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 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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	20/11/2018 10:44
Date Of Accident	16/11/2018 18:25
Exact Location Of Accident	LOR CHUAN TWDS AMK AVE 1 NEAR A TRAFFIC LIGHT
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJU2561E
Insured/Policyholder	
Name Of Registered Owner	FORTE AUTO LEASING PTE LTD
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-91449265
Vehicle Particulars	
Manufacturer	MITSUBISHI
Model	LANCER
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 HIRE
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-MJ001236-R00
Cover Note Number	
Driver	
Name of Driver	ADI NASUTION BIN RIDUAN

NRIC No S8335382A

Date Of Birth 02/11/1983

Occupation OUTDOOR

Date Of Driving Pass 29/11/2011

Driving Experience 6 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-87555523

Fax Number
Contact Number

EMail Address ADDYNASUTION2000@GMAIL.COM

BLK 137 YISHUN RING RD Address

#04-150

Postcode 760137

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - HIRER

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

Was any body injured in the Accident? YES

Was any injured conveyed to hospital by

Number of Passengers (Including Driver)

ambulance?

NO

NO

2

YES Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Passenger 1

NAME: : NORLIZA BINTE ZABAH

GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police? YES

If Yes.Please state which Police Station

YISHUN SOUTH NEIGHBOURHOOD POLICE CENTRE Police Station Name

NO

ROAD: 32 YISHUN ST 81, POSTCODE: 768456, COUNTRY: SINGAPORE Police Station Address

TEL NO: 1800-8522999 - FAX NO: 68522239 Police Station Contact

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLS REFER TO THE POLICE REPORT:T/20181118/2092

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? NO NO

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Make/Model/Colour

SLK2684M

Details Of Properties

Vehicle Category

PRIVATE CAR

MUHAMMAD JUFRI BIN MUSA Name of Driver

NRIC/Passport Number S7712415B **Contact Number** 87497684

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SLU755C

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver LIM WEI KIAT, KENNY

NRIC/Passport Number S8243674Z Contact Number 96626963

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SHA7352M

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category TAXI

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 ADI NASUTION BIN RIDUAN

Approximate Age

Injuries Sustain SLIGHT
Injured person in which vehicle? SJU2561E
Were seat belts worn? YES

Was this injured conveyed to hospital by

ambulance?

NO

Address Postcode

DETAILS OF INJURED PERSON 2

Name NORLIZA BINTE ZABAH

Approximate Age

Injuries Sustain SLIGHT
Injured person in which vehicle? SJU2561E
Were seat belts worn? YES

Was this injured conveyed to hospital by

ambulance?

NO

Address

Postcode

Accident Sketch Plan

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.
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- 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.
- 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.
- 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:
 - 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

for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time:

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

Name: NRIC/FIN No.:

un 20/11/18

Reporting Centre Personnel's Signature

Accident Sketch Plan

	LOR CHUAN TO	
The second	I REHEAD OF HED	TRAFFIC KI
DAR	4	
	1- SJUD5-61E	
	B-56K2684M	
	C- SCU 755C	
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT	0-SHA 7352M	
We decire the foregoing particulars are true in every r	espect. Sym	20/11/18

Individual Statement





Police Station Of Origin; Yishun South N.P.C 32 Yishun Street 81 SINGAPORE 768456 Tel No: 1800-8522999 3 of 4 Report No. T/20181118/2092

CONTINUATION OF REPORT

Driver		Manual Isla	AND RESIDENCE			
Name	LIM WEI KIAT, KENNY		ID No		S8243674Z	
Related Vehicle	SLU755C (Car)		Conta	ct No.	96626963	
Hospital/Clinic	NIL			Class Drivin Licen Expir	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL Date Disc		harge	NIL		
No. of Days granted Medical Leave NIL		Degree of	THE RESERVE AND ADDRESS OF THE PERSON NAMED IN	NIL		

Brief Details.

On 16/11/2018 at about 6.25pm, I was driving my vehicle (SJU2561E, Mitsubishi Lancer, Red) along Boundary Road towards Ang Mo Kio Avenue 1. As we were nearing the traffic light, the light turned red, and I slowed down my car to brake. However, the car behind me (SLK2684M, Hyundai Vezel, white) was not able to stop in time, and the front of that car collided into the rear of my vehicle. This caused my car to move forward and slightly hit the car in front (SLU755C, Hyundai Electra, grey). There was also a fourh car behind, a blue Comfort Delgro taxi (SHA7352M, Hyundai Sonata) which collided into car number SLK2684M from behind.

