

## 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	05/03/2019 13:28
Date Of Accident	05/03/2019 08:30
Exact Location Of Accident	ALONG TAMPINES AVE 10
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKZ5288L
<b>Insured/Policyholder</b>	
Name Of Registered Owner	HABIBAH BINTE HUSSAIN PATAIL
NRIC No	S1412823I
Email Address	ALHUSAIN@SINGNET.COM.SG
Mobile Phone No	(LOCAL) +65-82288894
Alternative Phone No	OTHERS-82288894

### Vehicle Particulars

Manufacturer	MAZDA
Model	3-1.5 (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE 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	PRIVATE CAR

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5094910563-01
Cover Note Number	DRIVO PREMIUM

### Driver

Name of Driver	SYED AHMAD HANEY DAHLAN
NRIC No	S1081338G
Date Of Birth	17/04/1954
Occupation	INDOOR
Date Of Driving Pass	05/12/1972
Driving Experience	46 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96170806
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address BLK 159 PASIR RIS STREET 13 #02-09  
 Postcode 510159  
 Was driver an employee of the Insured's Company NO  
 If No, Relationship of the Driver with the Insured SPOUSE  
 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 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) 2  
 Passenger 1 NAME: : PASSENGER  
 GENDER: : FEMALE

#### 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

ON 5/3/19 AT AROUND 8.30AM, I WAS TRAVELLING ALONG TAMPINES AVE 10 TOWARDS BARTLEY ROAD EAST. I WAS ON THE EXTREME LEFT LANE OF TAMPINES AVE 10 WHEN VEHICLE B (XD8964K) HIT THE RIGHT REAR SIDE OF MY VEHICLE. UPON HITTING MY VEHICLE, VEHICLE B DID NOT STOP AND CONTINUE DRIVING. I OVERTOOK HIS VEHICLE AND MANAGED TO GET HIM TO STOP. THEREAFTER, WE EXCHANGED PARTICULARS. NO ONE WAS INJURED IN THIS ACCIDENT.

#### 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 XD8964K  
 Vehicle Make/Model/Colour  
 Details Of Properties TRUCK  
 Vehicle Category COMMERCIAL VEHICLE  
 Name of Driver CHEN SHANTONG  
 NRIC/Passport Number G8080160U  
 Contact Number  
 Address  
 Postcode



Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

1



# Sketch Plan Pg. 1

INCOME MOTOR SERVICE CENTRE

Report No: MT/

D.O.A: 05/03/2019  
Time: 08:30 hrs

Report Date & Start Time: 05/03/2019 / 13:35

Vehicle No: SKZ5288L

Reporting Type: TP

## SKETCH PLAN

### IMPORTANT NOTICE

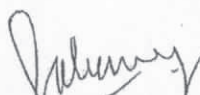
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5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the Insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that 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.

05/03/19 / 13:35

Policyholder's Signature / Date & Time

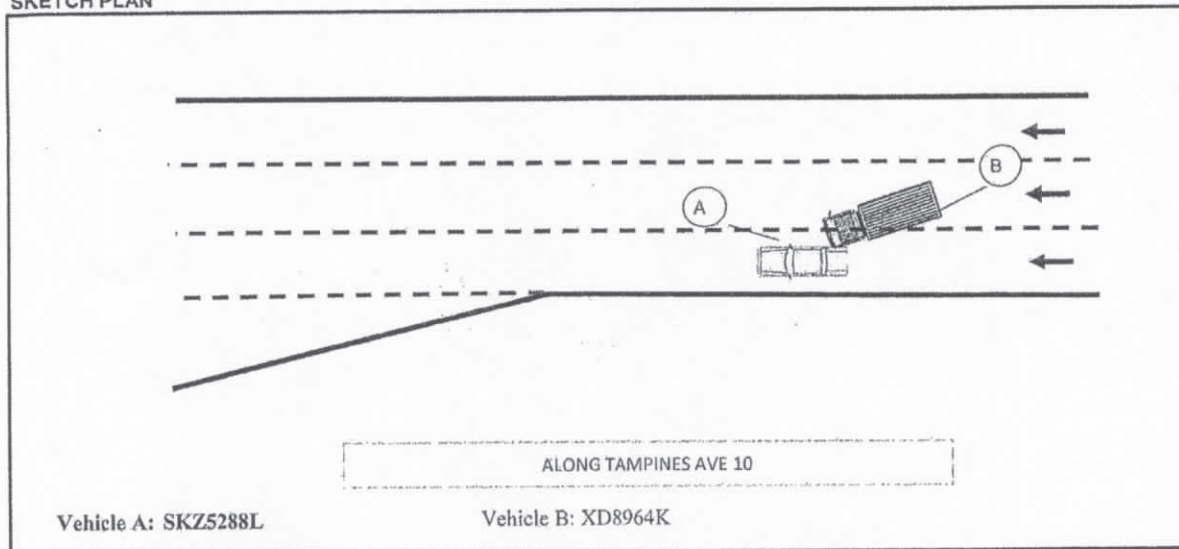
  
Driver's Signature (If driver is not the policyholder) / Date & Time

05/03/19 / 13:35

Eric Woo (S912953)  
Customer Care Executive  
Motor Service Centre  
Witnessed by Reporting Centre Personnel

# Sketch Plan Pg. 2

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 5/3/19 AT AROUND 8.30AM, I WAS TRAVELLING ALONG TAMPINES AVE 10 TOWARDS BARTLEY ROAD EAST. I WAS ON THE EXTREME LEFT LANE OF TAMPINES AVE 10 WHEN VEHICLE B (XD8964K) HIT THE RIGHT REAR SIDE OF MY VEHICLE. UPON HITTING MY VEHICLE, VEHICLE B DID NOT STOP AND CONTINUE DRIVING. I OVERTOOK HIS VEHICLE AND MANAGED TO GET HIM TO STOP. THEREAFTER, WE EXCHANGED PARTICULARS. NO ONE WAS INJURED IN THIS ACCIDENT.

