

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	28/11/2018 13:55
Date Of Accident	28/11/2018 08:20
Exact Location Of Accident	ECP TWDS CITY NEAR MARINE PARADE EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKX2702M
Insured/Policyholder	
Name Of Registered Owner	SAIFUN NAEM BIN SAIFUL ALAM
NRIC No	S8505107E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91080605
Alternative Phone No	OFFICE-91080605

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL 1.5X 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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	M494329
Cover Note Number	-

Driver

Name of Driver	KHAIRIYAH BINTE KASSIM
NRIC No	S8615724A
Date Of Birth	30/05/1986
Occupation	INDOOR
Date Of Driving Pass	23/02/2011
Driving Experience	7 YEARS AND 9 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-91706272
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 761 BEDOK RESERVOIR VIEW #03-315
Postcode	470761
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
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 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	BEDOK SOUTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 20 CHAI CHEE DRIVE , POSTCODE: 469045 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2448999 - FAX NO: 62446558
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	FILE TOO LARGE FAIL TO UPLOAD
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLD9698P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LEE SONG JIAN JIMMY
NRIC/Passport Number	S8507275G
Contact Number	97363494
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SHC8650K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	LOO KEK HOCK
NRIC/Passport Number	S1330711C
Contact Number	97128650
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	KHAIRIYAH BINTE KASSIM
Approximate Age	
Injuries Sustain	BACK & NECK
Injured person in which vehicle?	SKX2702M
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Accident Sketch Plan

SKETCH PLAN

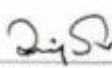
IMPORTANT NOTICE


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**.
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. 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:


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

A = SKX 2702 M
B = SLD 9698 P
C = SHC 8650 K

ESP twds City near Marine Parade Exit

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please Refer to Police Report

DECLARATION

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

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.:

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20181128/2056

Police Station Of Origin:
Bedok South N.P.C
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

1 of 4

Report No. T/20181128/2056

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/11/2018 13:16	Vide Report No.:	Station Diary No.: 20
--	------------------	--------------------------

Informant's Particulars			
Name of Informant: KHAIRIYAH BINTE KASSIM		Address: APT BLK 761 BEDOK RESERVOIR VIEW #03-315 SINGAPORE 470761	
ID Type / ID No.: NRIC NO / S8615724A		Contact No.: Home/Office: Mobile: 91706272	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Female	Age: 32	Date of Birth: 30/05/1986	Type of Informant: Driver
Race: Malay		Language: English	Institution / School Name:
Occupation: CIVIL SERVANT		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: 28/11/2018 08:20	Type of Location: Straight Road
Location: Along Road 1 EAST COAST EXPRESSWAY				
Along East Coast Expressway towards CITY near to Marine Parade Exit / Flyover. On the most right lane.				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 90 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHC8650K	TAXI				Slightly Damaged	3
SKX2702M	Car				Slightly Damaged	0
SLD9698P	Car				Slightly Damaged	0

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20181128/2056

Police Station Of Origin:
Bedok South N.P.C
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

2 of 4

Report No. T/20181128/2056

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LOO KEK HOCK	ID No.	S1330711C
Related Vehicle	SHC8650K (TAXI)	Contact No.	97128650
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	KHAIRIYAH BINTE KASSIM	ID No.	S8615724A
Related Vehicle	SKX2702M (Car)	Contact No.	91706272
Hospital/Clinic	PARKWAY EAST HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	28/11/2018	Date Discharge	28/11/2018
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Driver			
Name	LEE SONG JIAN JIMMY	ID No.	S8507275G
Related Vehicle	SLD9698P (Car)	Contact No.	97363494
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 28/11/2018 at about 0820hrs, I was driving my vehicle bearing plate SKX2702M along ECP towards CITY on the most right lane. I was driving at about 62km/h. The traffic at that point of time was moderate.

As the traffic was going at a stop, I applied the brakes and the car had went to a stop. I then managed to stop in time and for few seconds later, I heard and felt a slight knocked at the rear of my vehicle.

I went out to check and discovered that there were two other vehicle involved in the accident. I then got to know that the taxi bearing plate SHC8650K was not able to brake in time and thus had hit onto a vehicle

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20181128/2056

Police Station Of Origin:
Bedok South N.P.C
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

3 of 4

Report No. T/20181128/2056

CONTINUATION OF REPORT

bearing plate SLD9698P after which the said vehicle knock onto the rear of my vehicle.

