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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	14/02/2019 15:26
Date Of Accident	13/02/2019 08:00
Exact Location Of Accident	PIE/BKE TOWARDS BUKIT PANJANG
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	GX4798X
Insured/Policyholder	
Name Of Registered Owner	CLEAN SOLUTIONS PTE LTD
Co Reg No	198801833K
Email Address	GINNY@CLEANSOLUTIONS.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-64710880
Vehicle Particulars	
Manufacturer	TOYOTA
Model	LITEACE
Exact Purpose for which vehicle was being used at time of accident	WORK
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	ETIQA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	M0011147
Cover Note Number	
Driver	

Name of Driver MUHAMMAD AMIN BIN ABDULLAH

NRIC No S0414720J
Date Of Birth 07/08/1943
Occupation OUTDOOR
Date Of Driving Pass 27/03/1969

Driving Experience 49 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-83035932

Fax Number
Contact Number

EMail Address NOEMAIL

Address BLK 226 SERANGOON AVE 4 #08-143

Postcode 550226

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 CHAIN COLLISION

Weather Conditions CLEAR
Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident? YES

Foreign Vehicle Registration Number UNKNOWN (MOTORCYCLE)

Number of vehicles (including own vehicle)

involved in the accident

5

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

2

soliciting/oriening accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1 NAME:

GENDER: : MALE

: RAMLI BIN BASRI

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name SERANGOON NEIGHBOURHOOD POLICE CENTRE

Police Station Address ROAD: 50 SERANGOON AVE 2 #01-02, POSTCODE: 556129, COUNTRY:

SINGAPORE

Police Station Contact **TEL NO**: 1800-4880999 - **FAX NO**: 64883561

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

On 13/02/2019 at about 0800hrs, I was driving my company Van, White Colour "Toyota Lite Ace" bearing GX4798X along PIE/BKE towards Bukit Panjang on Iane 3. I had my attendant "RAMLI BIN BASRI, S1786045C, Hp: 90279483" on board. The traffic was smooth and weather was clear. A grey "Nissan" van bearing "GBD5541C" which was infront of my applied brakes suddenly causing me to apply jam brake. I managed to stop my van on time. However, a blue "isuzu" bearing YM9731A hit on my van's rear causing my van to hit onto the grey van infront of me. I felt pain on my chest and my attendant suffered pain on his left arm. I came out and made a check and discovered that I was involved in a chain accident. The other vehicles are white "Toyota Hiace" van bearing PC3215Y and a blue Malaysian motorcycle. After exchanging particulars, Traffic Police and Ambulance came to scene. I was conveyed to Ng Teng Fong Hospital and was given 4 days of MC. My attendant had to stay at scene to assist Traffic Police and subsequently went to Ng Teng Fong Hospital to visit a doctor. My attendant was also given 4 days of MC. I am lodging this report as advised by Traffic Police and for insurance purposes.

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

YM9731A

Vehicle Make/Model/Colour

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)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number GBD5541C

Vehicle Make/Model/Colour

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)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number UNKNOW

Vehicle Make/Model/Colour MALAYSIA VEHICLE

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 4

Vehicle Registration Number PC3215Y

Vehicle Make/Model/Colour

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)

DETAILS OF INJURED PERSON 1

Name MUHAMMAD AMIN BIN ABDULLAH

Approximate Age

Injuries Sustain

Injured person in which vehicle? GX4798X

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

YES

Address Postcode

DETAILS OF INJURED PERSON 2

Name RAMLI BIN BASRI

Approximate Age

Injuries Sustain

Injured person in which vehicle? GX4798X

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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- The report will be forwarded by the insurers of the GIA Records Management Contre 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.
- By the lodgment of this report to the insurera, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aformsaid.
- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstane, 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:
 - 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 vahicle(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: Driver's Signature (.1 driver is not the policyholder) Date & Time: Reporting Centre Personnel Name: NRIC/FIN No.:

Accident Sketch Plan

	E	DOA: 13/2/2019
	-	A GX4798X
	8	B: YM 9731A
	m c	C: 4805541C
	PIE/BKE	NEW WORLD
	9/0 A	0: Unknown motorcycle E: PC 32154
	7 8 1	£ . PE 33189
	ICES OF THE ACCIDENT	
lease reter	police report no	: 7/2019014/2074
		1
CLARATION		
	particulars are true in every respec	2 11
ve declare the suregoing		
	particulars are true in every respec	
(Gian)	2/0	Johny (D)
We declare the toregoing		Reporting Centre Personnel's Signature

