

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	21/03/2019 10:03
Date Of Accident	16/03/2019 07:30
Exact Location Of Accident	BKE HEADING TWDS JB DIRECTION
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJP4575D
Insured/Policyholder	
Name Of Registered Owner	SUBHAN JABBAR SHAHJEHAN
NRIC No	S7083231C
Email Address	SHA_EGMORE@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-90251687
Alternative Phone No	OTHERS-90251687

Vehicle Particulars

Manufacturer	HONDA
Model	FREED
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	LONPAC INSURANCE BHD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	Z/17/VP05/015391-001
Cover Note Number	

Driver

Name of Driver	SUBHAN JABBAR SHAHJEHAN
NRIC No	S7083231C
Date Of Birth	08/12/1970
Occupation	INDOOR
Date Of Driving Pass	29/06/2003
Driving Experience	15 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90251687
Fax Number	
Contact Number	OTHERS-90251687
Email Address	SHA_EGMORE@YAHOO.COM.SG

Address	55 GEYLANG BAHRU #04-3613
Postcode	330055
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	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	JTG2781 (MOTORCYCLE)
Number of vehicles (including own vehicle) involved in the accident	3
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
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)	4
Passenger 1	NAME: : ZULAIKAH BEEVI GENDER: : FEMALE
Passenger 2	NAME: : JASMIN RIZHWANA GENDER: : FEMALE
Passenger 3	NAME: : SHAHI NASREEN GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	GEYLANG N.P.C
Police Station Address	ROAD: 132 PAYA LEBAR ROAD , POSTCODE: 409014 , 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/20190316/2053

Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	JTG2781
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Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category MOTORCYCLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number GBF1253A

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE

Name of Driver LIU ZHAO ZHONG

NRIC/Passport Number

Contact Number 82699861

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name UNKNOWN

Approximate Age

Injuries Sustain BLEEDING AND BADLY INJURED

Injured person in which vehicle? JTG2781

Were seat belts worn?

Was this injured conveyed to hospital by ambulance? YES

Address

Postcode

Accident Sketch Plan

SKETCH PLAN

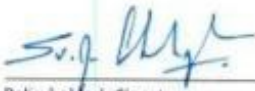
IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
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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:

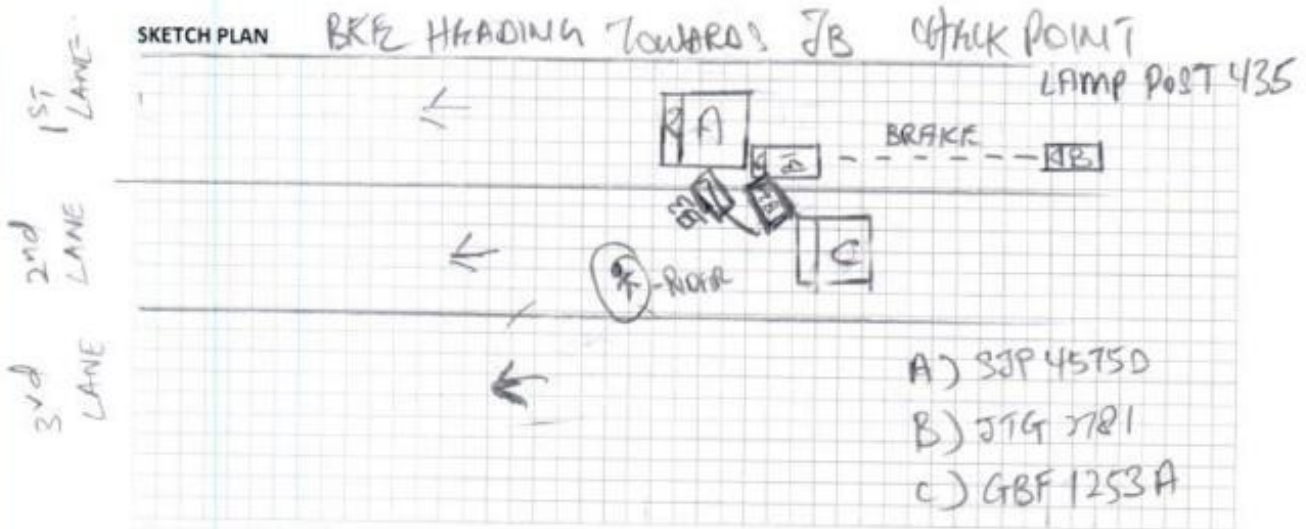
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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


Policyholder's Signature
Date & Time: 16/3/19 1.10PM

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


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

Accident Sketch Plan



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PLS REFER TO POLICE REPORT
7/20/90316/2053

DECLARATION

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

S. J. R. L.

Policyholder's Signature

Date & Time: 16/3/19 1.10 PM

Driver's Signature

(If driver is not the policyholder)

Date & Time:

S. J. R. L.

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Individual Statement



**SINGAPORE
POLICE FORCE**



T/20190316/2053

Police Station Of Origin:
Geylang N.P.C
132 Paya Lebar Road SINGAPORE 409014
Tel No: 1800-8486999

2 of 3

Report No. T/20190316/2053

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJP4575D	LONPAC INSURANCE BHD.	Z17VP05015394-001	25/09/2017	24/03/2019

Brief Details.

