SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Contact Number EMail Address

- 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	17/01/2019 13:28
Date Of Accident	16/01/2019 11:35
Exact Location Of Accident	SEMBAWANG RD AT THE EXIT OUT FR SEMBAWANG COUNTRY
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJH6845D
Insured/Policyholder	
Name Of Registered Owner	APPAMAHAN MOHAMED ISMAIL ABDUL RAZAK
NRIC No	S2619864Z
Email Address	RAZAKAM@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91895825
Alternative Phone No	OTHERS-91895825
Vehicle Particulars	
Manufacturer	HONDA
Model	STREAM 1.8L A
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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	FWD SINGAPORE PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	PNPV2018-00010065
Cover Note Number	N.A
Driver	
Name of Driver	APPAMAHAN MOHAMED ISMAIL ABDUL RAZAK
NRIC No	S2619864Z
Date Of Birth	23/05/1966
Occupation	INDOOR
Date Of Driving Pass	03/11/2000
Driving Experience	18 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91895825
Fax Number	

OTHERS-91895825

RAZAKAM@GMAIL.COM

Address

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OWNER

Vehicle Registration Number of Driver's Own

Vehicle

_

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident SIDE SWIPE
Weather Conditions CLEAR
Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO

NO

2

2

Was any other material or property damaged? YES

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME: : APPARAO

GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

POLICE STATION NAME [OTHER] YISHUN SOUTH NPC

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

Refer to Police Report Ref: T/20190116/2047 lodged at Yishun South NPC. On 16/01/2019 at about 11:38am, I parked my car (grey Honda Stream, registration no: SJH6845D) at a parking lot right outside Sembawang Country Club (Toronto Gate). I was then driving out my car from the parking lot onto the main road (Sembawang Road). I also turned on my car's signal, signalling my intention to drive off, however, a white Mitsubishi pick-up, suddenly overtake my car from my rear, when he is supposed to stop and allow me to drive off first. The driver of the pick-up blatantly ignored my car's signal, and after overtaking, he quickly swerved back into the lane. I wish to state that this is a two-way road. In addition, I realized that there is an oncoming car from the opposite side, and the driver wanted to avoid colliding with that oncoming car, thus he quickly swerved back into the lane. Due to the driver's actions, when he swerved back into the lane, the side of his pick-up collided into the side of the front bumper of my car. Thereafter, the driver of the pickup stopped his car in front of my car, somewhere near to the gate, and right in the middle of the road's continuous white line, which is not right. The driver got out of his pickup and I asked him for his particulars. He then provided me with his driving license and also his name card (with his contact no). The driver told me that he is in a rush and I told him to wait as I wanted to call for the police. The driver also told me that it is my fault. And that I did not signal to drive off, but instead had signalled with the hazard light. But I told him I clearly signalled correctly, and not with the hazard light. Soon after, the driver left the accident scene. I also managed to take a few photographs of the scene. My car sustained the following damages: 1) dents and cracks on the front bumper on the right side 2) scratches on the right headlight. There is no one injured during the accident. I have a passenger with me in my

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 Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

MITSUBISHI L200 DOUBLE CAB 2.4 AT

NIL

COMMERCIAL VEHICLE LOH ZHI XIANG RICKY

S8850808D

90174346

SKETCH PLAN

IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
 This Form must be completed by the Policyholder and/or the Authorised Driver.
 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 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 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.
- 8. Consent under the Personal Data Protection Act (PDPA)
- 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 applier describes with my claims and other policy of 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.