Identification CArd





Driving Licence







INTERVIEW FORM

Name (Driver)	: Muhammad amin Bin Abdullah @ Tip Kar Meng
Policy No	: M0011147
Vehicle No	GX4798X
Place of Accident	PIE/BKE Towards Bukit Pawiang
Insured Driver's relationsh	ip with Insured : Guployee
Drink Driving of Insured a	nd/or Insured Driver : N/A
	red vehicle: One passenger (Ramli Bin Basri)
	sured driver, please indicate which hospital:
Driver injury,	Ja Teng Fong Hospital
	any) OYM9731A @GBDS541 C 3 PC32154
	Party Vehicle : _ nort _ sur{
Injury to Third Party drive	r and/or passenger(s), please indicate which hospital:
Type of collision and the e	xtensiveness of the damages to all vehicles involved:
Any witness to the acciden	t (if yes, please indicate Name, Contact No and a copy of the statement):
Traffic Police report (encle	used) :(Yes)/ No
Please obtain a copy of the worker is involved)	e driving licence of Insured driver and/or work permit (where foreign
7.0	abolulish any.
Driver (Name & Signature 1, affirmed the above info	
my best knowledge	Workshop Name;
Etiqa Insurance Berhad (Cor 1 North Bridge Road, #68-01 High Str Ti+65 6336 0477 F:+65 6339 2305	et Centre, Singapore 170006

Attention of the State of the S

Police Report





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1 of 3

Report No. T/20190214/2074

Police Station Of Origin: Serangoon N.P.C 50 Serangoon Avenue 2 #01-02 SINGAPORE 556129

Tel No: 1800-4880999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 14/02/2019 14:16		fade:	Vide Report No.: F/20190213/0085	Station Diary No.: 53		
Informa	nt's Partice	ulars				
Name of Informant: MUHAMMAD AMIN BIN ABDULLAH			Address: APT BLK 226 SERANGOON AVENUE 4 #08-143 SINGAPORE 550226			
ID Type / ID No.: NRIC NO / S0414720J		20J	Contact No.: Home/Office:	Mobile: 83035932		
National SINGAP	ity: ORE CITIZ	EN	Email:			
Sex: Age: Date of Birth: Male 75 07/08/1943			Type of Informant: Driver			
Race: Chinese			Language: English	Institution / School Name:		
Occupation: PEST CONTROL			Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:			

Seneral Inform	The same of the sa		D -1 - 000	T	
Type of Accident:	Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 13/02/2019 08:00	Type of Location: Straight Road	
	EXPRESSWAY				
Weather. Clear		Road Surface: Dry		Road Speed Limit:	
		Traffic Control: Not Controlled		Traffic Volume: Moderate	
Type of Collision: CHAIN COLLISION				Anyone conveyed by ambulance: Yes	

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
GBD5541C	Van	NISSAN		Grey	Slightly Damaged	0
GX4798X	Van	TOYOTA		White	Seriously Damaged	1
PC3215Y	Van	TOYOTA		White	Slightly Damaged	0
YM9731A	Lorry	ISUZU		Blue	Slightly Damaged	0
	Motorcycle			Blue	Seriously Damaged	0

Police Report





T/20190214/2074

Report No. T/20190214/2074

2 of 3

Police Station Of Origin: Serangoon N.P.C 50 Serangoon Avenue 2 #01-02 SINGAPORE 556129

Tel No: 1800-4880999

CONTINUATION OF REPORT

Details of Perso	n Involved		STORY OF THE	38:078:69	THE REAL PROPERTY.	
Any Pedestrian I	nvolved: No				777	
No. of Pedestrians Injured: NIL			Use of P	edestriar	Cross	sing: NA
Driver						and the second second
Name	MUHAMMAD AMIN	BIN ABD	ULLAH	ID No.		S0414720J
Related Vehicle	GX4798X (Van)			Contact No.		83035932
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL			Class Drivin Licent Expiry	g	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	13/02/2019 Date Dis			charge	13/02	2/2019
No. of Days gran	ted Medical Leave	04	Degree o			
				WE SE	1000	
Name	RAMLI BIN BASRI		ID No.		S1786045C	
Related Vehicle	GX4798X (Van)			Contact No.		90279483
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL			Class Drivin Licend Expiry	g	Class: NIL Date of Expiry: NIL
Date Treatment	13/02/2019 Date Di			charge	13/02	2/2019
No. of Days granted Medical Leave 04			Degree o			

Brief Details.

On 13/02/2019 at about 0800hrs, I was driving my company Van, White Colour "Toyota Lite Ace" bearing GX4798X along PIE/BKE towards Bukit Panjang on lane 3. I had my attendant "RAMLI BIN BASRI, S1786045C, Hp: 90279483" on board. The traffic was smooth and weather was clear. A grey "Nissan" van bearing "GBD5541C" which was infront of my applied brakes suddenly causing me to apply jam brake. I managed to stop my van on time. However, a blue "isuzu" bearing YM9731A hit on my van's rear causing my van to hit onto the grey van infront of me. I felt pain on my chest and my attendant suffered pain on his left arm. I came out and made a check and discovered that I was involved in a chain accident. The other vehicles are white "Toyota Hiace" van bearing PC3215Y and a blue Malaysian motorcycle. After exchanging particulars, Traffic Police and Ambulance came to scene. I was conveyed to Ng Teng Fong Hospital and was given 4 days of MC. My attendant had to stay at scene to assist Traffic Police and subsequently went to Ng Teng Fong Hospital to visit a doctor. My attendant was also given 4 days of MC. am lodging this report as advised by Traffic Police and for insurance purposes.

