

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	29/01/2019 16:57
Date Of Accident	29/01/2019 09:20
Exact Location Of Accident	CTE TWDS AYE NEAR LP 503
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLG2662Y
Insured/Policyholder	
Name Of Registered Owner	IQBAL BIN SYED SULAIMAN
NRIC No	S7227893C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90018974
Alternative Phone No	OTHERS-90018974

Vehicle Particulars

Manufacturer	MAZDA
Model	MAZDA 3
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5101308548
Cover Note Number	

Driver

Name of Driver	IQBAL BIN SYED SULAIMAN
NRIC No	S7227893C
Date Of Birth	10/06/1972
Occupation	INDOOR
Date Of Driving Pass	07/01/1997
Driving Experience	22 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90018974
Fax Number	
Contact Number	OTHERS-90018974
Email Address	NOEMAIL

Address	11 FENVALE LANE #11-02
Postcode	797495
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	3
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?	YES
If Yes, Please state which Police Station	
Police Station Name	KAMPONG UBI NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 9 EUNOS CRESCENT #01-2687 , POSTCODE: 400009 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7479999 - FAX NO: 67453410
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT:T/20190129/2058

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	SD CARD GIVEN TO TRAFFIC POLICE
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBF8434Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SKT7837X

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)

Accident Sketch Plan

SKETCH PLAN

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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:

29/01/19

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

Individual Statement



**SINGAPORE
POLICE FORCE**



T/20190129/2058

Police Station Of Origin:
Kampong Ubi NPP
9 Eunus Crescent #01-2687 SINGAPORE
400009
Tel No: 1800-7479999

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Report No. T/20190129/2058

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLG2662Y	NTUC Income Insurance Co-Operative Limited	5101308548	22/06/2018	21/06/2019

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	IQBAL BIN SYED SULAIMAN	ID No.	S7227893C
Related Vehicle	SLG2662Y (Car)	Contact No.	90018974
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 29/01/2019 at about 0920hrs, I was driving along CTE (AYE), nearby to L/P 503E, on the 2nd lane. While driving as per normal, one vehicle (SKT7837X) from the 1st lane, lane changed into the 2nd lane in front of me. As he was doing the lane change very close to my vehicle, I slowed down and swerved slightly to the left side of the 2nd lane as I fear he might collide into me. Suddenly, one motorbike (FBF8434Z) had side-swiped into the left side of my vehicle. The said motorcyclist then fell and rolled into the 3rd lane. I immediately parked my vehicle aside and provide assistance. I believed that the motorcyclist was riding inbetween lane 2 and lane 3, subsequently lost balance.

Moments later, ambulance and police arrived at scene. Both the motorcyclist and pillion were conveyed to hospital.

Video footage from my in-car camera had been given to the traffic police at scene.

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



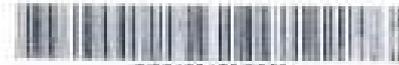
Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



T/20190129/2058

Police Station Of Origin:
Kampung Ubi NPP
9 Eunos Crescent #01-2687 SINGAPORE
400009
Tel No: 1800-7478999

1 of 3
Report No: T/20190129/2058

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/01/2019 12:58	Video Report No.: E/20190129/0054	Station Diary No.: 11
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Informant's Particulars			
Name of Informant: IQBAL BIN SYED SULAIMAN		Address: 11 FERNSVALE LANE #11-02 SINGAPORE 797495	
ID Type / ID No. NRIC NO / S7227893C		Contact No: Home/Office: Mobile: 90018974	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 48	Date of Birth: 10/06/1972	Type of Informant: Driver
Race: Indian		Language:	Institution / School Name:
Occupation: LEGAL EXECUTIVE		Driving Licence Information: Class: Date of Expiry:	

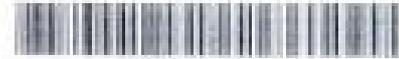
General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 29/01/2019 09:20	Type of Location:
Location: Along Road 1 CENTRAL EXPRESSWAY OTE (AYE) 5.4km L/P 503E Lang Post Number: 503				
Weather:		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBF8434Z	Motorcycle					1
SKT7837X	Car					0
SLG2862Y	Car	MAZDA	MAZDA3 4-DOOR SEDAN 1.5L SP.8EAT	Grey	Slightly Damaged	0

Police Report



**SINGAPORE
POLICE FORCE**



T/20190129/2058

Police Station Of Origin:
Kampong Ubi NPP
9 Euros Crescent #01-2687 SINGAPORE
400009
Tel No: 1800-7479899

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Report No: T/20190129/2058

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No	Insurance Company	Insurance No	Effective	Expiry Date
SLG2662Y	NTUC Income Insurance Co-Operative Limited	5101308546	22/08/2018	21/06/2019

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver:			
Name	IQBAL BIN SYED SULAIMAN	ID No.	S7227893C
Related Vehicle	SLG2662Y (Car)	Contact No.	90018974
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 29/01/2019 at about 0820hrs, I was driving along CTE (AYE), nearby to LP 503E, on the 2nd lane. While driving as per normal, one vehicle (SK17837X) from the 1st lane, lane changed into the 2nd lane in front of me. As he was doing the lane change very close to my vehicle, I slowed down and swerved slightly to the left side of the 2nd lane as I fear he might collide into me. Suddenly, one motorbike (FBF6434Z) had side-swiped into the left side of my vehicle. The said motorcyclist then fell and rolled into the 3rd lane. I immediately parked my vehicle aside and provide assistance. I believed that the motorcyclist was riding inbetween lane 2 and lane 3, subsequently lost balance.

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Video footage from my in-car camera had been given to the traffic police at scene.

Police Report



SINGAPORE
POLICE FORCE



T/20190129/2058

Police Station Of Origin:
Kampong Ubi NPP
8 Euros Crescent #01-2687 SINGAPORE
400009
Tel No: 1800-7479999

3 of 3

Report No: TQ2190129/2058

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 3 NURBIHAYAT BIN ABDOUL JALIL 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 28/01/2019 12:58
Officer In Charge Of Case: TP / GIT / Sr Staff Sgt NOR FAIZAL BIN YAHYA Contact No.: 65476202	Classification Of Case:

Authentication Stamp:
NP 118