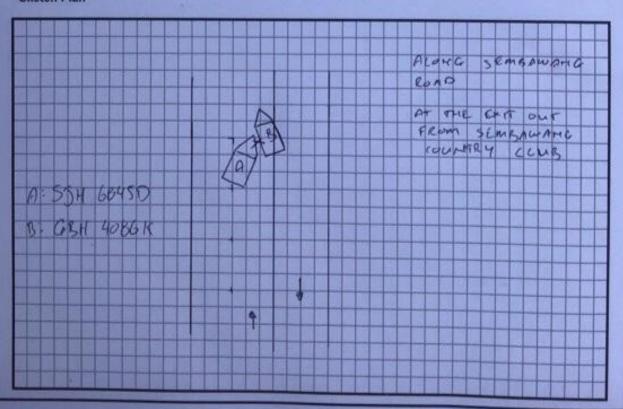
VERIFIED BY AJAX MARS REPORTING OFFICER

Muhammad Faizal Bin Pabila

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

Witnessed by Reporting Centre Personnel

Sketch Plan







1 of 4

Report No. T/20190116/2047

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

REPORT OF A TRAFFIC ACCIDENT			Vide Report No.:	Station Diary No.:	
Date/Time Report Made: 16/01/2019 13:17		ade.	Vide Neport No.	61	
Informan	t's Particu	lars		THE PARTY OF THE P	
Name of	Informant: HAN MOH	AMED ISMAIL	Address: APT BLK 245 HOUGANG STI 530245	REET 22 #14-147 SINGAPORE	
ID Type / ID No.: NRIC NO / S2619864Z		34Z	Contact No.: Home/Office:	Mobile: 91895825	
Nationali	ty: ORE CITIZ	EN	Email:		
Sex: Male	Age: 52	Date of Birth: 23/05/1966	Type of Informant: Driver		
Race: Indian			Language:	Institution / School Name:	
Occupation: GOLF COURSE SUPERINTENDENT		PERINTENDENT	Driving Licence Information: Class: 3	Date of Expiry:	

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 16/01/2019 11:35	Type of Location Straight Road	
Location: Along Road 1 SEMBAWAN At the exit our Weather:	G ROAD	ountry Club (Toronto G Road Surface:	sate)	oad Speed Limit:	
Clear Dry Traffic Flow: Tra		Traffic Control: Not Controlled		Traffic Volume: Light	
One Way Type of Collis Between Mov	ion: ring Vehicles - Side S	wipe - Same Direction	a	nyone conveyed by mbulance:	

	ehicle involv	E PERSONAL PARTY	Model	Color	Condition	No of Passenger
Vehicle No.	Type	Make	MIDITO	0000		^
GBH4086K	Pick-Up					0
Towns of the		LICATOA	STREAM	Grey	Slightly	1
SJH6845D	Car	HONDA	1.8L A	0.07	Damaged	

Details of V	ehicle Insurance		work Sales Con D	
	Insurance Company	Insurance No	Effective	Expiry Date
SJH6845D	FWD Singapore Pte, Ltd	PNPV2018- 00010065	03/08/2018	20/08/2019
		1 000 10005		



T/20190116/2047

Vishun South N.P.C 32 Yishun Street 81 SINGAPORE 768456 Tel No: 1800-8522999 2 of 4 Report No. T/20190116/2047

CONTINUATION OF REPORT

Details of Person	Involved	ARINA MINI	OR STREET	
Any Pedestrian In	volved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA		
Driver		The Rollings		THE PARTY OF THE P
Name	LOH ZHI XIANG RICKY		ID No.	S8850808D
Related Vehicle	GBH4086K (Pick-Up)		Contact No.	90174346
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Disc	harge NIL	
No. of Days gran	ted Medical Leave NIL	Degree of	Injury NIL	
Driver				
Name	APPAMAHAN MOHAMED ISMA RAZAK	AL ABDUL	ID No.	S2619864Z
Related Vehicle	SJH6845D (Car)		Contact No.	91895825
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment		Date Disc	harge NIL	
No. of Days gran	nted Medical Leave NIL	Degree of	f Injury NIL	4

Brief Details.

On 16/01/2019 at about 11:38 am, I parked my car (grey Honda Stream, registration no: SJH6845D) at a parking lot right outside Sembawang Country Club (Toronto Gate). I was then driving out my car from the parking lot onto the main road (Sembawang Road). I also turned on my car's signal, signaling my intention to drive off, however, a white Mitsubishi pick-up, suddenly overtake my car from the rear, when he is supposed to stop and allow me to drive off first. The driver of the pick-up blatantly ignored my car's signal, and after overtaking, he quickly swerved back into the lane. I wish to state that this is a two-way road. In addition, I realized that there is an oncoming car from the opposite side, and the driver wanted to avoid colliding with that oncoming car, thus he quickly swerved back into the lane.