I wished to inform that during the point of time, there were no injuries at the scene. My vehicle suffered a minor damage at the rear.

I then managed to drove off and went to some part of the eastern side to settle my errands. However, I felt a slight numbness at the right side and back of the neck and body. I then head home.

Later at about 0930hrs, I was then felt that the numbness to have been feeling in great pain. I then went to see a GP after which they refer me to the A&E and the doctor had given me 3 days of MC. I was also referred to see a specialist for my injuries by the A&E doctor..

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20181128/2056

Police Station Of Origin:
Bedok South N.P.C
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

4 of 4

Report No. T/20181128/2056

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:

G /

Sgt 2 MUHAMMAD SHAHREL BIN ALI

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

28/11/2018 13:16

Officer In Charge Of Case:

TP / AEIT /

Sr Staff Sgt ONG YONG HOCK

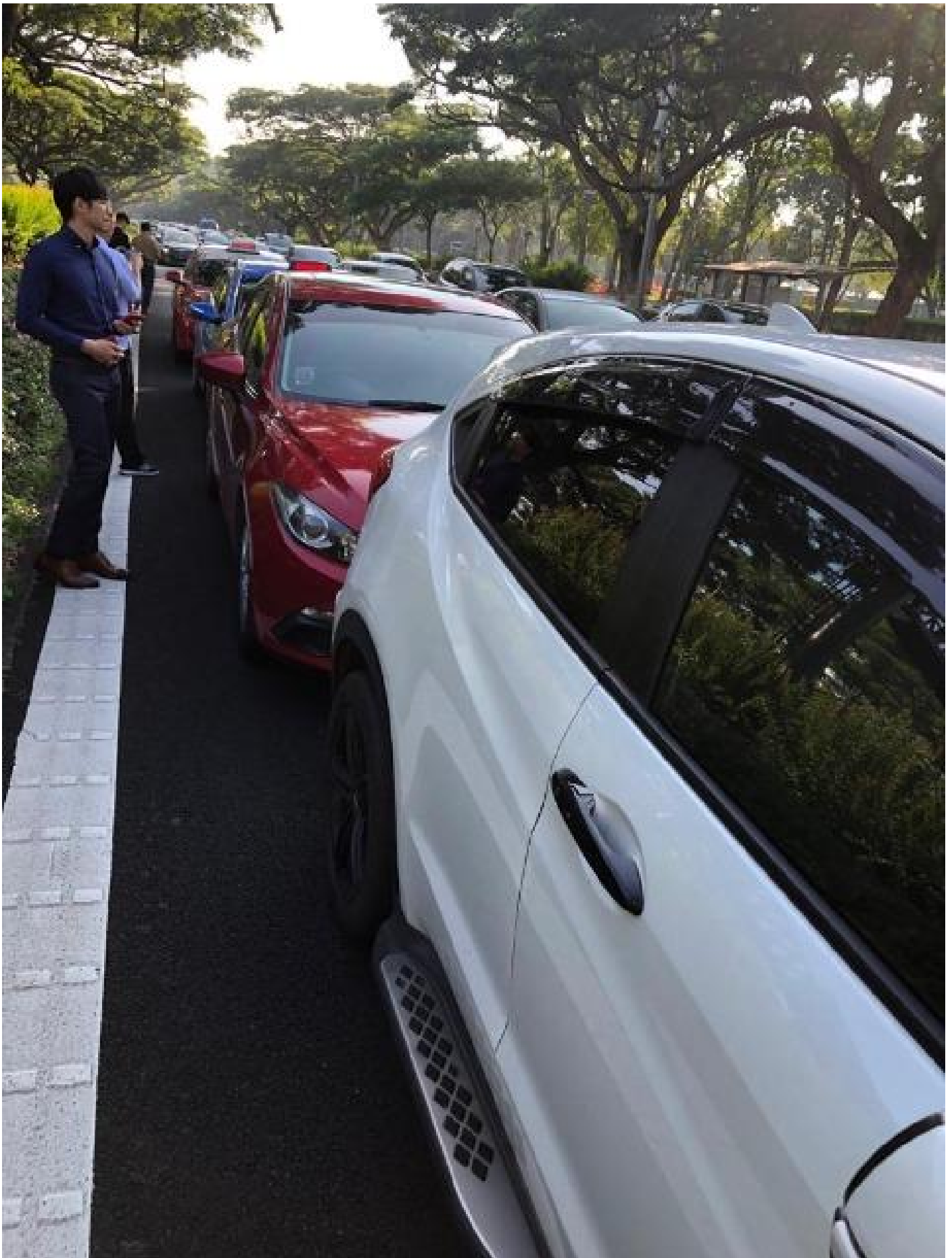
Contact No.: 65476436

Classification Of Case:

