

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	07/01/2019 17:07
Date Of Accident	03/01/2019 16:00
Exact Location Of Accident	LOADING & UNLOADING BAY AT ELIAS MALL
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	CB7672T
Insured/Policyholder	
Name Of Registered Owner	MOHAMED AZRI BIN DOALIM
NRIC No	S7642268J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-87556650
Alternative Phone No	OFFICE-87556650

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE
Exact Purpose for which vehicle was being used at time of accident	
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	5076384029-03
Cover Note Number	

Driver

Name of Driver	DOALIM BIN BABAK
NRIC No	S0059426A
Date Of Birth	14/02/1953
Occupation	OUTDOOR
Date Of Driving Pass	30/06/1978
Driving Experience	40 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82095650
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 19 UPPER BOON KENG ROAD #04-1190
Postcode	380019
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	PARENT
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - OPENING DOOR OF VEHICLE
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?	YES
If Yes, Please state which Police Station	
Police Station Name	PASIR RIS NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 1 PASIR RIS DRIVE 4 , POSTCODE: 519457 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5852999 - FAX NO: 65855261
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT: T/20190104/2027.

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	YL51T
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
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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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.

G2R1
 Policyholder's Signature
 Date & Time:

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

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

NEW HOOD TEE



**SINGAPORE
POLICE FORCE**



T/20190104/2027

1 of 3

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

Report No. T/20190104/2027

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/01/2019 10:21	Vide Report No.:	Station Diary No.: 25
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Informant's Particulars

Name of Informant: DOALIM BIN BABAK		Address: APT BLK 19 UPPER BOON KENG ROAD #04-1190 SINGAPORE 380019	
ID Type / ID No.: NRIC NO / S0059426A		Contact No.: Home/Office: Mobile: 82095650	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 65	Date of Birth: 14/02/1953	Type of Informant: Driver
Race: Malay		Language:	Institution / School Name:
Occupation: SCHOOL BUS DRIVER		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 03/01/2019 16:00	Type of Location:
Location: Along Road 1 ELIAS ROAD loading & unloading bay at Elias Mall				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision: between parked vehicles				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
CB7672T	Bus/Coach/Minibus (School Children)				Slightly Damaged	0
YL51T	Lorry				No Damage	0

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20190104/2027

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

2 of 3

Report No. T/20190104/2027

CONTINUATION OF REPORT

Driver			
Name	DOALIM BIN BABAK		ID No. S0059426A
Related Vehicle	CB7672T (Bus/Coach/Minibus (School Children))		Contact No. 82095650
Hospital/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 03/01/2019 at about 1600hrs, I was in my vehicle bearing the plate number CB7672T and I was parked at the loading & unloading bay of Elias Mall. There was a lorry bearing the plate number YL51T which was parked beside my vehicle. It was a goods lorry and the driver was busy unloading stuff and delivering to the stalls. While the lorry driver was delivering his goods, his rear door was not secured properly and due to the wind the right rear lorry door swings outwards and scrape the left side of my vehicle causing scratch marks. I then informed the driver and he said that he will come back however I waited for 20 minutes but the driver did not turn up. I do not have the particulars of the driver. No TP or ambulance was at scene and no one was injured. I am lodging this report for insurance claim.



**SINGAPORE
POLICE FORCE**



T/20190104/2027

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

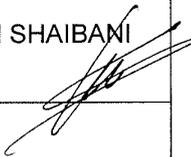
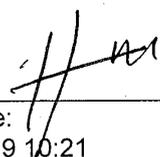
3 of 3
Report No. T/20190104/2027

CONTINUATION OF REPORT

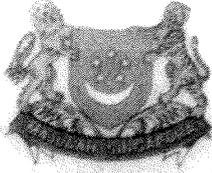
Sketch Plan

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 2 MUHAMMAD SYAZWAN BIN SHAIBANI 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 04/01/2019 10:21
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt IRMAN BIN MOHAMAD SAID Contact No.: 65476145 	Classification Of Case:
Authentication Stamp NP168	 SIGNATURE

