

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	07/03/2019 14:24
Date Of Accident	01/03/2019 15:30
Exact Location Of Accident	ALONG ALEXANDRA RD TWDS COMMONWEALTH AVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBG6168A
Insured/Policyholder	
Name Of Registered Owner	TECH-V COOL WORKZ PTE LTD
Co Reg No	201730698M
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62866720

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE
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	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	DMCFHQ18-000054
Cover Note Number	

Driver

Name of Driver	MUHAMMAD HAFIDZ BIN ABDULLAH
Passport No/FIN	G8062812P
Date Of Birth	10/02/1976
Occupation	OUTDOOR
Date Of Driving Pass	02/05/2008
Driving Experience	10 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-88226199
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	34 WHAMPOA WEST #01-19
Postcode	330034
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?	YES
Foreign Vehicle Registration Number	JRQ2207 (COMMERCIAL VEHICLE)
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)	2
Passenger 1	NAME: : UNKNOWN GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	ALEXANDRA NPP
Police Station Address	ROAD: BLK 46 TANGLIN HAIT RD #01-328 , POSTCODE: 140462 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20190301/2127

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	JRQ2207
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	LEE KOK WENG
NRIC/Passport Number	870411385187

Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name	MUHAMMAD HAFIDZ BIN ABDULLAH
Approximate Age	
Injuries Sustain	BACK
Injured person in which vehicle?	GBG6168A
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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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.

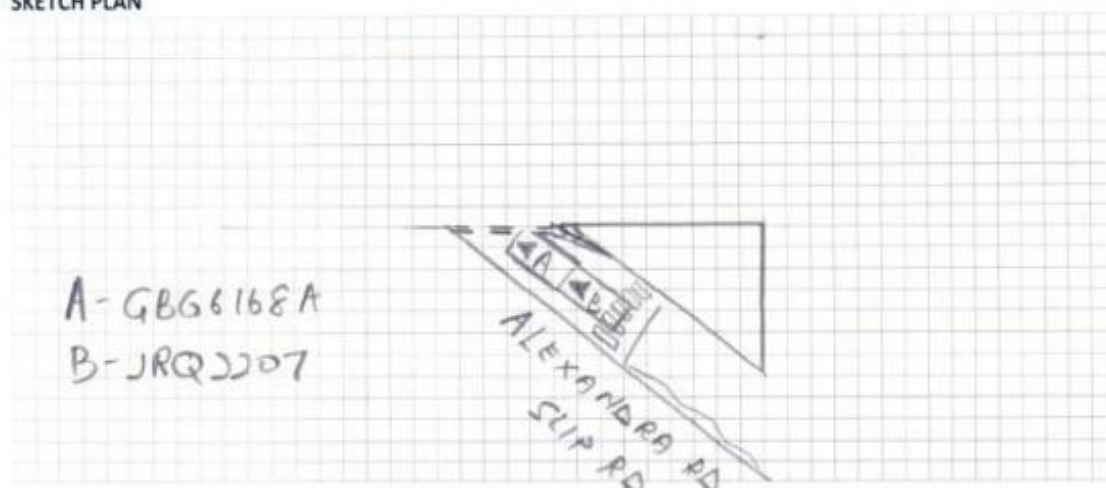

TECH-V COOL WORKZ PTE. LTD.
34 Whampoa West, #01-19 S(330034)
Tel: (65) 6286 5720 Fax: (65) 6286 5220
Date & Time:

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

Please refer to police report T/20190301/2127

DECLARATION

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



TECH-V COOL WORKZ PTE. LTD.

Policyholder's Signature _____ #01-19 S/33005Driv

34 Whampoa West #01-19 S(330034)
Tel: 8636 6286 6720 Fax: (65) 6286 6720

TEL: (65) 6286 6720 Fax: (65) 6286 5220

Date: _____

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Individual Statement



**SINGAPORE
POLICE FORCE**



T/20190301/2127

Police Station Of Origin:
Alexandra NPP
46 Tanglin Halt Road #01-328 SINGAPORE
140462
Tel No: 1800-4739999

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Report No. T/20190301/2127

CONTINUATION OF REPORT

Name	MUHAMMAD HAFIDZ BIN ABDULLAH		ID No.	G8062812P
Related Vehicle	GBG6168A (Van)		Contact No.	88226199
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	
Name	Lee Kok Weng		ID No.	870411385187
Related Vehicle	JRQ2207 (Pick up)		Contact No.	NIL
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 01/03/2019 at about 1530hrs, I was driving a white Toyota Hi ace Van with the registration number: GBG6168A, along Alexandra Rd towards Commonwealth Ave. After the zebra crossing at the give way area just before Commonwealth Ave, a vehicle hit the back of my vehicle. The vehicle was an Isuzu D-Max pick up with the registration number: JRQ2207. We both got out of our vehicle and check the damages to our vehicle. My vehicle was dented at the back rear door below the license plate. The other vehicle was dented at the front at the front of his vehicle. We both exchange particulars and called for the police. Subsequently traffic police came. I mentioned to traffic police I did not want to be conveyed to the hospital. Both drivers and passengers were not injured.