Due to the driver's actions, when he swerved back into the lane, the side of his pick-up collided into the side of the front bumper of my car. Thereafter, the driver of the pickup stopped his car in front of my car, somewhere near to the gate, and right in the middle of the road's continuous white line, which is not right. The driver got out of his pickup and I asked him for his particulars. He then provided me with his driving license and also his name card (with his contact no). The driver told me that he is in a rush and I told him to wait as I wanted to call for the police. The driver also told me that it is my fault, and that I did not signal to drive off, but instead had signaled with the hazard light. But I told him I clearly signaled correctly, and not with the hazard light. Soon after, the driver left the accident scene. I also managed to take a few photographs of the scene.

My car sustained the following damages:- 1) dents and cracks on the front bumper on the right side, 2) scratches on the right headlight.

There is no one injured during the accident. I have a passenger with me in my car at the time, and he



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



3 of 4 Report No. T/20190116/2047

CONTINUATION OF REPORT

informed me that he is also not injured.





olice Station Of Origin; Yishun South N.P.C 32 Yishun Street 81 SINGAPORE 768456 Tel No: 1800-8522999 4 of 4 Report No. T/20190116/2047

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

L /
Sr Staff Sgt MOHAMAD FAIROZ BIN
MOHAMED MAKHROF

Signature Of Interpreter:
Not applicable

Date/Time:
16/01/2019 13:17

Officer In Charge Of Case:
TP / GIA /
Staff Sgt WONG SIEU LUI
Contact No: 65476151

Authentication Stamp
NP168

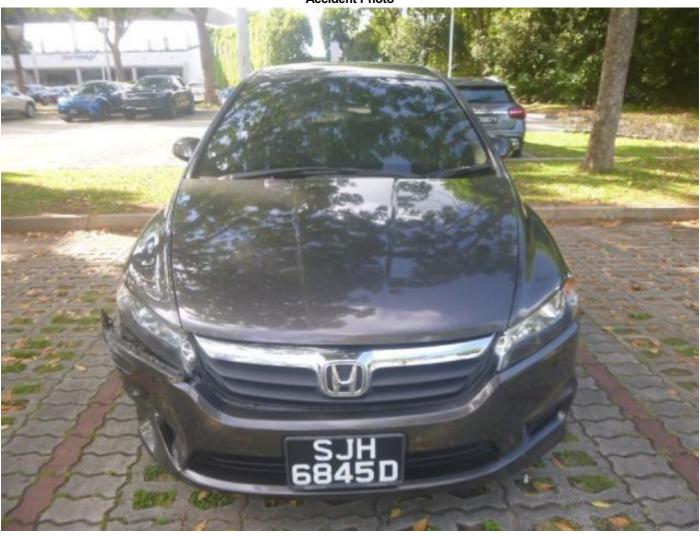
Signature Of Informant:

Classification Of Case:
Signature Of Informant:

Signature Of Informant:

Which is a signature of Informant:

