

## 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 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. 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	27/11/2018 13:10
Date Of Accident	18/09/2018 17:00
Exact Location Of Accident	RAEBURN PARK BELOW OLD RAILWAY STATION
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC1730P
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MEGA TOURS PTE LTD
Co Reg No	200509582Z
Email Address	CHANDRA@MEGATOURS.COM.SG
Mobile Phone No	(LOCAL) +65-90109955
Alternative Phone No	OFFICE-62942964

### Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE H/ROOF 3.0 AT
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL 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	BUS

### Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	
Cover Note Number	

### Driver

Name of Driver	FAISAL BIN MOHAMAD ISA
NRIC No	S1794466E
Date Of Birth	30/01/1967
Occupation	OUTDOOR
Date Of Driving Pass	09/07/1985
Driving Experience	33 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93698809
Fax Number	
Contact Number	
Email Address	CHANDRA@MEGATOURS.COM.SG

Address	BLK 808 WOODLANDS STREET 81 #10-141
Postcode	730808
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	DRIZZLING
Road Surface	WET

#### 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?	
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)	0

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	POTONG PASIR NEIGHBOURHOOD POLICE POST
Police Station Address	<b>ROAD:</b> BLK 142 POTONG PASIR AVENUE 3 , <b>POSTCODE:</b> 350142 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-2829999 - <b>FAX NO:</b> 62815964
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

Please refer to Police Report No. T/20181121/2015.

#### 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	GBH5247G
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

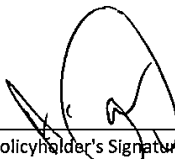
**SKETCH PLAN**


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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 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.

  
Policyholder's Signature  
Date & Time: **27 NOV 2018**

  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time: **27 NOV 2018**

  
Reporting Centre Personnel's Signature  
Name: **Deborah Lai**  
NRIC/FIN No.: **S7332811Z**

### SKETCH PLAN

Please refer to Police Report.

**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

Please refer to Police Report.

## DECLARATION

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

Policyholder's Signature

**Date & Time:**

27 NOV 2018

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Driver's Signature

(If driver is not the policyholder)

Date & Time: 27 NOV 2018

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Deborah Lai  
S7332811Z



**SINGAPORE  
POLICE FORCE**



T/20181121/2105

Police Station Of Origin:  
Potong Pasir NPP  
142 Potong Pasir Avenue 3 #01-240  
SINGAPORE 350142  
Tel No: 1800-2829999

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Report No. T/20181121/2105

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 21/11/2018 16:49		Vide Report No.:		Station Diary No.: 58
<b>Informant's Particulars</b>				
Name of Informant: FAISAL BIN MOHAMAD ISA		Address: APT BLK 808 WOODLANDS STREET 81 #10-141 SINGAPORE 730808		
ID Type / ID No.: NRIC NO / S1794466E		Contact No.: Home/Office: Mobile: 93698809		
Nationality: SINGAPORE CITIZEN		Email:		
Sex: Male	Age: 51	Date of Birth: 30/01/1967	Type of Informant: Driver	
Race: Malay		Language:	Institution / School Name:	
Occupation: Freelance Photographer		Driving Licence Information: Class: 2B,2A,3 Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 18/09/2018 17:00	Type of Location: Straight Road
Location: Along Road 1 RAEBURN PARK Along Raeburn Park below the old railway station				
Weather: Drizzling		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Not Controlled	Traffic Volume:	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No	

<b>Details of Vehicle Involved</b>						
Vehicle No	Type	Make	Model	Color	Condition	No. of Passenger
GBH5247G	Van					0
PC1730P	Bus/Coach/Mi nibus					8

<b>Details of Person Involved</b>	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



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POLICE FORCE**



T/20181121/2105

Police Station Of Origin:  
Potong Pasir NPP  
142 Potong Pasir Avenue 3 #01-240  
SINGAPORE 350142  
Tel No: 1800-2829999

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Report No. T/20181121/2105

**CONTINUATION OF REPORT**

Name	FAISAL BIN MOHAMAD ISA	ID No.	S1794466E
Related Vehicle	PC1730P (Bus/Coach/Minibus)	Contact No.	93698809
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,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 18/09/2018 at about 1700hrs, I was driving my company minibus, PC1730P along Raeburn park. I then made a three-point turn at the U-turn area and went to the pick up point. I spotted one van, GBH5247G parked near to the pick up point. I then drove past the van and pick up my passenger. Suddenly, two people approached me and informed that the bus that I am driving had side swipe their van. I then came down to assess the damage and saw one fine scratch near to the front right side of the vehicle and no paint transfer. There was also no damaged observed on the bus. I then informed this matter to my company who then spoke to the other party in regards to the matter for private settlement. I had informed my company that the van belongs to Netlink Management Pte Ltd. I wish to state that I did not hear or feel anything. My passenger also informed me that they did not see anything or hear anything in regards to the accident as well.

On 18/11/2018, I was notified by the company that I will need to lodge a accident report for the insurance claims as the other party refused private settlement and insisted of claiming from the insurance.

On 21/11/2018, I then come to Potong Pasir NPP to lodge a police accident report as required by my company insurance.



**SINGAPORE  
POLICE FORCE**



T/20181121/2105

Police Station Of Origin:  
Potong Pasir NPP  
142 Potong Pasir Avenue 3 #01-240  
SINGAPORE 350142  
Tel No: 1800-2829999

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Report No. T/20181121/2105

## 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: E / Staff Sgt TAN MENG SENG	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 21/11/2018 16:49
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:  SN 057
Authentication Stamp NP168	SINGAPORE POLICE FORCE  SIGNATURE

Accident Photo



Accident Photo



Accident Photo



Accident Photo



CHASSIS NUMBER

CHASSIS NO. : JTFTST 22PXC-0015778

UNLADEN WT. : 2180 KG

MAX. LADEN WT. : 3200 KG

PASSENGER CAP. : 1 DRIVER 13 OTHER

TYRE SIZE : (F) 195 R 15C 106/104S

(R) 195 R 15C 106/104S