I would like to mention that my back hurts a little and maybe I would see the doctor if it persists.
Report is vide to D/20190301/0048.

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Police Report



**SINGAPORE
POLICE FORCE**



T/20190301/2127

1 of 3

Police Station Of Origin:
Alexandra NPP
46 Tanglin Hall Road #01-328 SINGAPORE
140462
Tel No: 1800-4739999

Report No. T/20190301/2127

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 01/03/2019 16:38		Vide Report No.:		Station Diary No.: 47	
Name of Informant: MUHAMMAD HAFIDZ BIN ABDULLAH					
Address:					
ID Type / ID No.: FIN NO / G8062812P		Contact No.: Home/Office: Mobile: 98226199			
Nationality: MALAYSIAN		Email:			
Sex: Male	Age: 43	Date of Birth: 10/02/1976	Type of Informant: Driver		
Race: Malay		Language: English		Institution / School Name:	
Occupation: AIR-CON TECHNICIAN		Driving Licence Information: Class: Date of Expiry:			

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 01/03/2019 15:30	Type of Location: Bend
Location: Along Road 1 Traveling Toward Road 2 ALEXANDRA ROAD COMMONWEALTH AVENUE At the zebra crossing at Alexandra Road just before Commonwealth Ave				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Pedestrian Crossing		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Vehicle No.	Vehicle Type	Make	Model	Color	Damage	Injured
JRC0000	Van	TOYOTA	Hi Ace	White	Slightly Damaged	1
JRQ2207	Pick up	ISUZU	D-max	White	Slightly Damaged	0

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

Police Report



**SINGAPORE
POLICE FORCE**



T/20190301/2127

Police Station Of Origin:
Alexandra NPP
48 Tanglin Halt Road #01-328 SINGAPORE
140462
Tel No: 1800-4739999

2 of 3

Report No. T/20190301/2127

CONTINUATION OF REPORT

Name	MUHAMMAD HAFIDZ BIN ABDULLAH	ID No.	G8062812P
Related Vehicle	GBG6168A (Van)	Contact No.	88226199
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
Name	Lee Kok Weng	ID No.	870411385187
Related Vehicle	JRQ2207 (Pick up)	Contact No.	NIL
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.

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Report is vide to DV20190301/0048.

Police Report



**SINGAPORE
POLICE FORCE**



T/20190301/2127

Police Station Of Origin:

Alexandra NPP

46 Tanglin Halt Road #01-328 SINGAPORE

140462

Tel No: 1800-4739999

3 of 3

Report No. T/20190301/2127

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 65474865 stating the report number as reference.

Signature Of Officer Recording The Report:

D /

Sgt 2 TAN HONG CHI, SEAN

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

01/03/2019 16:38

Officer In Charge Of Case:

TP / GIT /

SI MOHAMMAD SHAHRIL BIN ABDULLAH

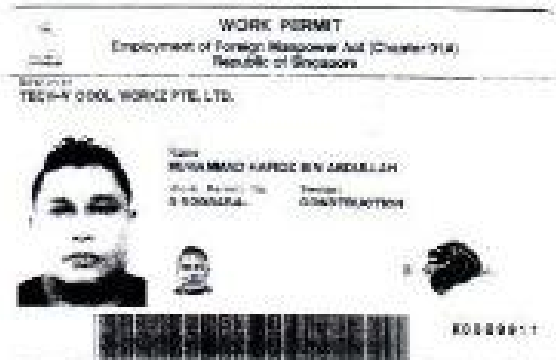
Contact No.: 65476083

Classification Of Case:

Authentication Stamp

NP188

Identification Card



YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:

EFFECTIVE DATE:

Class 2 Motor cars with unladen weight $\leq 3000\text{kg}$ with ≤ 7 passengers, inclusive of driver and pilot motor vehicles with unladen weight $\leq 3000\text{kg}$



1/0 4284