Signatu

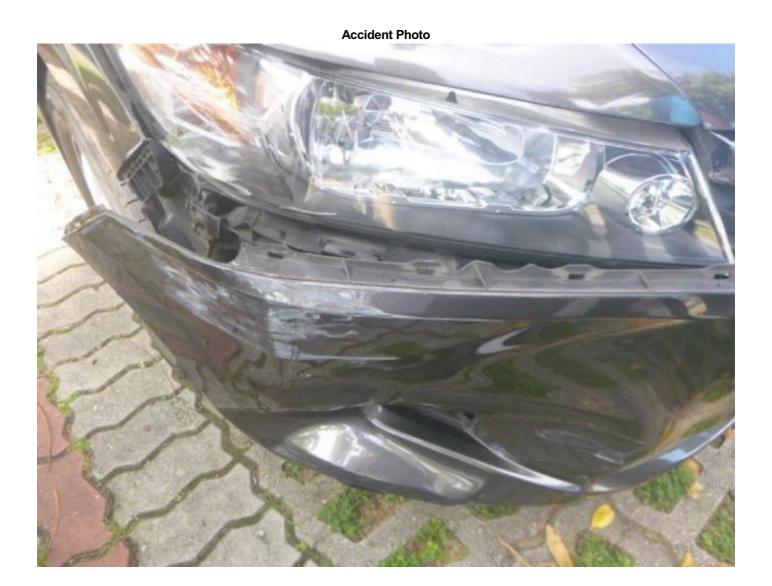


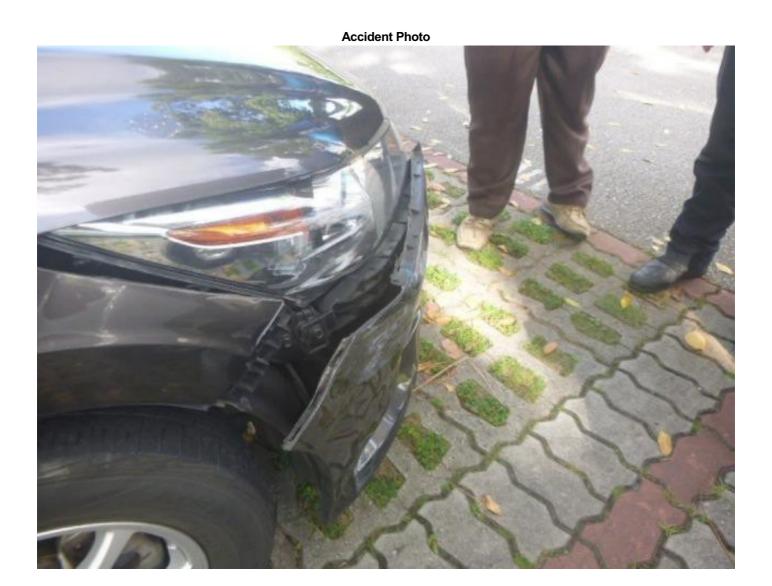








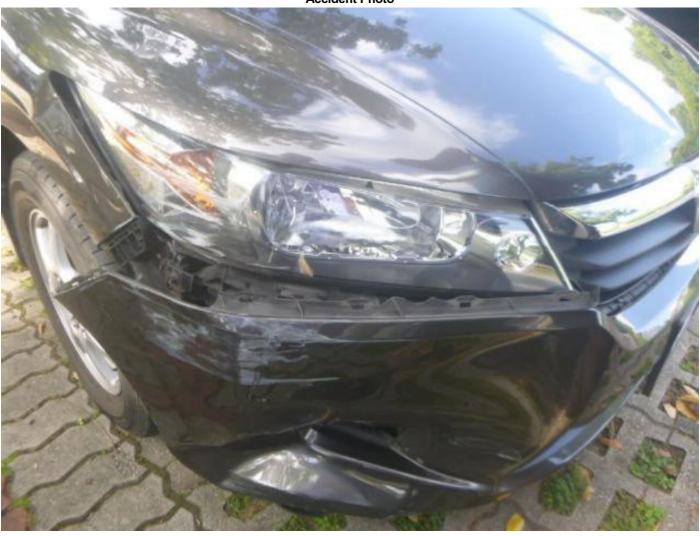




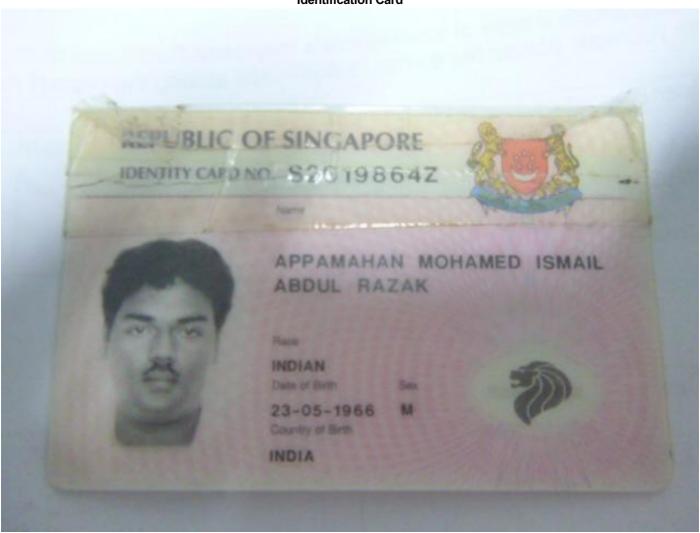








Identification Card



Identification Card



Driving License



Driving License