## Declaration

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


05/03/19 / 13:35  
Policyholder's Signature / Date & Time

*[Signature]*  
Driver's Signature (If driver is not the policyholder) / Date & Time

*[Signature]* (SPP-51)  
Customer Care Executive  
Motor Service Centre  
Witnessed by Reporting Centre Personnel



REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S14128231






Name  
**HABIBAH BINTE HUSSAIN  
PATAIL**

Race  
**MALAY**


Date of birth  
**24-11-1960**

Sex  
**F**

Country/Place of birth  
**SINGAPORE**



REPUBLIC OF SINGAPORE DRIVING LICENCE




NAME  
**SYED AHMAD HANEY DAHLAN**

Date of birth  
**17 Apr 1964**

Issue Date  
**10 Nov 2017**

REPUBLIC OF SINGAPORE DRIVING LICENCE




NAME  
**HABIBAH BINTE HUSSAIN  
PATAIL**

Date of birth  
**24 Nov 1960**

Issue Date  
**21 Oct 2008**




REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S1081338G






Name  
**SYED AHMAD HANEY DAHLAN**

Race  
**ARAB**


Date of birth  
**17-04-1964**

Sex  
**M**


Country/Place of birth  
**SINGAPORE**

6063782



NRIC No. S14128231



Date of issue  
**13-11-2018**


Address  
**APT BLK 159 PASIR RIS STREET 13  
#02-09  
SINGAPORE 510159**

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES

Class	Vehicle Class	Effective Date
Class 3	Motor cars with unladen weight $\leq$ 3000kg with $\leq$ 7 passengers, exclusive of driver; and other motor vehicles with unladen weight $\leq$ 2500kg	05 Dec 1972

NP 428A

Licence No. S1081338G




YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES

Class	Vehicle Class	Pass Date
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	06 Oct 1985

NP 428A

Licence No. S14128231



5292531



NRIC No. S1081338G



Date of issue  
**10-04-2014**

Address  
**APT BLK 159 PASIR RIS STREET 13  
#02-09  
SINGAPORE 510159**

## Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)  
MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960  
ROAD TRANSPORT ACT, 1987 (MALAYSIA)  
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

**Certificate Number:** 5094910563-01

**Cover :** drive PREMIUM

1. Index mark and Registration Number of Vehicle : **SKZ5288L**  
Chassis Number : **JM6BM44A8G0320948**
2. Name of Policyholder : **HABIBAH BINTE HUSSAIN PATAIL**
3. Effective Date of Insurance : **26 Jan 2019**
4. Expiry Date of Insurance : **25 Jan 2020**
5. Persons or Classes of Persons entitled to drive#  
(a) The Policyholder.  
(b) Any other person who is driving on the Policyholder's order or with his/her permission.  
Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.
6. Limitations as to Use#  
(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

**This Policy does not cover**

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

# Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS (SECTION 1)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: YES
INSURE WITH COE	: YES
NCD PROTECTION	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: HABIBAH BINTE HUSSAIN PATAIL
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : MUHAMMAD ADIL B HUSSEIN (00000527965)  
Date of Issue : 25 Jan 2019 11:33 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Countersigned By:

Authorised Officer



Chief Executive



**GENERAL INSURANCE ASSOCIATION OF SINGAPORE  
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580  
Phone: +65 6224 0010 Fax: +65 6224 0030  
Operating Hours: Monday to Friday 9am to 5pm  
GST Registration No: M400017735

**Third Party Insurer Enquiry**

Our Ref No: GR-19-036040  
Date of Request: 07/03/2019

Your Ref No: Online Purchase

Trans Eurokars Pte Ltd  
12 Sungei Kadut Ave  
Singapore 729648

Dear Sir/Madam,

Enquiry Date 07/03/2019  
Enquiry By STANLEY NGU KEE SIONG  
TP Vehicle No. XD8964K  
Accident Date 05/03/2019

SKZ 5288L

**Enquiry Result**

TP Vehicle No.	Insurer	Period of Insurance	Insurer Tel. No.
XD8964K	QBE Insurance (Singapore) Pte Ltd	03/06/2018-02/06/2019	62246633

Thank You.

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

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RECORDS MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE  
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580

Phone: +65 6224 0010 Fax: +65 6224 0030

Operating Hours: Monday to Friday 9am to 5pm

GST Registration No: M400017735

**TAX INVOICE**

Our Ref No: GR-19-036040

Date of Request: 07/03/2019

Your Ref No: Online Purchase

Trans Eurokars Pte Ltd  
12 Sungei Kadut Ave  
Singapore 729648

Dear Sir/Madam,

Enquiry Date 07/03/2019  
Enquiry By STANLEY NGU KEE SIONG  
TP Vehicle No. XD8964K  
Accident Date 05/03/2019

DESCRIPTION	AMOUNT (S\$)
TP Insurer Enquiry	1.87
GST Amount	0.13
Total Amount Due (GST Inclusive)	2.00

Thank You.

This is a computer generated document and requires no signature.

For GIARMC Official use:

Date:

☒ GIRO ☐ Cash ☐ Cheque