

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	04/03/2019 15:01
Date Of Accident	02/03/2019 18:25
Exact Location Of Accident	ANG MO KIO AVE 5 TOWARDS CTE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBD8890A
Insured/Policyholder	
Name Of Registered Owner	DTC CONSTRUCTION PTE LTD
Co Reg No	201020223G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96645931
Alternative Phone No	OFFICE-64819017

Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA 150-3.0 D (M)
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSE
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5072505380-03
Cover Note Number	

Driver

Name of Driver	HOSSAIN MD FARUQUE
NRIC No	G7358482K
Date Of Birth	07/09/1977
Occupation	OUTDOOR
Date Of Driving Pass	04/01/2018
Driving Experience	1 YEAR AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-90965917
Fax Number	
Contact Number	OFFICE-64819017
EEmail Address	NOEMAIL

Address	22 WOODLANDS LINK #03-12
Postcode	S738734
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
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?	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

PLEASE REFER TO SKETCH PLAN

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	GBC1181P
Vehicle Make/Model/Colour	NISSAN NV200
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
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)

(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 :

(collectively the "Purposes")

(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.



Forsythe



Witnessed by Reporting Centre
Personnel

A - GBD 8890A
 B - GBC 1181P

Sketch Plan #2

Describe Circumstances of the Accident

ON 2 March 2019, at 6.25pm, I was driving my lorry GBD 8890A along Ang Mo Kio Ave 5 towards CTE. It was green light so I turned right into CTE. An electronic bicycle suddenly appears even though pedestrian traffic light is still showing red, so I jammed my brake and the van behind GBC 1181P hit my lorry from behind.



Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

Fazlurrahman

Driver's Signature (if driver is not the policyholder) / Date & Time



Witnessed by Reporting Centre Personnel

NOTICE OF COMPLIANCE

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Annex E

NOTICE OF COMPLIANCE

This is to confirm that Hossain Md Faruque,
NRIC/FIN G7358482k, has reported to the Police a non-injury traffic accident
which occurred Along Ang Mo Kio Avenue 5 towards CTE
on 02/03/2019 at 1825HRS involving the following vehicles:

1. GBD8890A
2. GBC1181P

2. If this accident was reported to the Police within 24 hours of its occurrence,
Then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: SGT Loghanathan

Date: 02/03/2019 Time: 1236 hrs

S/D Ref: 02

Police Post/Unit: Serangoon Garden NPP

Original – to be issued to informant
Duplicate – to be submitted to Traffic Police

CONFIDENTIAL

Version as of 15 Jan 2002


Serangoon North NPP
Blk 103 Serangoon North Ave 1
#01-709 Singapore 550108
Tel: 1800 284 9999

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Identification Card

