

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	13/02/2019 10:52
Date Of Accident	04/02/2019 00:15
Exact Location Of Accident	BUKIT TIMAH RD TWDS NEWTON CIRCUS
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGG9930L
Insured/Policyholder	
Name Of Registered Owner	MOHAMAD ASREE BIN ANANG
NRIC No	S7204028G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98639626
Alternative Phone No	OFFICE-98639626

Vehicle Particulars

Manufacturer	HONDA
Model	CIVIC 1.8L 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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	S27889085SMA
Cover Note Number	

Driver

Name of Driver	MOHAMAD ASREE BIN ANANG
NRIC No	S7204028G
Date Of Birth	23/01/1972
Occupation	OUTDOOR
Date Of Driving Pass	30/07/2007
Driving Experience	11 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98639626
Fax Number	
Contact Number	OFFICE-98639626
EEmail Address	NOEMAIL

Address	BLK 636 WOODLANDS RING ROAD #09-93
Postcode	730636
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	COLLISION - CHANGE/CROSS LANE
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	2
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)	5
Passenger 1	NAME: : SURIATI BINTE SNARI GENDER: : FEMALE
Passenger 2	NAME: : NADHIR BINTE MOHD ASREE GENDER: : FEMALE
Passenger 3	NAME: : NAYLI MARSYA BINTE MOHD ASREE GENDER: : FEMALE
Passenger 4	NAME: : NISA INSYIRAH BINTE MOHD ASREE GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	WOODLANDS EAST N.P.C
Police Station Address	ROAD: 3 WOODLANDS DRIVE 63 , POSTCODE: 737890 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20190204/2014.

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	SKP2403T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	BI GUO AN
NRIC/Passport Number	S2594520D
Contact Number	96417648
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	MOHAMAD ASREE BIN ANANG
Approximate Age	
Injuries Sustain	NECK & BACK
Injured person in which vehicle?	SGG9930L
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

DETAILS OF INJURED PERSON 2

Name	SURIATI BINTE SNARI
Approximate Age	
Injuries Sustain	NECK & BACK
Injured person in which vehicle?	SGG9930L
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

DETAILS OF INJURED PERSON 3

Name	NADHIR BINTE MOHD ASREE
Approximate Age	
Injuries Sustain	NECK & BACK
Injured person in which vehicle?	SGG9930L
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

DETAILS OF INJURED PERSON 4

Name	NAYLI MARSYA BINTE MOHD ASREE
Approximate Age	
Injuries Sustain	NECK & BACK
Injured person in which vehicle?	SGG9930L
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	

Postcode

DETAILS OF INJURED PERSON 5

Name	NISA INSYIRAH BINTE MOHD ASREE
Approximate Age	
Injuries Sustain	NECK & BACK
Injured person in which vehicle?	SGG9930L
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Accident Sketch Plan

SKETCH PLAN

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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:

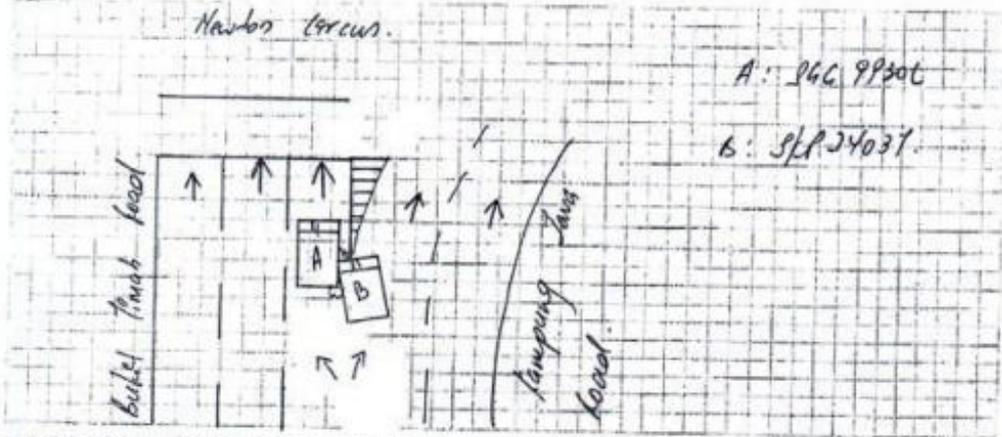


Reporting Centre Personnel's Signature

Name:
NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to traffic police report.

T / 201902041 2014.

