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.

aloresalu.	
	ACCIDENT STATEMENT
Date Of Report	23/04/2019 14:45
Date Of Accident	22/04/2019 21:20
Exact Location Of Accident	UPPER BUKIT TIMAH ROAD TURNING TO HILLVIEW AVENUE
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	FBK517U
Insured/Policyholder	
Name Of Registered Owner	MOHD ARIEF BIN JOHARI
NRIC No	S9149521Z
Email Address	RAJSEMPERFI92@GMAIL.COM
Mobile Phone No	(LOCAL) +65-81809042
Alternative Phone No	OTHERS-91289210
Vehicle Particulars	
Manufacturer	KAWASAKI
Model	1400GTR-1.4
Exact Purpose for which vehicle was being used at time of accident	HEADING BACK HOME FROM 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	MOTORCYCLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5108625131
Cover Note Number	
Driver	
Name of Driver	ARAVINDRAJ S/O MANOHAR
NPIC No	S0201502 I

NRIC No S9201592J
Date Of Birth 15/01/1992
Occupation OUTDOOR
Date Of Driving Pass 10/08/2018

Driving Experience 0 YEAR AND 8 MONTH

Gender MALE

Mobile Number (LOCAL) +65-91289210

Fax Number

Contact Number OTHERS-81809042

EMail Address RAJSEMPERFI92@GMAIL.COM

Address BLK 458 JURONG WEST STREET 41

#02-714

Postcode 640458

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured FRIEND

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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by NO

ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

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

BUKIT BATOK NEIGHBOURHOOD POLICE CENTRE

NO

NO

2

Police Station Address ROAD: 21 BUKIT BATOK EAST AVE 4, POSTCODE: 659840, COUNTRY:

SINGAPORE

Police Station Contact **TEL NO**: 1800-6659999 - **FAX NO**: 66655793

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN

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 GBC2698J

Vehicle Make/Model/Colour NISSAN NV200

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE

Name of Driver TEH KHOON SIAR

NRIC/Passport Number S1234327B Contact Number 96898491

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

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 interested parties.
- 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:
 - 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: Driver's Signature

(If driver is not the policyholder) Date & Time: 23/34/2019

1308 Pm

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN		
	norda civic	
	- FBK 517 U - HIWMEN	
	10 Sterior	
110010	10 10/	
BUKIT TIMBY	1 1 2638 Z	
DESCRIBE CIRCUMSTANCES	OF THE ACCIDENT	
On Monday 22 nd	April 2019 @ about 2100 hours I was queueing as the	friel
volviclo in bothseen	a phite hands civic and abe 2698 I The moffic light	+ pn
our end was ne	d and the troffic light on the opposing sides were	terning
from amber to rea	d signating that our side would change to green the	only.
	e traffic light on our end charged to green , GBL 21	
	ing forward and his frost left side of the bumper cam	
	s SIT U.S reor right crasbor and started to bend my crasbor	
	RAY SEO MANORAR, to chost tip over & fall to my left s	
	use every bit of strength to hold onto FBK Situ from	
		tolling
UN 111 GBC 264	8 J storted to reverse & dismount from my crossibar.	
DECLADATION		
DECLARATION /We declare the foregoing particu	alars are true in every respect.	
The state of the s	An	Q
Policyholder's Signature	23/04/201	1,
Oate & Time:	Driver's Signature (If driver is not the policyholder) Date & Time: 13,104/2019 NRIC/FIN No.:	is those

1308 pm.

POLICE REPORT

Annex D

NOTICE OF REPORTING

This is to confirm that Aravindraj S/O Manohar, NRIC S9201592J and hp: 81809042 has reported to the Police a traffic accident. The traffic accident does not consist of the below following criteria:

- i) Involvement with foreign vehicle
- ii) Involvement with Pedestrian/Cyclist
- iii) Involving parties obtained more then 3 days of Medical Leave
- iv) Government property damage
- v) Hit and Run Accident

The accident happened on 22/04/2019 at 2125hrs, the junction of Upper Bukit Timah Road and Hillview Avenue.

Involving the following vehicles:

- 1. FBK517U (Complainant)
- 2. GBC2698J (Other party)
- 2 If this accident was reported to the Police within 24 hours of its occurrence, then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: SSgt Mohamed Nasrudin

Date: 22/04/2019

Time: 2216hrs

S/D Ref: 125

Police Post/Unit: Bukit Batok NPC

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