

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	20/03/2019 11:52
Date Of Accident	26/11/2018 14:10
Exact Location Of Accident	ANCHORVALE CC CAR PARK EXIT GANTRY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR6201K
Insured/Policyholder	
Name Of Registered Owner	MOHAMMAD HAFIZ BIN ABDUL HUSSAIN
NRIC No	S9142239E
Email Address	M.HAFIZ@NCHS.EDU.SG
Mobile Phone No	(LOCAL) +65-88081487
Alternative Phone No	OTHERS-88081487

Vehicle Particulars

Manufacturer	HONDA
Model	VEZEL 1.5X A

Exact Purpose for which vehicle was being used at time of accident

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	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MT/00507130
Cover Note Number	

Driver

Name of Driver	MOHAMMAD HAFIZ BIN ABDUL HUSSAIN
NRIC No	S9142239E
Date Of Birth	24/11/1991
Occupation	INDOOR
Date Of Driving Pass	02/12/2011
Driving Experience	6 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-88081487
Fax Number	
Contact Number	OTHERS-88081487
E-Mail Address	M.HAFIZ@NCHS.EDU.SG

Address	BLK 450 TAMPINES ST 42 #02-382
Postcode	527450
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	HIT BY FALLEN TREE / OTHER OBJECTS
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	1
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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

KINDLY REFER TO SKETCH PLAN.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	
Vehicle Make/Model/Colour	CAR PARK BARRIER
Details Of Properties	
Vehicle Category	MOBILE EQUIPMENT
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN


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8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

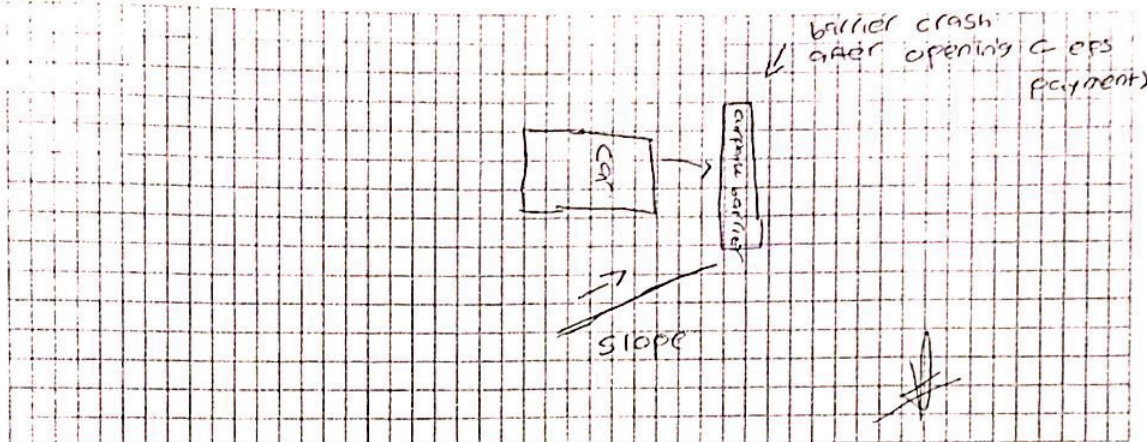
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:
20/3/2019
11:37am


Driver's Signature
(If driver is not the policyholder)
Date & Time:
20/3/2019
11:37am


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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Vehicle had made payment using EPS for parking charges at Anchorvale CC, Singapore. Barrier was lifted and driver moved forward. Barrier suddenly crashed due to fault.

[Signature]

Important: You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a FOURTEEN (14) DAYS CLAUSE WHEREBY MUST BE MADE within the stipulated time frame from the day of the occurrence.		- Reporting Only
		- Claim OD
		- Claim TP
	✓	- Claim OD/ TP at other workshop

DECLARATION

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

[Signature]
 Policyholder's signature
 Date & Time
 20/3/2019
 11:37am.

[Signature]
 Driver's Signature
 (if driver not the policyholder)
 Date & Time
 20/3/2019
 11:37am.

[Signature]
 Reporting Centre Personnel's Signature
 Name:
 Nric/Fin No.

REPUBLIC OF SINGAPORE DRIVING LICENCE

Portrait of Mohammad Hafiz Bin Abdul Hussain

Licence Number: **S9142239E**
Name: **MOHAMMAD HAFIZ BIN ABDUL HUSSAIN**
Birth Date: **24 Nov 1991**
Issue Date: **02 Dec 2011**

Barcode: 002022944F

REPUBLIC OF SINGAPORE

Identity Card No: **S9142239E**

Portrait of Mohammad Hafiz Bin Abdul Hussain

Name: **MOHAMMAD HAFIZ BIN ABDUL HUSSAIN**
محمد حافظ بن عبدالحسين
Race: **INDIAN**
Date of birth: **24-11-1991** Sex: **M**
Country/Place of birth: **SINGAPORE**

Small portrait of the person

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

	EFFECTIVE DATE
Class 3A Motor cars without clutch pedals (Auto) =< 3000kg with =< 7 passengers, exclusive of the driver; and other motor vehicles without clutch pedals =< 2500kg	02 Dec 2011

NP 428A

Hafiz
92747995

Licence No: S9142239E

6061120

Barcode

NRIC No: **S9142239E**

Fingerprint

Date of issue: **08-11-2018**

Address: **APT BLK 450G TAMPINES STREET 42
#02-382
SINGAPORE 527450**