

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	27/02/2019 15:04
Date Of Accident	26/02/2019 19:20
Exact Location Of Accident	UPP SERANGOON RD BEFORE JUNC UPPER PAYA LEBAR RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLU992J
Insured/Policyholder	
Name Of Registered Owner	RELIABLE RIDES PTE LTD
Co Reg No	201611527N
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-89999999

Vehicle Particulars

Manufacturer	TOYOTA
Model	PRIUS HYBRID 1.8S A
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL USE
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	5095999148-01
Cover Note Number	

Driver

Name of Driver	SAMSON CUBA DELA ROSA
NRIC No	S2734533F
Date Of Birth	30/11/1966
Occupation	OUTDOOR
Date Of Driving Pass	22/11/2002
Driving Experience	16 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96192784
Fax Number	
Contact Number	OFFICE-96192784
Email Address	NOEMAIL

Address	11 JALAN LIMAU MANIS
Postcode	468343
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	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?	NO
Was any injured conveyed to hospital by ambulance?	
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	PAYA LEBAR NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 114 HOUGANG AVENUE 1 #01-1270 , POSTCODE: 530114 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2899999 - FAX NO: 62815961
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20190226/2174.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	VIDEO FOOTAGE WITH DRIVER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	UNKNOWN
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	BUS
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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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

A: stop
 B: unterfahren

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report - 7/20190226/2174.

DECLARATION

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

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.:

Police Report



**SINGAPORE
POLICE FORCE**



T/20190226/2174

Police Station Of Origin:
Paya Lebar N/P
114 Hujang Avenue 1 #01-1270
SINGAPORE 650114
Tel No. 1800-2800999

Report No. T/20190226/2174

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/12/2019 20:21		Visit Report No.:	Station Diary No. 56
Informant's Particulars			
Name of Informant: SIMSON CUBA DELA ROSA		Address: 11 JALAN LIMAU MANIS SINGAPORE 468343	
ID Type / ID No.:		Contact No.	
NRIC NO. / S2734633F		Home/Office:	
Nationality: SINGAPORE CITIZEN		Mobile: 96192784	
Sex:		Email:	
Male	Age: 52	Type of Informant: Driver	
Date of Birth: 30/11/1966	Language:		Institution / School Name:
Race: Filipino	Driving Licence Information: Class: 3		Date of Expiry:
Occupation: GRAB DRIVER			

General Information of the Accident

Type of Accident: Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 26/02/2019 18:20	Type of Location: Straight Road
Location: Along Road 1 UPPER SENANGGORN ROAD			
Just before filtering into Upper Paya Lebar road			
Weather: Clear	Road Surface: Dry	Road Speed Limit:	
Flow: Ncy	Traffic Control: Not Controlled	Traffic Volume: Heavy	
of Collision: Two Moving Vehicles - Side Swipe - Same Direction		Anyone conveyed by ambulance: No	

Details of Vehicle involved

Vehicle No.	Type	Make	Model	Colour	Condition	No of Passenger
3LU992J	Car					0

Details of Pedestrian involved

Any Pedestrian involved? No	Use of Pedestrian Crossing: NA
No. of Pedestrians Injured: Nil	

Police Report



**SINGAPORE
POLICE FORCE**



T/20190225/2174

Police Station Of Origin:
Paya Lebar NPP
114 Hougang Avenue 1 #01-1270
SINGAPORE 530114
Tel No. 1800-2899999

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Report No. T/20190225/2174

CONTINUATION OF REPORT

Name	SAMSON CUBA DELA ROSA	ID No.	S2734533F
Vehicle	SLU992J (Car)	Contact No.	96192784
Police/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 26/02/2019 at about 1920hrs, I was driving my car vehicle number, SLU992J along upper Serangoon road just before filtering to Upper Paya Lebar road. I was driving behind this SBS Single deck bus (unknown car plate number). I speed up as I wanted to overtake the bus in front of me when the bus suddenly filter lane to the most left lane driving into the approaching bus stop.

Upon noticing the bus changing its lane, I immediately swerve right in an attempt to avoid colliding to it, causing a side swipe between my car and the bus. My car's left side mirror was hit at that moment. Upon the collision, I then drove my car further up in front of the bus and came to a stop with my hazard light on as I wanted to speak to the bus driver in regards to the accident. However, the bus after stopping at the bus stop, drove off without speaking to me. As such I am lodging this report in case there is any implication afterwards. I also discovered that was cracks on my left rear passenger door.

I have yet to check my in car CCTV whether it captured the accident footage. I am not injured.

Police Report



SINGAPORE
POLICE FORCE



T/20190226/2174

Police Station Of Origin:
Paya Lebar NPP
114 Henggang Avenue 1 #01-1270
SINGAPORE 530114
Tel No. 1800-2899999

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Report No. T/20190226/2174

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:

F /

Sgt 2 KOH PEI QI

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

28/02/2019 20.25

Officer In Charge Of Case:

TE / HRT /

Staff Sgt TAN JEOK LENG

Contact No.: 65476144

Classification Of Case:

Authentication Stamp:

not es

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Accident Photo





Accident Photo

