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 <u>truthful and accurate</u> 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 aforesaid

aforesaid.	<u> </u>
	ACCIDENT STATEMENT
Date Of Report	28/09/2018 14:52
Date Of Accident	27/09/2018 14:50
Exact Location Of Accident	KPE (MCE) BEFORE AIRPORT RD EXIT
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SKR7392Y
Insured/Policyholder	
Name Of Registered Owner	MS MAZNAH BTE ABDULLAH
NRIC No	S1583568J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-85902150
Alternative Phone No	OFFICE-85902150
Vehicle Particulars	
Manufacturer	TOYOTA
Model	CAMRY 2.4 AUTO ABS AIRBAG
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	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	18-MU007259-R01
Cover Note Number	

	١,	

Name of Driver ALIFF ANUGERAH BIN HOOD

NRIC No S9207650D

Date Of Birth 09/03/1992

Occupation OUTDOOR

Date Of Driving Pass 17/02/2012

Driving Experience 6 YEARS AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-87505067

Fax Number

Contact Number OFFICE-87505067

EMail Address NOEMAIL

Address BLK 780 PASIR RIS STREET 71

#05-580

Postcode 510780

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 CHAIN COLLISION

Weather Conditions CLEAR
Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO Number of vehicles involved in the accident 4

Was any body injured in the Accident? YES

Was any injured conveyed to hospital by

ambulance?

YES

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO 3

Number of Passengers (Including Driver)

Passenger 1

NAME: : MAZNAH BTE ABDULLAH

GENDER: : FEMALE

Passenger 2 NAME: : NUR AFIDA BINTE TALIB

GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name EUNOS NEIGHBOURHOOD POLICE POST

Police Station Address ROAD: BLK 629 BEDOK RESERVOIR ROAD #01-1620, POSTCODE:

470629, **COUNTRY**: SINGAPORE

Police Station Contact **TEL NO**: 1800-4439999 - **FAX NO**: 62444376

NO

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT - T/20180928/2077.

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 SJS7918M

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR
Name of Driver R STEPHEN

NRIC/Passport Number S1804281I Contact Number 91695967

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SMA2466S

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number 90218446

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SLE4045B

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number 83212607

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name ALIFF ANUGERAH BIN HOOD

Approximate Age

Injuries Sustain BODY
Injured person in which vehicle? SKR7392Y

Were seat belts worn? YES

Was this injured conveyed to hospital by

ambulance?

YES

Address Postcode

DETAILS OF INJURED PERSON 2

Name MAZNAH BTE ABDULLAH

Approximate Age

Injuries Sustain BODY
Injured person in which vehicle? SKR7392Y
Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance?

YES

Address

Postcode

DETAILS OF INJURED PERSON 3

NUR AFIDA BINTE TALIB Name

Approximate Age

Injuries Sustain BODY Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address Postcode

SKR7392Y

YES

YES

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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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)
 - (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.
- 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 nature Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

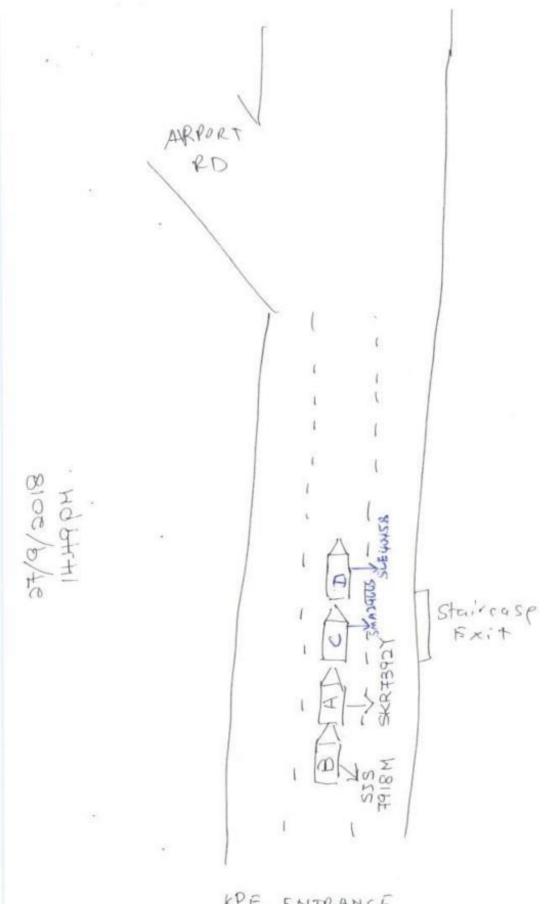
Name

NRIC/FIN No.:

Accident Sketch Plan

TCH PLAN		
	Reflecto attached Sketch. Plan	
Refer to place	CE 17/2018 0928 / 2022.	
		_
LARATION declare the foregoing par	rticulars are true in every respect.	
yholdor Signature & Time:	Driver's Signature (if driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signatu Name: NRIC/FIN No.:	ire

Accident Sketch Plan



KPE ENTRANCE





1 of 4

Report No. T/20180928/2077

Police Station Of Origin: Eunos NPP 629 Bedok Reservoir Road #01-1620 SINGAPORE 470629 Tel No: 1800-4439999

Station Diary No .: REPORT OF A TRAFFIC ACCIDENT Vide Report No.: Date/Time Report Made: 16 28/09/2018 13:35 Informant's Particulars Address: APT BLK 780 PASIR RIS STREET 71 #05-580 SINGAPORE Name of Informant: ALIFF ANUGERAH BIN HOOD 510780 Contact No.: ID Type / ID No .: Mobile: 87505067 Home/Office: NRIC NO / S9207650D Email: Nationality: SINGAPORE CITIZEN Type of Informant: Date of Birth: Sex: Age: 26 09/03/1992 Driver Male Institution / School Name: Language: Race: English Indian Driving Licence Information: Occupation: Date of Expiry: Class: 3 PART TIME SECURITY OFFICER

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 27/09/2018 14:50	Type of Location Straight Road
Location: Along Road 1 KALLANG PA	AYA LEBAR EXPRESSW			
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way			Traffic Volume: Moderate	
Type of Colli	sion: ving Vehicles - Head To F			Anyone conveyed by

Details of V	Lype	Make	Model		COOK CONTRACTOR	
SJS7918M	Car	TOYOTA	The second secon	Color	Condition	No of Passenger
	The same		AUTO ABS AIRBAG			0
SKR7392Y	Cai	ТОУОТА	CAMRY 2.4 AUTO ABS AIRBAG	Silver	Seriously Damaged	2



Police Station Of Origin: Eunos NPP 629 Bedok Reservoir Road #01-1620 SINGAPORE 470629 Tel No: 1800-4439999



Report No. T/20180928/2077

CONTINUATION OF REPORT

Vehicle No.	Туре	Make	Model	1000	Condition	No of Passenger
SLE4045B	Car	KIA	CERATO FORTE 1.6SX AT ABS D/AB 2WD 4DR	Color		
SMA2466S	Car	LAND ROVER	DISCOVERY SPORT 2.0P 7 SEATER White 27			0

Any Pedestrian I	nvolved: No .			alta.	
No. of Pedestrian	ns Injured: NIL	L	Use of Pedestrian Crossing: NA		
Driver	Commence of the Commence of the	455000	SC DESCRIPTION		Control of the contro
Name	ALIFF ANUGERAH BIN	HOOD	ID No.		S9207650D
Related Vehicle	NIL		Conta	ct No.	87505067
Hospital/Clinic	NIL	Class Driving Licence Expiry	e &	Class: 3 Date of Expiry: NIL	
Date Treatment	NIL	ate Discharge	NIL	STATE AND DESCRIPTION OF THE PARTY.	
No. of Days granted Medical Leave NIL			egree of Injury	NIL	THE RESERVE OF THE PARTY OF THE