Police Report





3 of 3

Report No. T/20190214/2074

Police Station Of Origin:

Serangoon N.P.C 50 Serangoon Avenue 2 #01-02 SINGAPORE CONTINUATION OF REPORT 556129

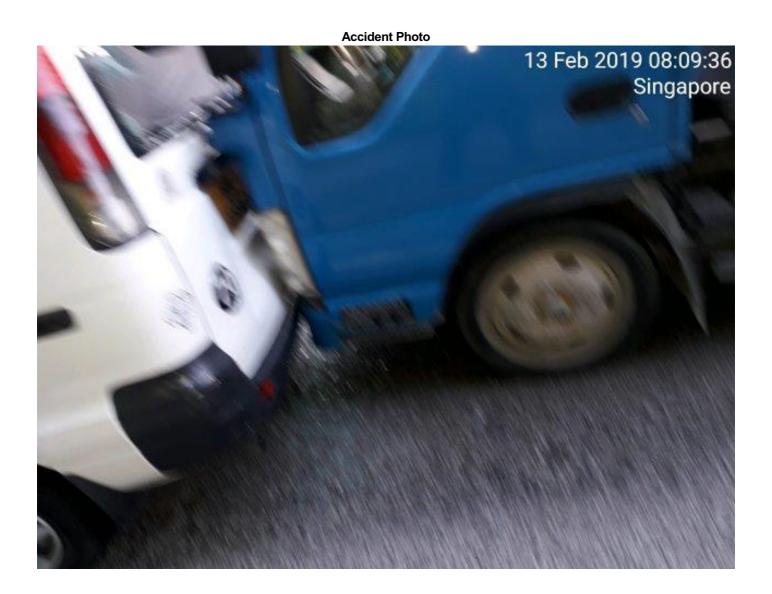
Tel No: 1800-4880999

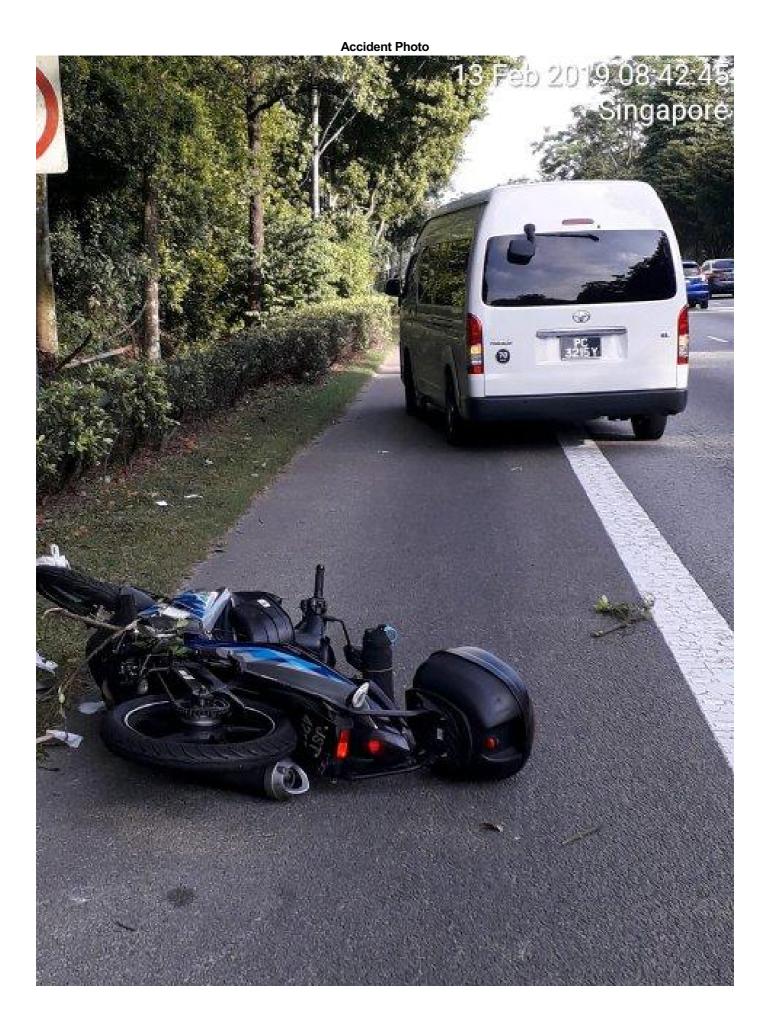
Sketch Plan

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: F / Sgt 2 LOGHANATHAN S/O AYYASAMY	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 14/02/2019 14:16
Officer In Charge Of Case: TP / AEIT / SSI 2 JUREMAH BINTE AHMAD Contact No.: 65472076	Classification Of Case:
Authentication Stamp NP168 Signature	ire:
Singapore Police	Force





Accident Photo



Accident Photo