Authentication Stamp

NP168

Accident Photo



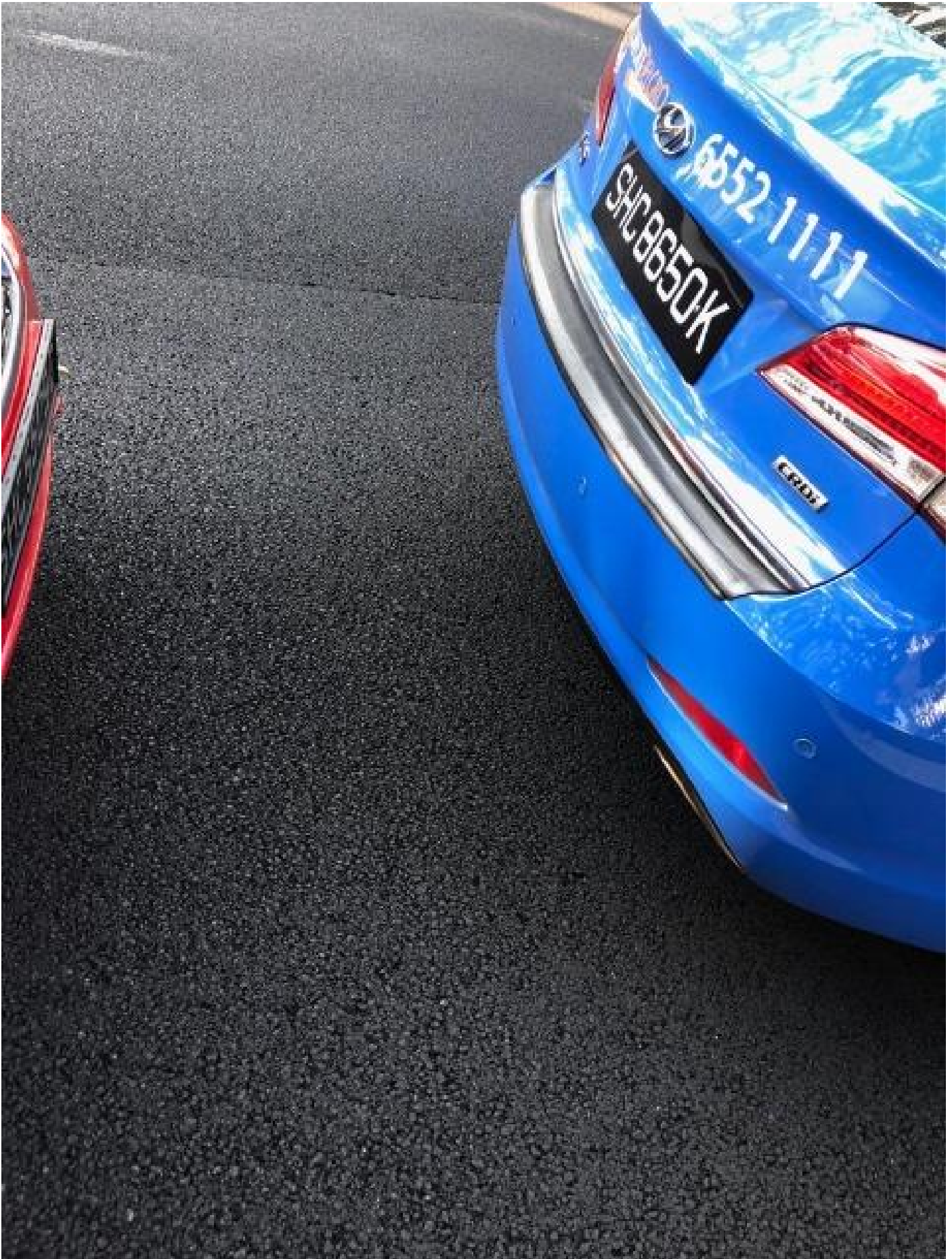
Accident Photo