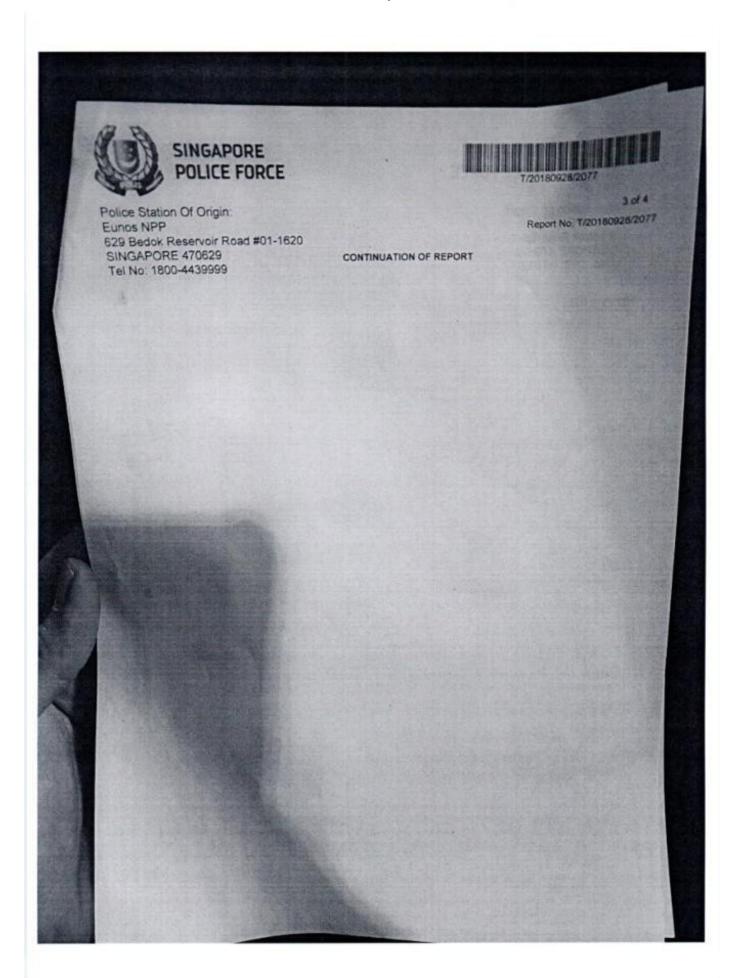
Brief Details.

On the 27th of September 2018, at around 1449hrs, I was travelling along KPE in my vehicle bearing On the 27th of September 2018, at around hardening, it is a september 2018, at around hardening registration no SKR7392Y. All of a sudden, a vehicle bearing registration no SKR7392Y. All of a sudden, a vehicle bearing registration no SKR7392Y. All of a sudden, a vehicle bearing registration no SKR7392Y. All of a sudden, a vehicle bearing registration no SKR7392Y. All of a sudden, a vehicle bearing registration no SKR7392Y. All of a sudden, a vehicle bearing registration no SKR7392Y. All of a sudden, a vehicle bearing registration no SKR7392Y. All of a sudden, a vehicle bearing registration no SKR7392Y. All of a sudden, a vehicle bearing registration no SKR7392Y. All of a sudden, a vehicle bearing registration no SKR7392Y. All of a sudden, a vehicle bearing registration no SKR7392Y. All of a sudden, a vehicle bearing registration no SKR7392Y. All of a sudden in the sudden registration no SKR7392Y. All of a sudden, a vehicle and avoided collision with the vehicle in front of. As a result, I managed to jam brake my vehicle and avoided collision with the vehicle in front. front of. As a result, I managed to jam brake my vehicle to inch forward quite a bit and as a formy vehicle as However, another vehicle bearing registration no occurrence of the rear of my vehicle a well. The impact of the collision caused my vehicle to inch forward quite a bit and as a result, I collided well. It was a chain collision involving 4 vehicles. well. The impact of the collision caused my vehicle to his collision involving 4 vehicles are sult, I onto the rear of the vehicle in front as well. It was a chain collision involving 4 vehicles. I had 2 onto the rear of the vehicle in front as well. It was a chair conveyed to the hospital. One of them was passengers in my vehicle at that point of time and both were conveyed to the nospital. One of them were given an MC of 5 days as well. Traffic Police attended to the accident and I called for the ambulance. given an MC of 5 days as well. Traffic Police attended to the affect of the ambulance.

Subsequently, all 4 drivers exchanged contact numbers thereafter. I later learnt that the chain collision

First car, SLE4045B (hp: 83212607) Second car, SMA2466S (hp: 90218446) Last car, SJS7918M (hp:91695967)

I wish to state that my vehicle does not have an in-car camera.



Police Report



Police Station Of Origin: Eunos NPP 629 Bedok Reservoir Road #01-1620 SINGAPORE 470629 Tel No: 1800-4439999



T/20180928/2077

4 of 4

Report No. T/20180928/2077

CONTINUATION OF REPORT

Sk	et	ch	PI	an

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:
G /
Sgt 2 ANDERITTE LIM JIN CUN
Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /
Staff Sgt NORAMEERA BINTE MOHAMED
HUSSEIN GREET

Contact No.: 65476236
Authentication Stamp

Date/Time: 28/09/2018 13:35

Classification Of Case:













