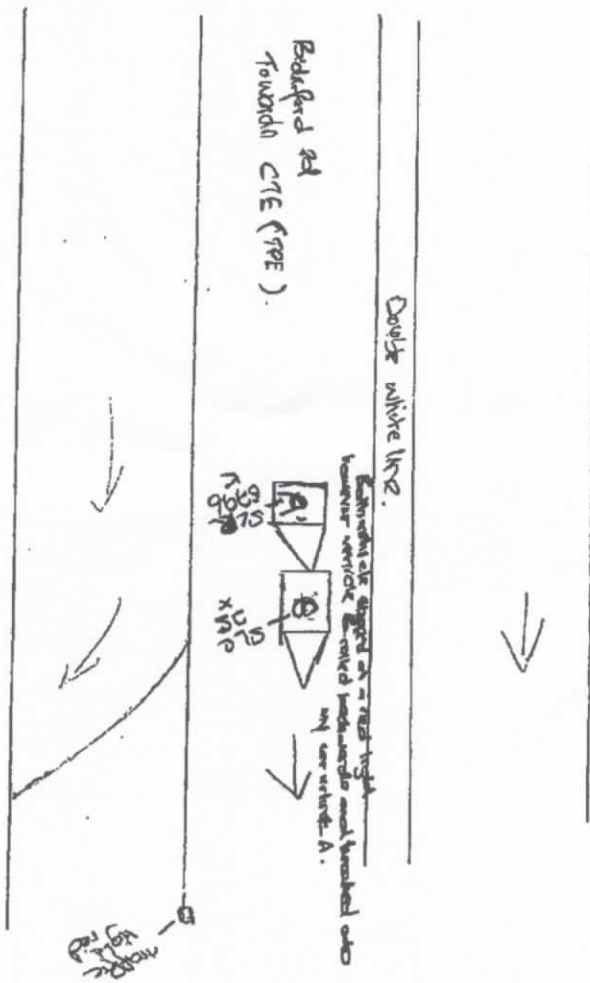
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Sketch Plan #3 Pg. 1

~~HP~~ 82370636
 SLR/2018
 23.35 PM
 SLR 6796K



Individual Statement Pg. 1


**SINGAPORE
POLICE FORCE**


7/20180908/2004

Police Station Of Origin:
Marina Bay N.P.C
70 Marina View SINGAPORE 018962
Tel No: 1800-2229999

1 of 3

Report No. T/20180908/2004

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/09/2018 00:58		Vide Report No.:		Station Diary No.: 8	
Name of Informant: NOR MUHAMMAD SOFI BIN JOBRI			Address: APT BLK 251 TAMPINES STREET 21 #02-428 SINGAPORE 520251		
ID Type / ID No.: NRIC NO / S8704656G			Contact No.:		
Nationality: SINGAPORE CITIZEN			Home/Office: Mobile: 82370836		
Email:					
Sex: Male	Age: 31	Date of Birth: 06/03/1987	Type of Informant: Driver		
Race: Malay			Language: English		Institution / School Name:
Occupation: FREELANCE			Driving Licence Information: Class: 2,3,4 Date of Expiry:		

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 05/09/2018 23:45	Type of Location: Straight Road
Location: Along Road 1 BIDEFORD ROAD				
Along Bideford Road at the traffic light junction towards CTE (SLE).				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 50 Km/h
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Stationary vehicle and rear against front bumper.				Anyone conveyed by ambulance: No

SLC25X	Car				Slightly Damaged	1
SLR6796K	Car	VOLKSWAGO N	NEW GOLF 1.4 AT 5K13G5	Grey	Slightly Damaged	0

Individual Statement Pg. 1


**SINGAPORE
POLICE FORCE**


T/20180906/2004

Police Station Of Origin:
Marina Bay N.P.C
70 Marina View SINGAPORE 018962
Tel No: 1800-2229999

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Report No. T/20180906/2004

CONTINUATION OF REPORT

SLR6796K	NTUC Income Insurance Co-Operative Limited	5084574967	26/09/2017	28/12/2018
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Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Name	NOR MUHAMMAD SOFI BIN JOBRI	ID No.	S8704656G
Related Vehicle	SLR6796K (Car)	Contact No.	82370636
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2,3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 05/09/2018 at 2345hrs, I was driving my vehicle bearing registration number SLR6796K along Bideford Road lane 1 towards CTE. I was at the traffic light junction and the light was red and another vehicle bearing registration SLC25X was stopping in front of my vehicle. While waiting for the traffic light the said vehicle rolled back and hit my front bumper. But the driver did not alight from his vehicle as such I alighted and approached the driver instructed him to stop at the side of the road. The driver board his vehicle but did not stop and continue driving. As such I followed him and high beam towards him to stop. Subsequently the driver stop his vehicle at the side before CTE slip road. The driver alighted started behaving defensive towards me and when I asked for his personal details but he ignored me. Later he went back to his vehicle and drove off without giving his particular and contact details. There are no government property damage and nobody was injured. That's all.

Individual Statement Pg. 1

**SINGAPORE
POLICE FORCE**

T/20180906/2004

•Police Station Of Origin:
Marina Bay N.P.C
70 Marina View SINGAPORE 018962
Tel No: 1800-2229899

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Report No. T/20180905/2004

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 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:
A /
Staff Sgt MOHAMMAD FIRDAUS BIN HASSAN

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
06/09/2018 00:58

Officer In Charge Of Case:
TP / GIA /
Staff Sgt WONG SIEU LUI
Contact No.: 65476151

Classification Of Case:

Authentication Stamp
NP158



Signature:

SN 173

Singapore Police Force