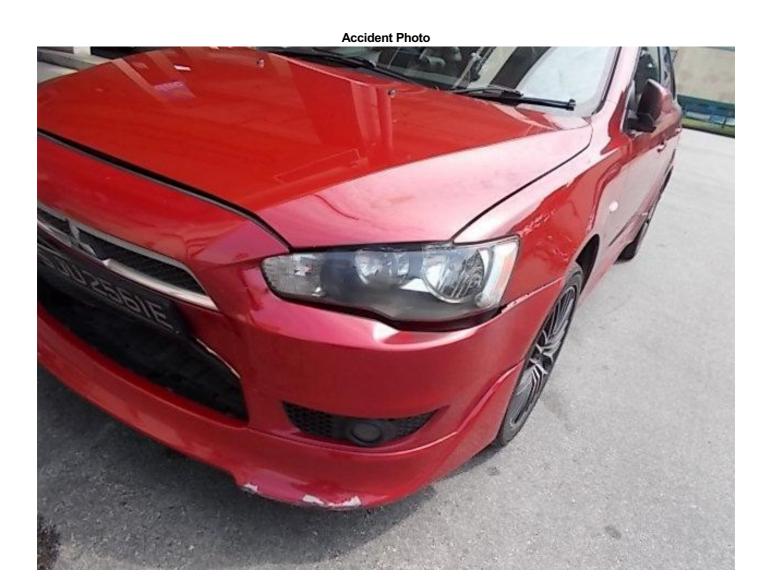
In my car was myself (driver) and my wife, namely, Norliza Binte Zabah, who was my passenger. My wife had a contusion of her little finger, and I had a shock to the back of my head from the impact. Due to the impact, I was given 4 days MC from 17/11/2018 to 20/11/2018, and my wife was given MC from 17/11/2018 to 19/11/2018, both issued by Singapore General Hospital.

I have no In-car CCTV. The car that I was driving is a rented car.

No police or ambulance attended to the incident. There was also no damage to government property.



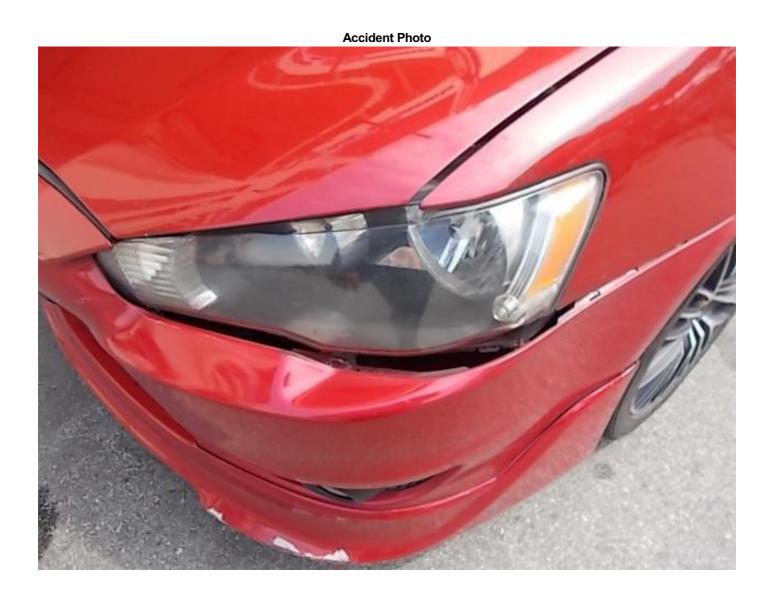


















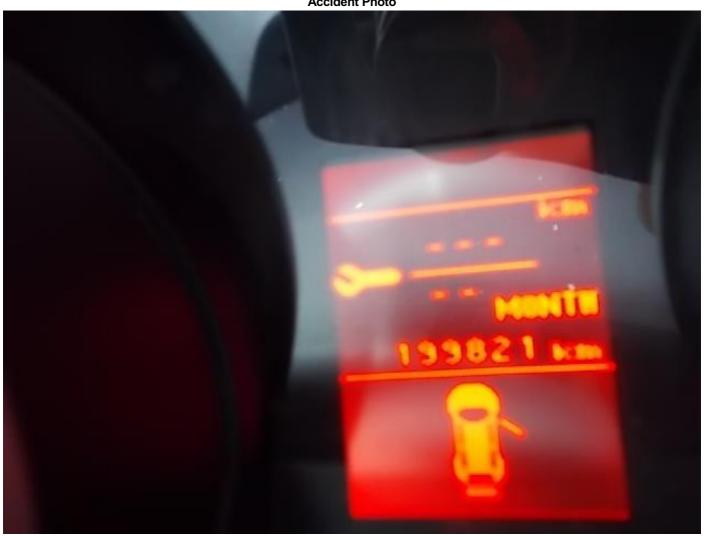


















Police Station Of Origin: Yishun South N.P.C 32 Yishun Street 81 SINGAPORE 768456 Tel No: 1800-8522999 1 of 4 Report No. T/20181118/2092