DECLARATION

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

[Signature]
Policyholder's Signature
Date & Time:

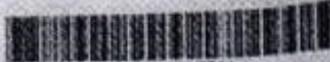
[Signature]
Driver's Signature
(if driver is not the policyholder)
Date & Time:

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

Police Report



**SINGAPORE
POLICE FORCE**



T/20190204/2014

1 of 5

Report No. T/20190204/2014

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No. 1800-7679999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made 04/02/2019 03:39	Vide Report No.	Station Diary No 9
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Informant's Particulars

Name of Informant MOHAMAD ASREE BIN ANANG		Address APT BLK 638 WOODLANDS RING ROAD #09-93 SINGAPORE 730636	
ID Type / ID No. NRIC NO / 57204028G		Contact No. Home/Office: Mobile: 98539626	
Nationality SINGAPORE CITIZEN		Email	
Sex Male	Age 47	Date of Birth 23/01/1972	Type of Informant Driver
Race Malay		Language English	Institution / School Name
Occupation TECHNICIAN		Driving Licence Information Class: 2B,2A,2,3 Date of Expiry:	

General Information of the Accident

Type of Accident	Injury Others	Drink Drive No	Date/Time of Accident 04/02/2019 00:15	Type of Location Straight Road
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Location:
Along Road 1
BUKIT TIMAH ROAD

BUKIT TIMAH ROAD TOWARDS NEWTON CIRCUS. NEAR THE CHEVRON HEADING TOWARDS KAMPUNG JAYA ROAD (KKWCH).

Weather Clear	Road Surface Dry	Road Speed Limit
Traffic Flow One Way	Traffic Control Traffic Light - Working	Traffic Volume Light
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction		Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No. of Passengers
SGG9930L	Car	HONDA	CIVIC 1.8L A	Black	Slightly Damaged	4
SKP2403T	Car	LEXUS	LEXUS ES250 LUXURY AUTO	Silver	Slightly Damaged	0

Police Report



**SINGAPORE
POLICE FORCE**

Police Station Of Origin
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999



T/20190204/2014



Report No: T/20190204/2014

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Passenger			
Name	NISA INSYIRAH BINTE MOHAMAD ASREE	ID No.	T0436294I
Related Vehicle	SGG9930L (Car)	Contact No.	90996284
Hospital/Clinic	CENTRAL 24-HR CLINIC (WOODLANDS)	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	04/02/2019	Date Discharge	04/02/2019
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Passenger			
Name	NAYLI MARSYA BINTE MOHAMAD ASREE	ID No.	T0140372E
Related Vehicle	SGG9930L (Car)	Contact No.	92222834
Hospital/Clinic	CENTRAL 24-HR CLINIC (WOODLANDS)	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	04/02/2019	Date Discharge	04/02/2019
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Driver			
Name	MOHAMAD ASREE BIN ANANG	ID No.	S7204028G
Related Vehicle	SGG9930L (Car)	Contact No.	96639626
Hospital/Clinic	CENTRAL 24-HR CLINIC (WOODLANDS)	Class of Driving Licence & Expiry Date	Class: 2B, 2A, 2, 3 Date of Expiry: NIL
Date Treatment	04/02/2019	Date Discharge	04/02/2019
No. of Days granted Medical Leave	03	Degree of Injury	Slight

Police Report



**SINGAPORE
POLICE FORCE**



T/20190204/2014

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Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

Report No. T/20190204/2014

CONTINUATION OF REPORT

Passenger			
Name	SURIATI BINTE SNARI	ID No.	S7339212H
Related Vehicle	SGG9930L (Car)	Contact No.	85184398
Hospital/Clinic	CENTRAL 24-HR CLINIC (WOODLANDS)	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	04/02/2019	Date Discharge	04/02/2019
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Passenger			
Name	NADHIRAH BINTE MOHAMAD ASREE	ID No.	S9929254G
Related Vehicle	SGG9930L (Car)	Contact No.	97912537
Hospital/Clinic	CENTRAL 24-HR CLINIC (WOODLANDS)	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	04/02/2019	Date Discharge	04/02/2019
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Driver			
Name	BI GUOAN	ID No.	S2594520D
Related Vehicle	SKP2403T (Car)	Contact No.	96417848
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 4/2/2019 at about 0000hrs, I was driving my vehicle, one Black Honda Civic with registration plate number SGG9930L along Bukit Timah Road from Tekka. I was heading towards Newton Circus as I wanted to enter SLE/CTE. I was on the most right lane of the 3 lanes road and there was another lane on the right with chevron which heads to Kampung Java Road. Out of sudden, I felt a collision on the rear. I realized that the vehicle which was collided with my vehicle was from the right lane which was heading towards Kampung Java Road. I stopped after the traffic light to make a check and it was one Silver Lexus with registration plate number SKP2403T that had hit my vehicle's rear right passenger side. There were scratches and dents on the driver as well as right passenger door. No traffic police or ambulance was at scene hence we settled the matter among ourselves before exchanging our particulars. Due to the impact, I felt giddy and my neck and back was in pain. My family members who were inside the vehicle also felt the same way. We went to Woodlands Mart 24hr clinic for medical attention and all of us were

Police Report



**SINGAPORE
POLICE FORCE**



T/20190204/2014

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Report No. T/20190204/

CONTINUATION OF REPORT

given 3 days MC. There is no in-vehicle camera inside my vehicle.

Police Report

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3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999


T/20190204/2014

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Report No: T/20190204/2014

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 / Staff Sgt NUR HAZWANI BINTE ISMAIL 	Signature Of Informant 
Signature Of Interpreter Not applicable	Date/Time: 04/02/2019 03:39
Officer In Charge Of Case: TP / AEIT / SBI 2 SITIMARSITA BINTE BOHARI Contact No: 65476219	Classification Of Case:
Authentication Stamp MP168	

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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