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 witholding 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

aforesald.		
	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	
Insured/Policyholder		
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	

DMPPHQ18-002574 Policy Number

Cover Note Number

Driver

SHAH RIDZWAN BIN AHMAD MUSTAMAM Name of Driver

NRIC No S8816634E Date Of Birth 09/05/1988 Occupation **INDOOR Date Of Driving Pass** 15/08/2008

10 YEARS AND 0 MONTHS **Driving Experience**

MALE Gender

Mobile Number +65-81123843

Fax Number

Contact Number

EMail Address BURNSCARS_N_MEMORIES@HOTMAIL.COM 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

Address

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

Remarks/ Reasons:

PENDING VIDEO FROM INSURED

Was there any audio recorded?

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 Contact Number

S9022279A 92305454

Address

Postcode

Insurance Company Name

Nature Of Damage

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)

Sketch Plan

SKEIGH PLAN

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 7. By the lodgement of this report to the insurance, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforeasis.
 8. Consent under the Personal Data Protection Act (PDPA) I understand, acknowledge, agree and consent that

- being made available aforesaid.

 Consent under the Personal Data Protection Act (PDPA)
 Lunderstand, acknowledge, agree and consent that
 Lunderstand, 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 fracturers.), this insurers lawyers/law firms. The Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of

 ip 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) Investigating the accident and/or my claims.

 (iii) Carrying out and/or dealing with my instructions or respondence, atatements, involces, 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/max packages), and/or

 (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

 (collectively the "Purposes")

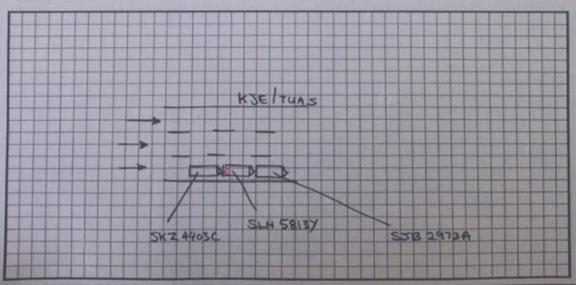
 (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes, and (c) my Personal Information for one or more of the above Purposes.

VERIFIED BY AJAX MARS REPORTING OFFICER

MOHD FADZLY BIN ISMAIL

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

Sketch Plan



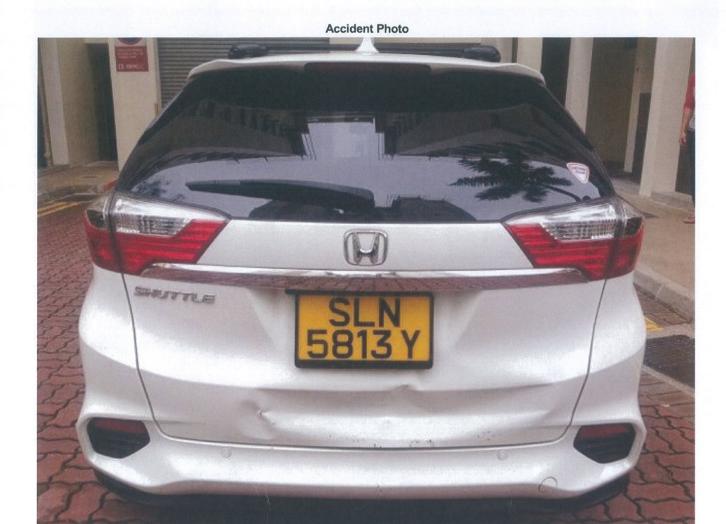
Common Statement

ACCIDENT STATEMENT (2000 characters)

me suddenly jammed brake. I manage was behind me couldn't stop in time &	fore PIONEER RD NORTH Exit, car in front of d my car to stop in time. Car SKZ4403C that hit onto rear of my car SLN5813Y. Due to the drward & had slight contact onto rear of car injuries involved.
(Total 03 vehicles involved in chain coll	lision)
Taxi Voucher No.:	
DECLARATION	
I/We declare that the above particulars & information prov	vided 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	Date/Time:
5 September 2018 10:27 am	5 September 2018 10:27 am

Accident Photo









Accident Photo





Accident Photo













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 Vehicle Registration No: SLN5813Y Name(as shownin NRIC): SHAH RIDZWAN BIN AHMAD MUSTIC/MAN/Passport No: S8816634E (*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate _Singapore(Address Mobile No.: 81123843 Contact (Tel) : BURNSCARS_N_MEMORIES@HOTMAIL.COM **Email Address** Date of Accident : 03/09/2018 _Time of Accident: 0700HRS Place of Accident : KJE /TUAS BEFORE PIONEER RD NORTH EXIT InsuranceCompany: __EQ INSURANCE COMPANY LTD (B) ADDITIONALINFORMATION / AMENDMENTS: I have made a report on the above mentioned accident and would like to include additional information or make the following amendments: ATTACHED MAS FORM Joanne Tham

Reporting Centre Personnel's Signature Name: Joanne Tham NRIC/FINNo.:

Date: 05 SEPTEMBER 2018

Date:

Policyholder / Driver's Signature

Driving License

5524858 NRIC No. S8816634E Date of Issue 20-08-2015 APT BLK 658 WOODLANDS RING ROAD #07-120 SINGAPORE 730658 YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES) EFFECTIVE DATE Motor cars with unladen weight =< 3000kg with =< 7 15 Aug 2008 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg Class 3 Licence No:S8816634E NP 428A