

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	19/02/2019 10:38
Date Of Accident	16/02/2019 20:40
Exact Location Of Accident	JUNCTION OF BRAS BASAH ROAD/NORTH BRIDGE ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLP8256A
Insured/Policyholder	
Name Of Registered Owner	METRO CAR LEASING PTE LTD
Co Reg No	201810490D
Email Address	KAZAF07@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97543574
Alternative Phone No	OFFICE-97543574

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	LANCER EX-1.6 LED TAIL LAMP (A)
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES (GO JEK)
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5100798940
Cover Note Number	

Driver

Name of Driver	KERK CHIN HAUR (GUO JINHAO)
NRIC No	S8270281D
Date Of Birth	01/02/1982
Occupation	OUTDOOR
Date Of Driving Pass	28/07/2005
Driving Experience	13 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97543574
Fax Number	
Contact Number	OTHERS-97543574
Email Address	KAZAF07@GMAIL.COM

Address	BLK 863 YISHUN AVENUE 4 #11-73
Postcode	760863
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	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?	YES
Was any injured conveyed to hospital by ambulance?	YES
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	YISHUN SOUTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 32 YISHUN ST 81 , POSTCODE: 768456 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8522999 - FAX NO: 68522239
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190216/2147

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	SHD736U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	YANG QILONG
NRIC/Passport Number	S8402318C
Contact Number	83838228
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver) 1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number FBM7259H
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category MOTORCYCLE
Name of Driver IRWAN BIN ARSAD
NRIC/Passport Number S7443556D
Contact Number 87424121
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name IRWAN BIN ARSAD
Approximate Age
Injuries Sustain SLIGHT INJURY
Injured person in which vehicle? FBM7259H
Were seat belts worn?
Was this injured conveyed to hospital by ambulance? YES
Address
Postcode

Accident Sketch Plan

SKETCH PLAN

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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.



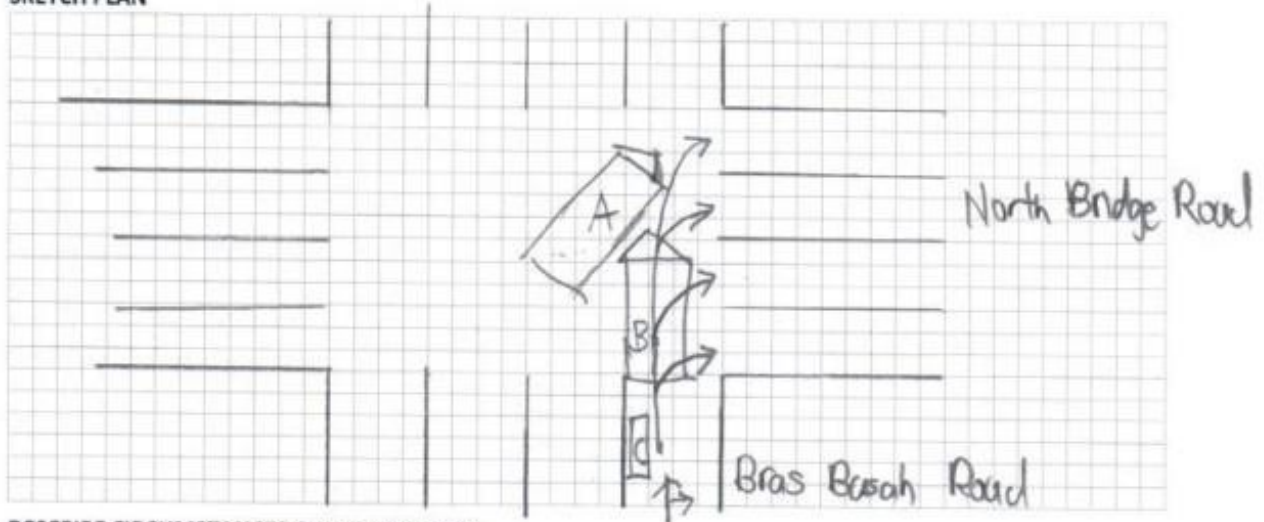
Policyholder's Signature
Date & Time:


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


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

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

A : SLP8256A
 B : 8HD736U
 C : FBM7259H

*REFER to Police REPORT
 7/20190216/2147*

DECLARATION

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

Policyholder's Signature
 Date & Time: 19/2/19 9.35am

Driver's Signature
 (If driver is not the policyholder)
 Date & Time: 19/2/19 9.35am

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

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190216/2147

1 of 3

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

Report No. T/20190216/2147

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/02/2019 23:26		Vide Report No.: A/20190216/0145		Station Diary No.: 125	
Informant's Particulars					
Name of Informant: KERK CHIN HAUR			Address: APT BLK 863 YISHUN AVENUE 4 #11-73 SINGAPORE 760863		
ID Type / ID No.: NRIC NO / S8270281D			Contact No.: Home/Office: Mobile: 97543574		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 37	Date of Birth: 01/02/1982	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: ENGINEER			Driving Licence Information: Class: 2B,2A,3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 16/02/2019 20:40	Type of Location: X-Junction
Location: Along Road 1 BRAS BASAH ROAD NORTH BRIDGE ROAD Junction of Bras Basah Road and North Bridge Road				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
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
FBM7259H	Motorcycle				Slightly Damaged	0
SHD736U	Car				Slightly Damaged	0
SLP8256A	Car				Slightly Damaged	0

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190216/2147

2 of 3

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

Report No. T/20190216/2147

CONTINUATION OF REPORT

Brief Details.

On 16/02/2019 at about 2040hrs, I was driving my vehicle bearing registration number SLP8256A along Bras Basah Road. When I was at the junction of Bras Basah Road and North Bridge Road, I received a job whereby I need to turn right into North Bridge Road. I was at the center lane of the 4 lanes, either 2nd or 3rd lane. I turned right as I saw 4 arrows turning right into North Bridge Road and thought that I can turn right. While turning, suddenly a taxi bearing registration number SHD736U hit the right side of my rear door. Subsequently I then realized that a motorcycle bearing number FBM7259H had hit the rear side of the taxi as well. After the accident, when I got down from my vehicle that I realized that my lane was a straight lane only. The police attended to my accident and the motorcyclist was conveyed to hospital by ambulance.

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190216/2147

3 of 3

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

Report No. T/20190216/2147

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 NIRATNA NINGSEH BINTE ABD
JALIL

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /
Insp TAN CHIN YONG
Contact No.: 65476178

Authentication Stamp
NP168

Signature Of Informant:

Date/Time:
16/02/2019 23:26

Classification Of Case:

SN 006

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