On the 16th of March 2019 at about 0730hrs, I was driving my vehicle bearing registration plate SJP4575D along Bukit Timah Expressway (BKE) heading towards Johor Bahru direction, just before Woodlands Avenue 3. I was driving my vehicle on the first lane of the expressway. During which, the traffic was quite congested and I slowed down my vehicle, before becoming stationary. While my vehicle was stationary, all of a sudden, I felt an impact from the rear left portion of my vehicle. The impact made my vehicle surged forward. I then tried to stop my vehicle, to which I managed to do so. My wife who was seated on the front passenger seat, then mentioned that a motorcycle had hit onto my vehicle. I got out of the vehicle and I saw that the motorcycle rider was lying on the road, bleeding and badly injured. Other road users assisted to call police and ambulance for assistance. Other road users mentioned that a lorry bearing registration plate GBF1253A, had hit onto the motorcycle and that the lorry stopped quite a distance away, ahead of the accident scene. Traffic Police and ambulance came down to the scene and the motorcycle rider was conveyed to the nearest hospital.

I wish to state the damages were as follows:

- 1) SJP4575D - rear left portion dented and rear left tail-light damaged
- 2) JTG2781 - damaged pieces of motorcycle
- 3) GBF1253A - unable to ascertain damages

I wish to state that there is no in-car camera installed in my vehicle. I was then advised by the Traffic Police officer to proceed down to lodge for a traffic accident report.

Police Report



**SINGAPORE
POLICE FORCE**



T/20190316/2053

Police Station Of Origin:
Geylang N.P.C
132 Paya Lebar Road SINGAPORE 408014
Tel No: 1800-8486999

1 of 3

Report No. T/20190316/2053

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/03/2019 12:00		Vide Report No.: L/20190316/0076		Station Diary No.: 49	
Informant's Particulars					
Name of Informant: SUBHAN JABBAR SHAHJEHAN			Address: APT BLK 55 GEYLANG BAHRU #04-3613 SINGAPORE 330055		
ID Type / ID No.: NRIC NO / S7083231C			Contact No.: Home/Office: Mobile: 90251687		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 48	Date of Birth: 08/12/1970	Type of Informant: Driver		
Race: Indian		Language: English		Institution / School Name:	
Occupation: COORDINATOR			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury: Attended by Police	Drink Drive: No	Date/Time of Accident: 16/03/2019 07:30	Type of Location: EXPRESSWAY
Location: Along Road 1 BUKIT TIMAH EXPRESSWAY				
ALONG BUKIT TIMAH EXPRESSWAY (BKE) HEADING TOWARDS JOHOR BAHRU DIRECTION, BEFORE WOODLANDS AVE 3				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBF1253A	Van	TOYOTA	TOYOTA DYNA 150 MANUAL	Blue	Slightly Damaged	0
JTG2781	Motorcycle				Seriously Damaged	0
SJP4575D	Car	HONDA	FREED 1.5G A	Red	Slightly Damaged	3

Police Report



**SINGAPORE
POLICE FORCE**



T/20190316/2063

Police Station Of Origin:
Geylang N.P.C
132 Paya Lebar Road SINGAPORE 409014
Tel No: 1800-8486889

2 of 3

Report No. T/20190316/2063

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJP4575D	LONPAC INSURANCE BHD.	Z17VP05015394-001	25/09/2017	24/03/2019

Brief Details.

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- 3) GBF1253A - unable to ascertain damages

I wish to state that there is no in-car camera installed in my vehicle. I was then advised by the Traffic Police officer to proceed down to lodge for a traffic accident report.

Police Report



SINGAPORE
POLICE FORCE



T/20190318/2053

Police Station Of Origin:

Geylang N.P.C

132 Paya Lebar Road SINGAPORE 409014

Tel No: 1800-8486969

3 of 3

Report No. T/20190318/2053

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:

G /

Sgt 3 MUHAMMAD ARIF BIN HAIRUDIN

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

16/03/2019 12:00

Officer In Charge Of Case:

TP / GIT /

SI THABAGESH JEYATHESH

Contact No.: 65476232

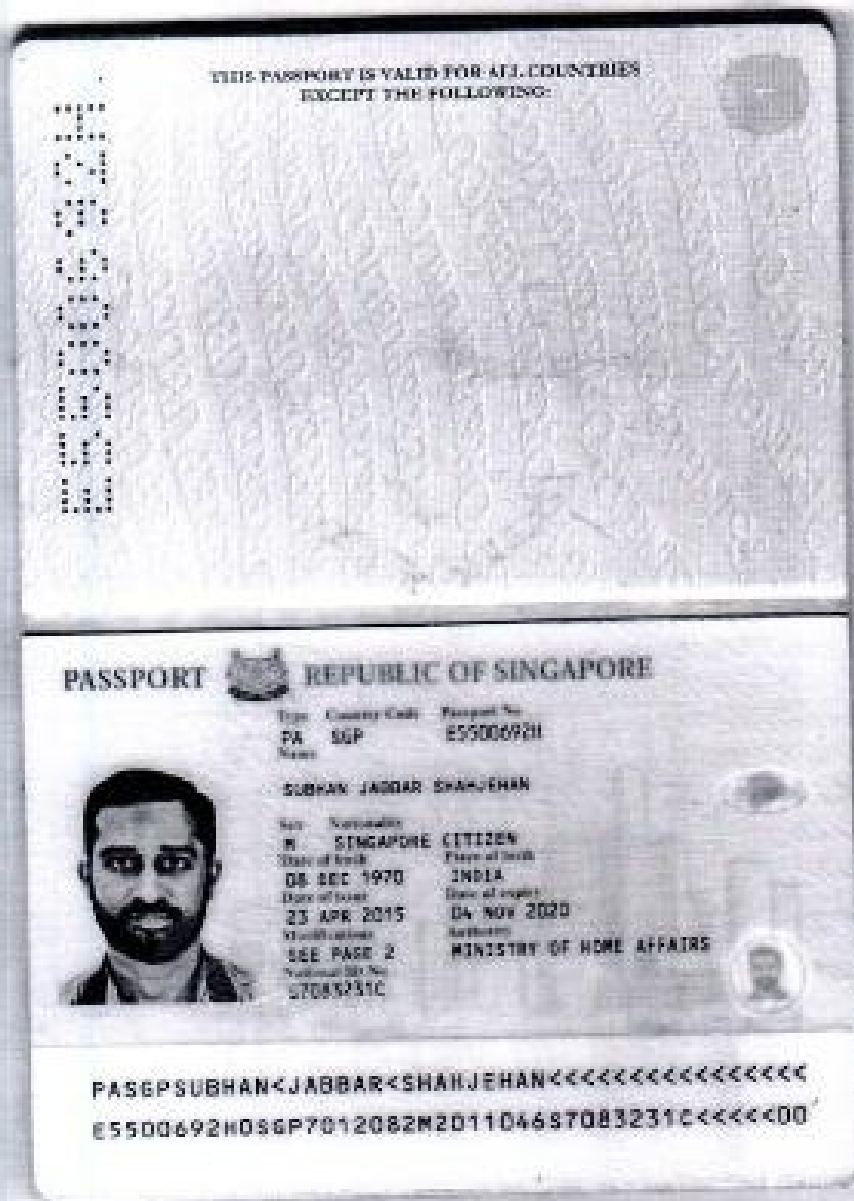
Classification Of Case:

Authentication Stamp

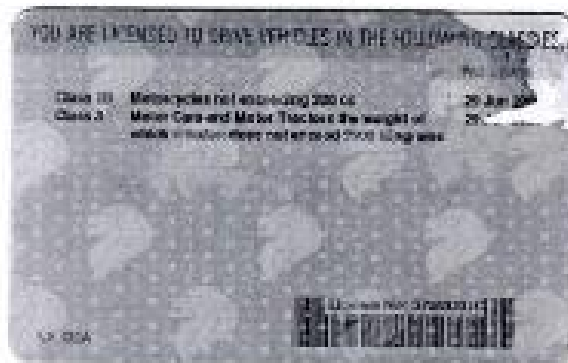
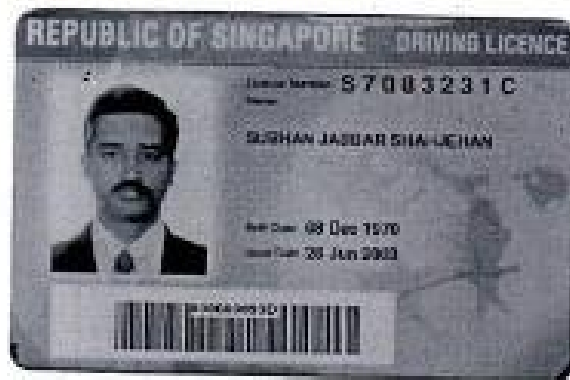
NP108

Signature of Informant

PASSPORT



Driving License



29/06/2003