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/11/2018 22:40		Aade:	Vide Report No.:	Station Diary No. 107		
Informa	nt's Partic	ulars				
	f Informant: SUTION Bir		Address: APT BLK 137 YISHUN RING 760137	ROAD #04-150 SINGAPORE		
ID Type / ID No.: NRIC NO / S8335382A		82A	Contact No.: Home/Office:	Mobile: 87555523		
National SINGAR	ity: ORE CITIZ	EN .	Email:			
Sex: Male	Age: 35	Date of Birth: 02/11/1983	Type of Informant: Driver			
Race: Malay			Language: English	Institution / School Name:		
Occupation: GRAB DRIVER			Driving Licence Information: Class: 2B,2A,3 Date of Expiry:			

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 16/11/2018 18:25	Type of Location	
BOUNDARY ANG MO KIO near a traffic I	AVENUE 1				
Weather: Roa Clear Dry		Road Surface: Dry		Road Speed Limit 50 Km/h	
Traffic Flow: Tra		Traffic Control: Traffic Light - Wo		Traffic Volume: Heavy	
Type of Collision: Chain collision				Anyone conveyed by ambulance:	

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SHA7352M					Slightly Damaged	0
	Car				Seriously Damaged	1
SLK2684M	Car				Seriously Damaged	2
8LU755C	Car				Slightly Damaged	1





Police Station Of Origin: Yishun Scuth N.P.C 32 Yishun Street 81 SINGAPORE 768458 Tel No: 1800-8522999 2 of 4 Report No. T/20151118/2062

CONTINUATION OF REPORT

Details of Perso			- P. W. E.			
Any Pedestrian II						
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing; NA			
Driver						
Name	ADI NASUTION BIN RIDUAN	l .	ID No		S8335382A	
Related Vehicle	SJU2561E (Car)		Conta	ct No.	87555523	
Hospital/Clinic	SINGAPORE GENERAL HOSPITAL		Class of Driving Licence & Expiry Date		Class: 2B,2A,3 Date of Expiry: NIL	
Date Treatment	NIL	Date D	ischarge	NIL		
	ted Medical Leave 04		of Injury			
Passenger				North Service	T. D.A. et al. (1997)	
Name	NORLIZA BINTE ZABAH		ID No	2	S8704537D	
Related Vehicle	SJU2561E (Car)		Conts	ct No.	87002114	
Hospital/Clinic	SINGAPORE GENERAL HOSPITAL		Class Orivin Licens Expin	9 59 &	Class: NIL Date of Expiry: NIL	
Date Treatment	NIL	Date D	Discharge NIL			
	ted Medical Leave 03	Degree	ree of Injury Slight			
Oriver		12 87		U.V.	A STATE OF THE PARTY OF THE PAR	
Name	MUHAMMAD JUFRI BIN MUS	3A,	ID No		877124158	
Related Vehicle	SLK2684M (Car)		Contact No.		87497684	
Hospital/Clinic	NIL	Class Drivin Licens Expiry	g ce &	Class: NIL Date of Expiry: NIL		
Date Treatment	NIL	Date D	scharge	NIL		
	ed Medical Leave NIL		of Injury			





275000

Police Station Of Origin: Yishun South N.P.C 32 Yishun Street 81 SINGAPORE 768458. Tel No: 1800-8522999 3 of 4 Report No. T/20181118/2092

CONTINUATION OF REPORT

Driver		THE PERSON		CHARLES AND ADDRESS OF THE PARTY OF THE PART
Name	LIM WEI KIAT, KENNY		ID No.	S8243674Z
Related Vehicle	SLU755C (Car)		Contact No.	96626963
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	N/L Date Dis		harge NIL	
No. of Days gran	ted Medical Leave NIL	Degree of		

Brief Details.

On 16/11/2018 at about 6.25pm, I was driving my vehicle (SJU2561E, Mitsubishi Lancer, Red) along Boundary Road towards Ang Mo Kio Avenue 1. As we were nearing the traffic light, the light turned red, and I slowed down my car to brake. However, the car behind me (SLK2684M, Hyundai Vezel, white) was not able to stop in time, and the front of that car collided into the rear of my vehicle. This caused my car to move forward and slightly hit the car in front (SLU755C, Hyundai Electra, grey). There was also a fourh car behind, a blue Comfort Delgro taxi (SHA7352M, Hyundai Sonata) which collided into car number SLK2684M from behind.

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I have no In-car CCTV. The car that I was driving is a rented car.

No police or ambulance attended to the incident. There was also no damage to government property.





Police Station Of Origin: Yishun South N.P.C 32 Yishun Street 81 SINGAPORE 768456 Tel No: 1800-8522999

.4 of 4 Report No. T/20181118/2092

CONTINUATION OF REPORT

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1.25(10)	come.	19. I	MATERIAL PROPERTY.	100

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: F / Insp LOW HONGKAI, GERARD	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 18/11/2018 22:40
Officer In Charge Of Case: TP / AEIT / Sr Staff Sgt ONG YONG HOCK Contact No.: 85478436	Classification Of Case:
Authentication Stamp	

Identification Card







300

