

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	16/11/2018 14:50
Date Of Accident	16/11/2018 09:30
Exact Location Of Accident	BEDOK NORTH RD TOWARDS BARTLEY RD EAST FLYOVER
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBH8764K
Insured/Policyholder	
Name Of Registered Owner	EAST WEST COURIER SERVICES PTE. LTD.
Co Reg No	201130040M
Email Address	AZMILSHAH@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-87807174
Alternative Phone No	OFFICE-87807174

Vehicle Particulars

Manufacturer	NISSAN
Model	NV350
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5104197707
Cover Note Number	

Driver

Name of Driver	NUR AZMIL SHAH PUTRA BIN NORAZMAL
NRIC No	S8421710G
Date Of Birth	22/07/1984
Occupation	OUTDOOR
Date Of Driving Pass	11/07/2013
Driving Experience	5 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87807174
Fax Number	
Contact Number	OTHERS-87807174
Email Address	AZMILSHAH@HOTMAIL.COM

Address	BLK 333C ANCHORVALE LINK #14-314
Postcode	543333
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	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?	YES
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	QUEENSTOWN N.P.C
Police Station Address	ROAD: 3 QUEENSWAY #01-03 , POSTCODE: 149073 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4719999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20181116/2046

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	EM5599D
Vehicle Make/Model/Colour	
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)

DETAILS OF INJURED PERSON 1

Name	NUR AZMIL SHAH PUTRA BIN NORAZMAL
Approximate Age	
Injuries Sustain	SLIGHT INJURY
Injured person in which vehicle?	GBH8764K
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Accident Sketch Plan

SKETCH PLAN

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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.

East West Courier Services Pte Ltd
116 Lavender Street
#03-01 Pek Chuan Building
Singapore 338730
Tel: 6292-4212 Fax: 6292-4472

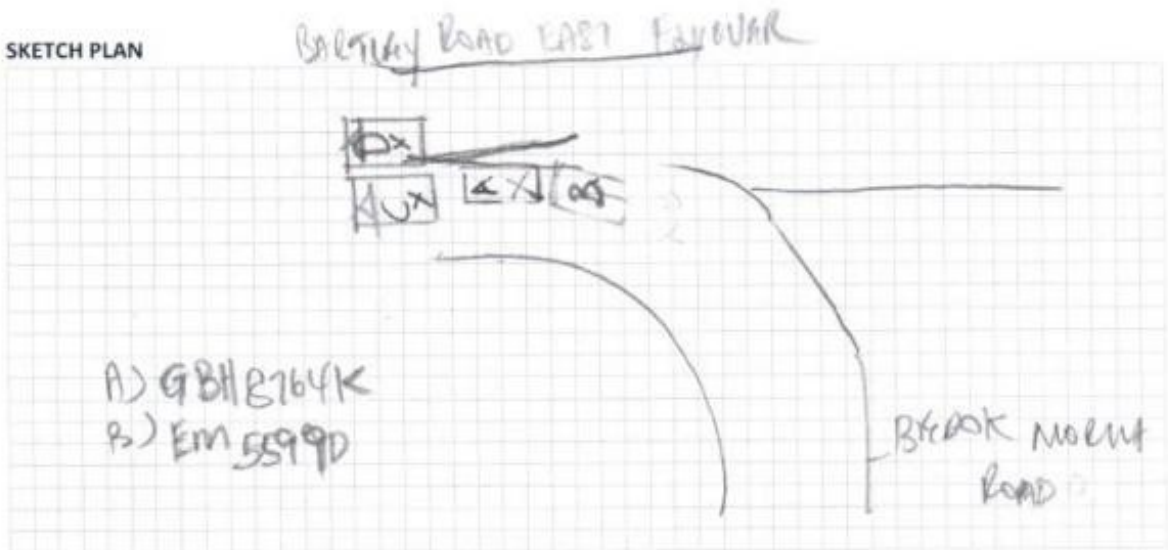
Policyholder's Signature
Date & Time:

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

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

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Handwritten text across the grid area:

PS Report to D-Live Report
7/2018/11/16/2016

DECLARATION

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

East West Courier Services Pte Ltd
118 Lavender Street
#03-01 Pek Chuan Building
Singapore 338730
Tel: 6292-4212 Fax: 6292-4472

Date & Time:

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

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

GERME: AccidentsForm_V01

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20181116/2046

1 of 3

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

Report No. T/20181116/2046

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/11/2018 13:14	Vide Report No.:	Station Diary No.: 34
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Informant's Particulars			
Name of Informant: NUR AZMIL SHAH PUTRA BIN NORAZMAL		Address: APT BLK 333C ANCHORVALE LINK #14-314 SINGAPORE 543333	
ID Type / ID No.: NRIC NO / S8421710G		Contact No.:	Mobile: 87807174
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 34	Date of Birth: 22/07/1984	Type of Informant: Driver
Race: Javanese		Language: English	Institution / School Name:
Occupation: DELIVERY DRIVER		Driving Licence Information: Class: 3	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 16/11/2018 09:30	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 BEDOK NORTH ROAD BARTLEY ROAD EAST Bedok North Road towards Bartley Road east flyover				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Moving Vehicle Against - Parked Vehicle			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
EM5599D	Car				Slightly Damaged	0
GBH8764K	Van				Slightly Damaged	0

Details of Person Involved

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

POLICE REPORT



**SINGAPORE
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T/20181116/2046

2 of 3

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

Report No. T/20181116/2046

CONTINUATION OF REPORT

Driver			
Name	NUR AZMIL SHAH PUTRA BIN NORAZMAL	ID No.	S8421710G
Related Vehicle	GBH8764K (Van)	Contact No.	87807174
Hospital/Clinic	SHALOM CLINIC & SURGERY	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	16/11/2018	Date Discharge	16/11/2018
No. of Days granted Medical Leave	03	Degree of Injury	Slight

Brief Details.

On the 16/11/2018 at about 0930hrs, I was driving along Bedok North Road towards Bartley Road east flyover in my company's van (GBH8764K). My vehicle was driving upslope. There were two vehicles right in front of me who were not giving way to one another. Upon approaching the merging lane, one vehicle suddenly did a brake right in front of me. I then reacted by also hitting the brakes. My vehicle was stationary for about a few seconds when suddenly I felt a impact that came from the back. I came off from my vehicle and found that a car(EM5599D)'s front left had collided into the right rear of my vehicle. I exchanged particulars with the driver. There were damages to the rear of my van. When I was on the way back to my company, I felt aching on my neck and back. I went to Shalom Clinic and Surgery and received 3 days MC for whip lash injury from the accident.

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20181116/2046

3 of 3

Police Station Of Origin:
Queenstown N.P.C
3 Queensway #01-03 SINGAPORE 149073
Tel No: 1800-4719999

Report No. T/20181116/2046

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:

D /

Sgt 3 ROGER GOH XIN YAN

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

Sr Staff Sgt ONG YONG HOCK

Contact No.: 65476436

Authentication Stamp

NP168

SIGNATURE

Signature Of Informant:

Date/Time:

16/11/2018 13:14

Classification Of Case:

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所**Shalom Clinic + Surgery****Shalom Clinic + Surgery**Alexandra Village
Blk 123 Bukit Merah Lane 1
#01-104 Singapore 150123
Tel: 6278 0270 Fax: 6278 4215Alexandra Village
Blk 123, #01-104
Bukit Merah Lane 1
Singapore 150123
Tel: 6278 0270
Fax: 6278 4215**MEDICAL CERTIFICATE**

Number: 0000070525

Date: 16-Nov-2018

This is to certify that the following patient:

Name: NUR AZMIL SHAH PUTRA BIN NORAZ NRIC: S8421716G

is UNFIT FOR DUTY for 3 days

from 16/11/2018 to 18/11/2018 inclusive.

Whip lash injury

DR. LAWRENCE SOHMA, MBBS, MSc(OM), FAMS
MCR: M02610G

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



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