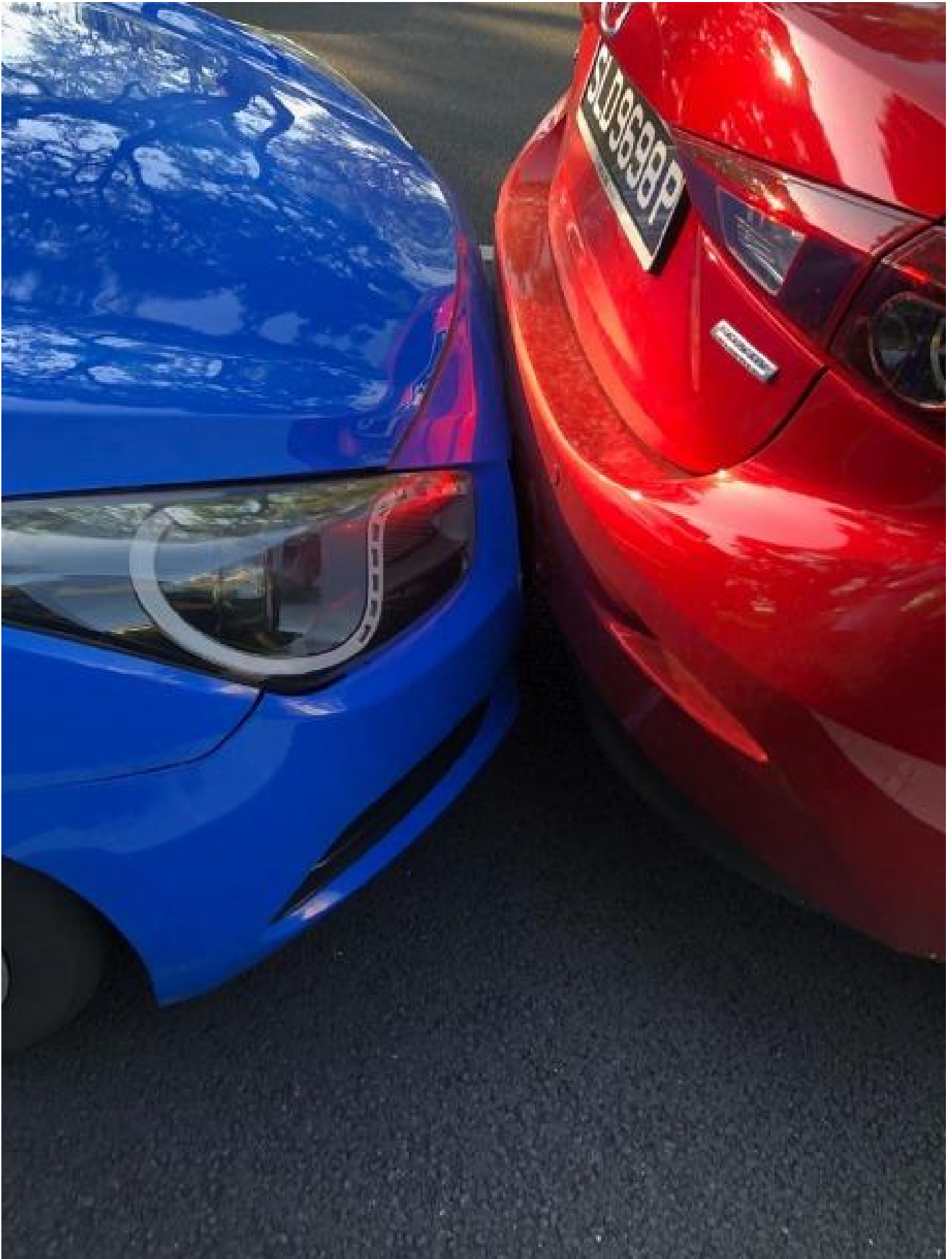
Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo

