

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 18:46
Date Of Accident	23/11/2018 16:10
Exact Location Of Accident	FILTER LANE (EXIT 9A) KPE TOWARDS TAMPINES ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJY7167D
Insured/Policyholder	
Name Of Registered Owner	GOLDBELL CAR RENTAL PTE LTD
Co Reg No	200710651D
Email Address	MOHAMEDFIRDAUS.SG@GMAIL.COM
Mobile Phone No	(LOCAL) +65-90267252
Alternative Phone No	OFFICE-90267252

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 (A)
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?	YES
If No, Please state action to be taken	
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SD18V00034/VPZ/R03
Cover Note Number	

Driver

Name of Driver	MOHAMED FIRDAUS
NRIC No	S8490226H
Date Of Birth	10/11/1984
Occupation	INDOOR
Date Of Driving Pass	24/02/2009
Driving Experience	9 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90267252
Fax Number	
Contact Number	OTHERS-90267252
Email Address	MOHAMEDFIRDAUS.SG@GMAIL.COM

Address	BLK 365A UPPER SERANGOON ROAD #04-1042
Postcode	531365
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	COLLISION - HEAD TO REAR
Weather Conditions	RAINING
Road Surface	WET

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?	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

PLEASE REFER TO SKETCH PLAN

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	SLR3560T
Vehicle Make/Model/Colour	MITSUBISHI ATTRAGE (BLACK)
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	NUZZRATH HAZZEENA
NRIC/Passport Number	S9606178A
Contact Number	90014031/90014051
Address	BLK 407 HOUGANG AVE 10 #02-1118
Postcode	530407
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

Accident Sketch Plan

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5. Any false reporting may be referred to the Traffic Police Department for investigation.
6. This report will be forwarded by the insurers to 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.

6. 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' law yers/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.

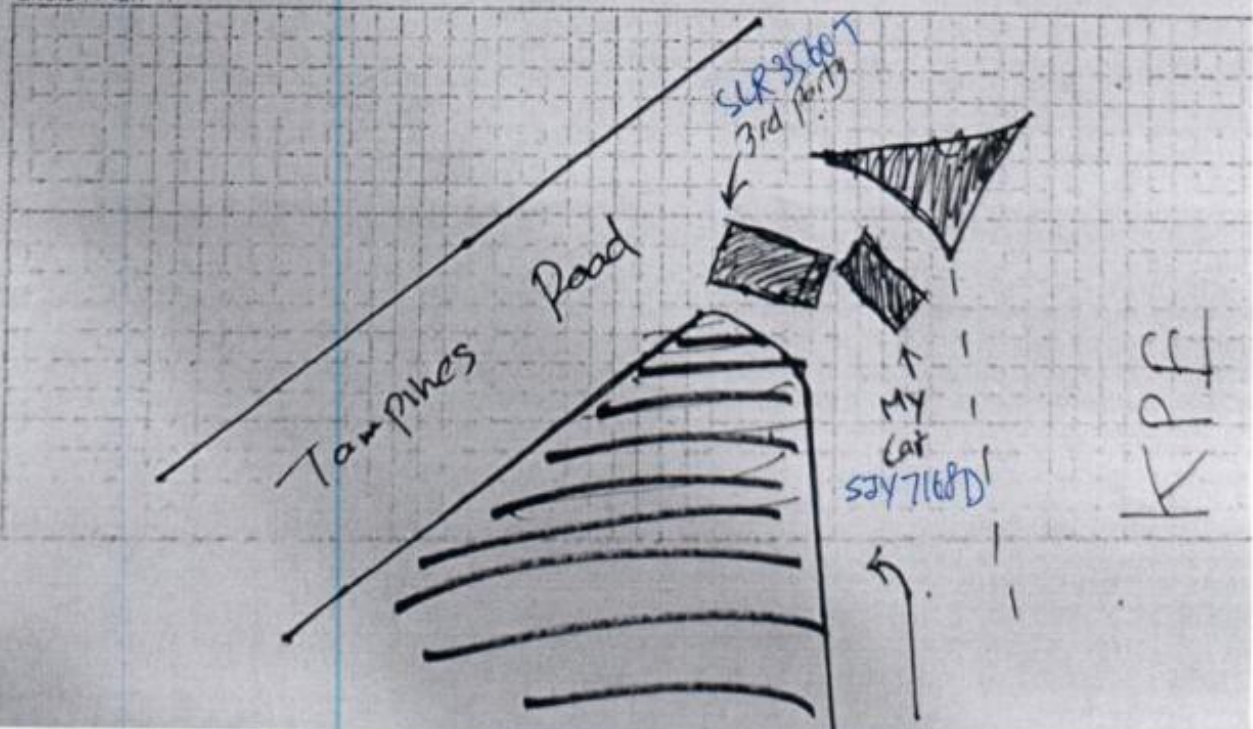
(collectively the "Purposes")

(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.

Policyholder's Signature:  Date: 24/11/18 / 12:00hrs
 Driver's Signature (if driver is not the policyholder) / Date & Time: _____
 Witnessed by Reporting Centre Personnel: 27/11/2018

Sketch Plan



Accident Sketch Plan

Describe Circumstance of the Accident *

I, Mohamed Firdaus (NRIC S8440226H) drove the vehicle S3471650 on the 22nd Nov 2018 along KPE. At 16:28 hrs, I exited KPE on exit 9A towards Tampines Road. As I entered the filter lane to join the main road (Tampines Road), there was a another vehicle SLR3560T in front. That vehicle stopped for oncoming vehicles along Tampines Road. I stopped too. When that vehicle started to move, I accelerated to move off while checking on my right for oncoming traffic on the main road.

Then I heard the sound of an impact on my front of the vehicle. My vehicle's front left-side of the front bumper hit the front of the vehicle's (SLR3560T) left-side of front bumper. ~~we stopped~~ I suspected that the vehicle in front had stopped again and thus I hit that vehicle. We stopped our car and took photos and exchanged particulars.

Declaration

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



Police Officer's Signature /

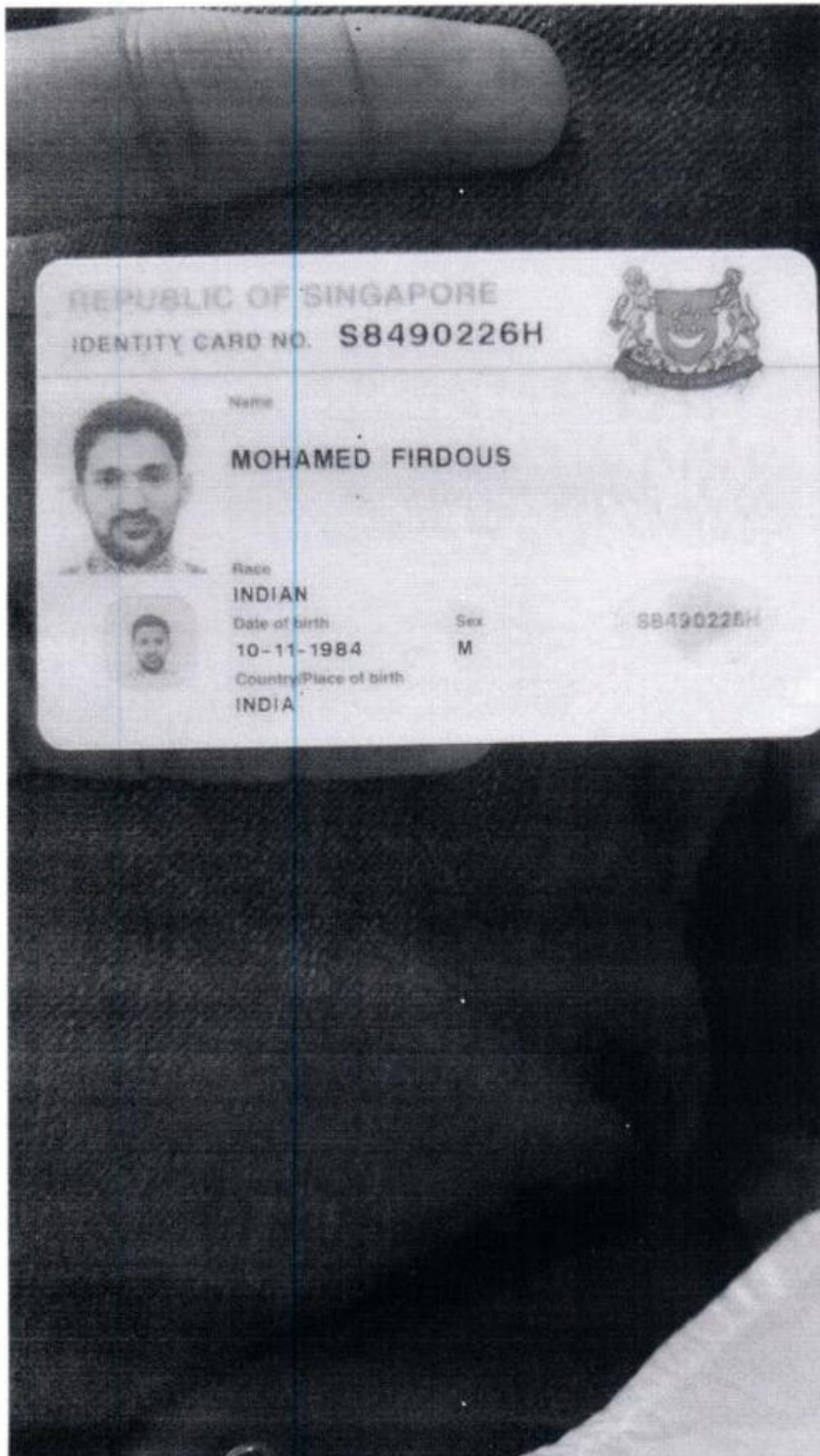
* *11/11/2018* / *12:00 hrs*
Driver's Signature (If Driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

ID

11/27/2018

IC_Front.jpg



ID

11/27/2018

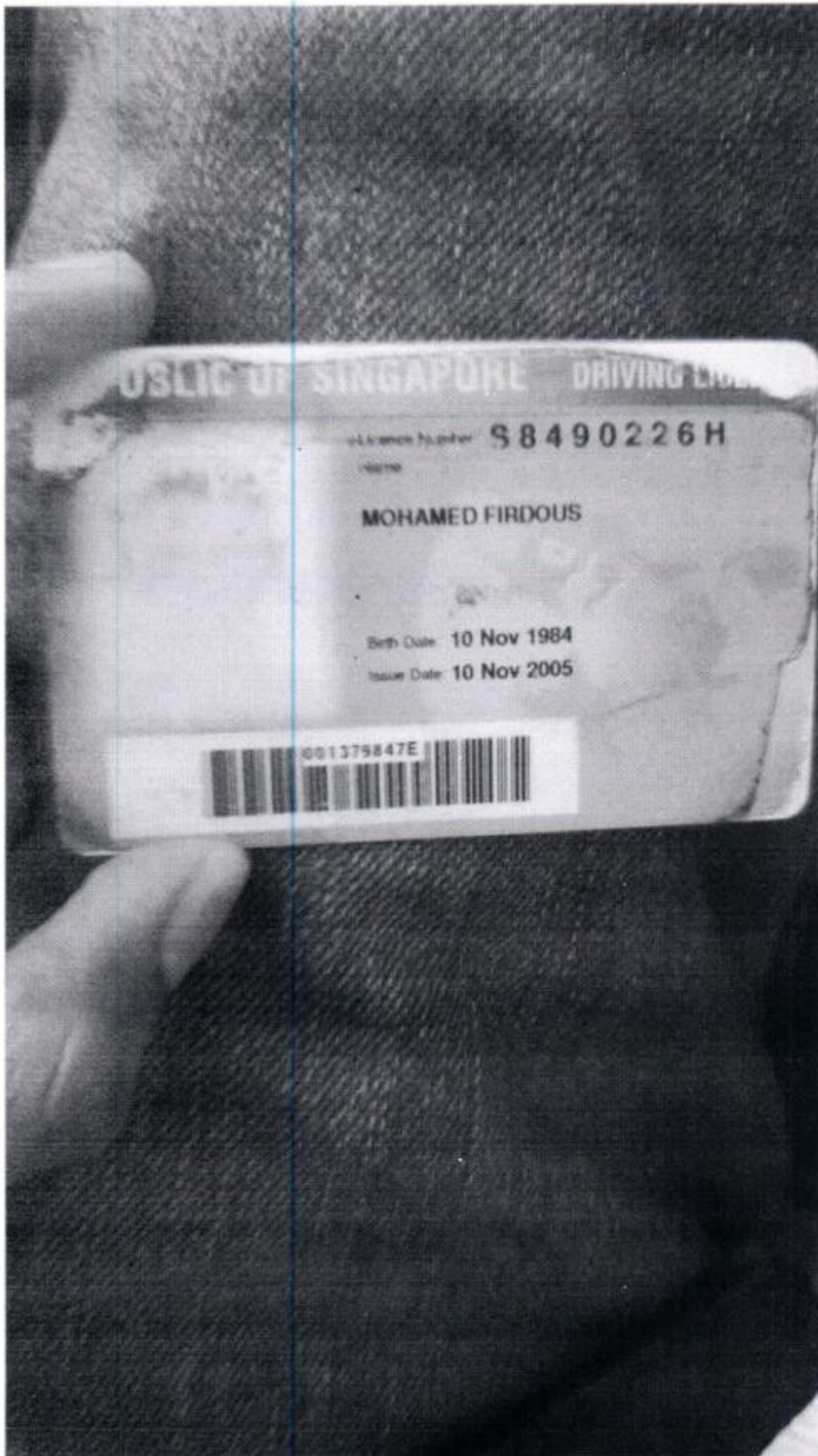
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ID

11/27/2018

DL_Front.jpg

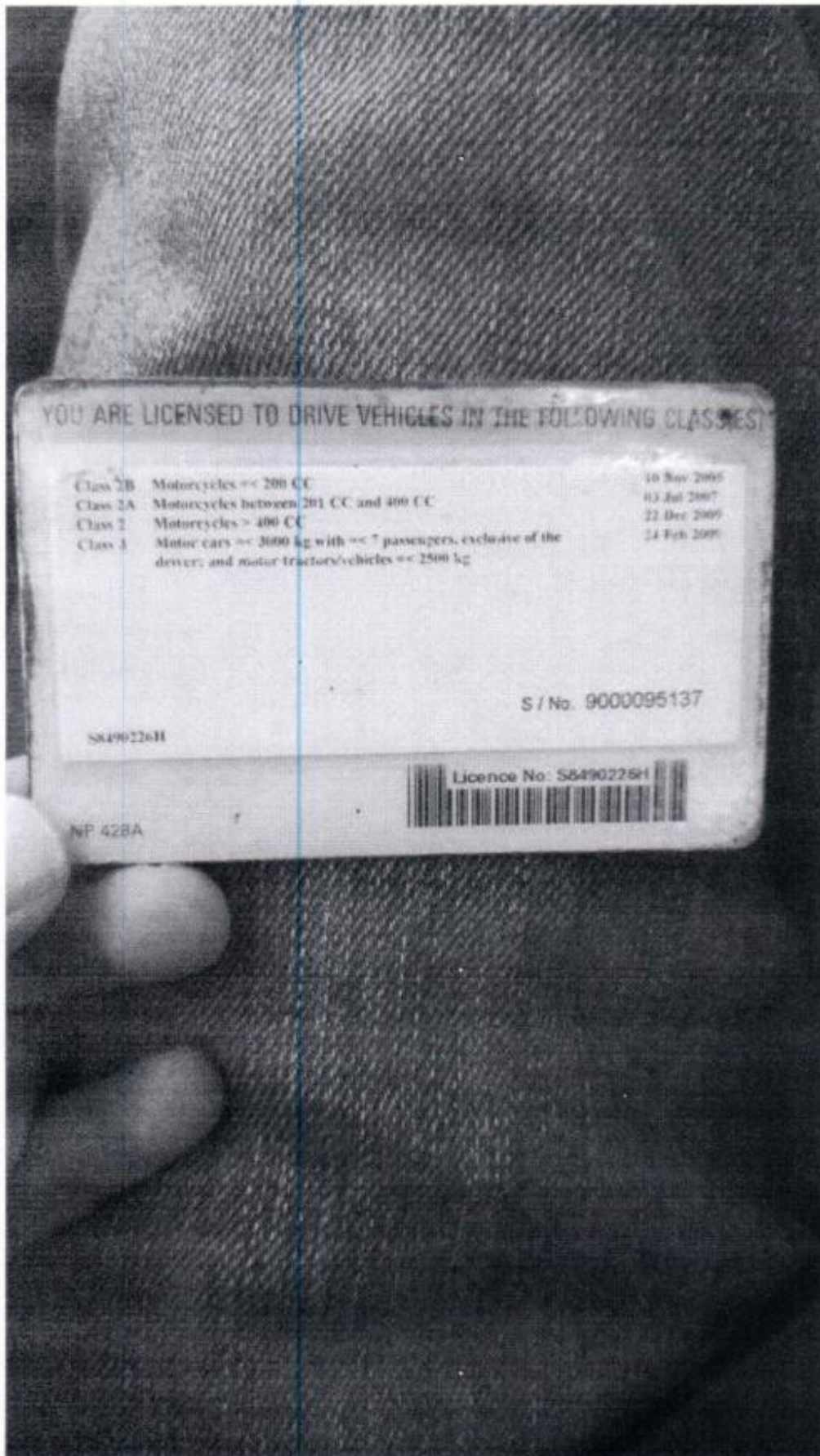


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1/1

11/27/2018

DL_Back.jpg



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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