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7642268J



Name
MOHAMED AZRI BIN DOALIM

Race
MALAY

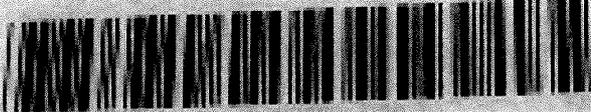
Date of birth
24-12-1976

Sex
M

Country of birth
SINGAPORE



3271021



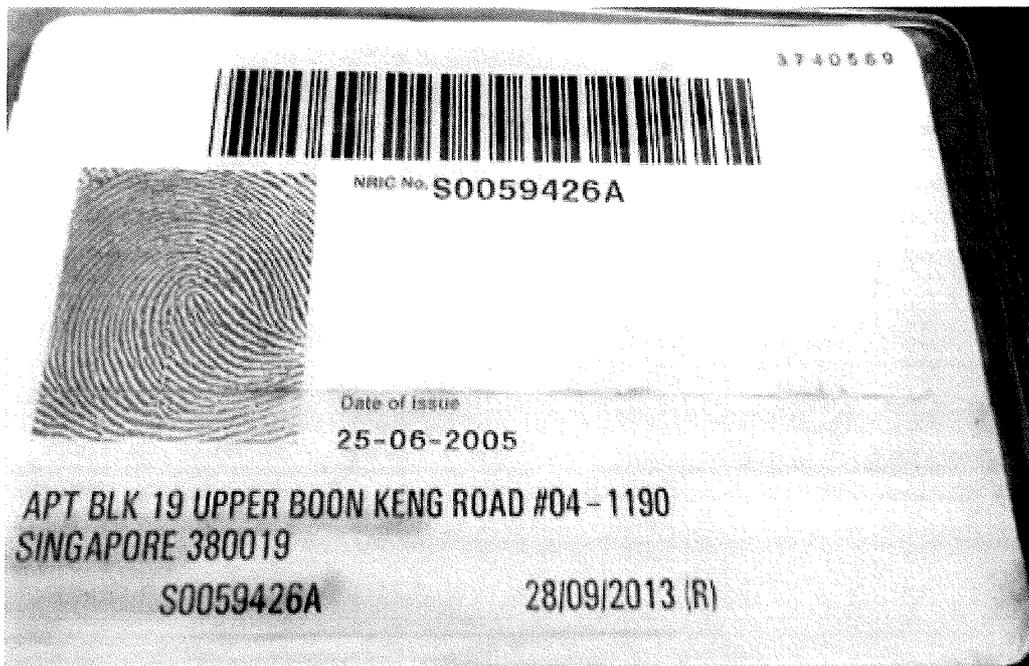
NRIC No: S7642268J



Date of issue
20-11-2008

APT BLK 530 WOODLANDS DRIVE 14 #02-537
SINGAPORE 730530

NRIC No: S7642268J Date: 19/10/2010 No: 6626009



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S0059426A**
Name: **DOALIM BIN BABAK**

Birth Date: **14 Feb 1953**
Issue Date: **02 Sep 2003**



000793067C

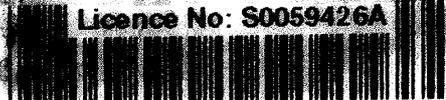
YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(S)

		PASS DATE
Class 3	Motor cars =< 3000 kg with =< 7 passengers, exclusive of the driver; and motor tractors/vehicles =< 2500 kg	30 Jun 1978

S0059426A S / No. 9000293008

NP 428A

Licence No: S0059426A





VOCATIONAL LICENCE

Licence No : S0059426A

Name : DOALIM BIN BABAK

Please visit www.lta.gov.sg to check the status of this vocational licence

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
03	BUS VL	22/03/1982





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 : 5076384029-03 **Cover** : Comprehensive

- 1. Index mark and Registration Number of Vehicle : **CB7672T**
 Chassis Number : KDH2230025945
- 2. Name of Policyholder : MOHAMED AZRI BIN DOALIM
- 3. Effective Date of Insurance : 17 Dec 2018
- 4. Expiry Date of Insurance : 16 Dec 2019
- 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 the carriage of passengers in connection with the Policyholder's business.
 - (b) Limited to carry 13 passengers

This Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed-testing.
- (b) Use whilst drawing a trailer except the towing (Other than for reward) of any one disabled mechanically propelled vehicle.

* 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.

GEOGRAPHICAL LIMIT	: WITHIN THE REPUBLIC OF SINGAPORE ONLY
EXCESS (SECTION I)	: S\$2,000
EXCESS (SECTION II)	: S\$1,500
WINDSCREEN EXCESS	: S\$500
INSURE WITH COE	: YES
HIRE PURCHASE COMPANY	: TATCO CREDIT PTE LTD
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 : S'PORE SCH&PTE HIRE BUS OWNS ASS (00000601247)
 Date of Issue : 29 Oct 2018 09:33 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:

 Authorised Officer

 Chief Executive

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Addendum Sheet Pg. 1



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 - 17:00
UEN: S66550020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MSME 19002858 Vehicle Registration No: CB 76727
Name (as shown in NRIC) : DOALIM BIN RABEK NRIC/FIN/Passport No : S0059426A
(*Vehicle Driver / Vehicle Owner) (* Please delete as appropriate
Address : B1E 17 UPP BOON KENG RD #04-1190 Singapore (S80017)
Contact (Tel) : Mobile No. : 8209 5650
Email Address :
Date of Accident : 03/01/2017 Time of Accident : 16.00
Place of Accident : LOADING & UNLOADING BAY AT BECAS MALL
Insurance Company : NCC

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

AMEND DATE OF ACCIDENT

Policyholder / Driver's Signature
Date:

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