

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	25/04/2019 12:23
Date Of Accident	23/04/2019 18:50
Exact Location Of Accident	SLE (BKE) -BEFORE MANDAI EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJS9893L
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Insured/Policyholder

Name Of Registered Owner	BRUNO DUNSTAN MATHEWS MIRANDA
NRIC No	S9237098D
Email Address	BRUNODUNSTAN@GMAIL.COM
Mobile Phone No	(LOCAL) +65-94595619
Alternative Phone No	OFFICE-94595619

Vehicle Particulars

Manufacturer	MAZDA
Model	3-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	ON THE WAY HOME
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	5098438071
Cover Note Number	EXP 22.6.19

Driver

Name of Driver	BRUNO DUNSTAN MATHEWS MIRANDA
NRIC No	S9237098D
Date Of Birth	06/10/1992
Occupation	INDOOR
Date Of Driving Pass	23/03/2015
Driving Experience	4 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-94595619
Fax Number	
Contact Number	OFFICE-94595619
EMail Address	BRUNODUNSTAN@GMAIL.COM

Name	BRUNO DUNSTAN MATHEWS MIRANDA
Approximate Age	26
Injuries Sustain	NECK PAIN
Injured person in which vehicle?	SJS9893L
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Address	BLK 864 WOODLANDS ST. 83, 06-206
Postcode	730864
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?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	YES
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 [OTHER]	WOODLANDS EAST NPC
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER POLICE REPORT ATTACH

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	SLW2308L
Vehicle Make/Model/Colour	MIT
Details Of Properties	FRONT
Vehicle Category	PRIVATE CAR
Name of Driver	EO KHAI CHIEN STANLEY
NRIC/Passport Number	S7534266G
Contact Number	96909083
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passengers (Including Driver)	

DETAILS OF INJURED PERSON 1

SKETCH PLAN

MT/ 1041735
VEHICLE NO.: SJS 9893L
INSURER : N7UC
DATE & TIME: 23/4/19 18.50 HRS

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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: 250419

Driver's Signature

(If driver is not the policyholder)

Date & Time:

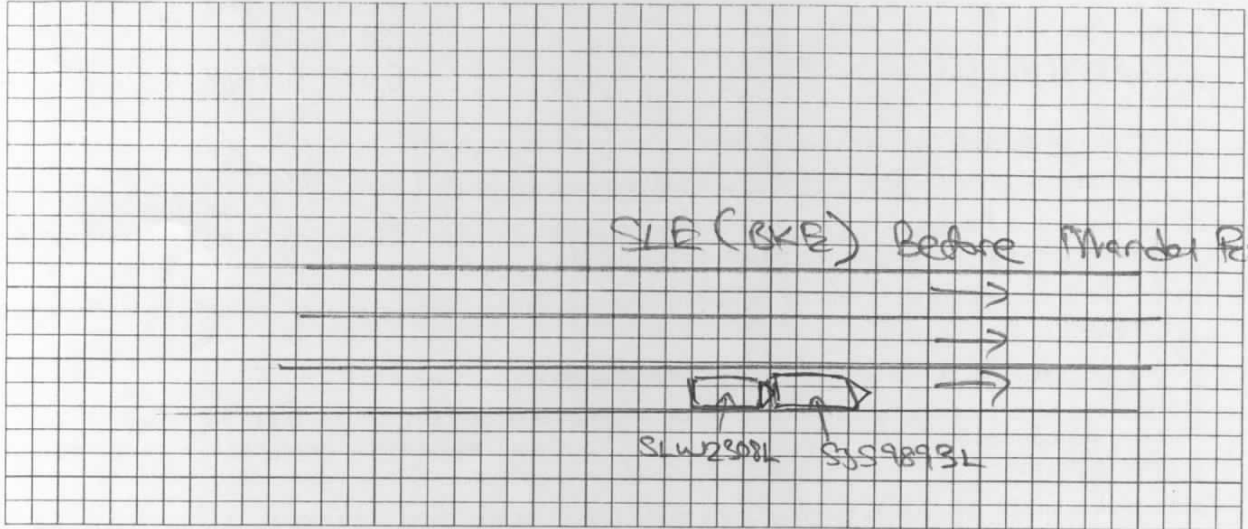


Reporting Centre Personnel's Signature

Name: W

NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ATTACHED TO POLICE REPORT

Note : Please note that your insurer may have 14days Time Frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check with your policy for more information.

DECLARATION

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

[Signature]

Policyholder's Signature

Date & Time: 25/04/19

Driver's Signature

(If driver is not the policyholder)

Date & Time:

[Signature] 25/4/19

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.: *[Signature]*

GIARMC SketchPlanForm_V3

() Claim Own Policy (☒) Claim Third Party () Reporting Only

() Claim OD/TP at other workshop ()



SINGAPORE POLICE FORCE



T/20190424/2042

1 of 3

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

Report No. T/20190424/2042

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/04/2019 11:59	Vide Report No.:	Station Diary No.: 76
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Informant's Particulars		
Name of Informant: BRUNO DUNSTAN MATHEWS MIRANDA		Address: APT BLK 864 WOODLANDS STREET 83 #06-206 SINGAPORE 730864
ID Type / ID No.: NRIC NO / S9237098D		Contact No.: Home/Office: Mobile: 94595619
Nationality: SINGAPORE CITIZEN		Email:
Sex: Male	Age: 26	Date of Birth: 06/10/1992
Race: Indian		Type of Informant: Driver
Occupation: SAF REGULAR		Language: Institution / School Name:
Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 23/04/2019 18:50	Type of Location: Straight Road
Location: Along Road 1 SELETAR EXPRESSWAY SLE(BKE) BEFORE MANDAI EXIT.				
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: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJS9893L	Car	MAZDA	MAZDA 3	Silver	Seriously Damaged	0
SLW2308L	Car	MITSUBISHI	ATTRAGE		Seriously Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJS9893L	NTUC Income Insurance Co-Operative Limited	5098438071	03/03/2018	22/06/2019



**SINGAPORE
POLICE FORCE**



T/20190424/2042

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

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Report No. T/20190424/2042

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:

L /

Sgt 2 JONATHAN LOW JIN HUA

SN 130

Signature Of Interpreter:

Not applicable

Singapore Police Force

Signature Of Informant:

Date/Time:

24/04/2019 11:59

Officer In Charge Of Case:

TP / AEIT /

Sgt 2 SHARIFAH NOR FARIZAN BINTE SYED

MOHD SAID

Contact No.: 65476172

Classification Of Case:

Authentication Stamp

NP168



**SINGAPORE
POLICE FORCE**



T/20190424/2042

Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

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Report No. T/20190424/2042

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	BRUNO DUNSTAN MATHEWS MIRANDA	ID No.	S9237098D
Related Vehicle	SJS9893L (Car)	Contact No.	94595619
Hospital/Clinic	KHOO TECK PUAT HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	23/04/2019	Date Discharge	23/04/2019
No. of Days granted Medical Leave	01	Degree of Injury	NIL
Driver			
Name	EO KHAI CHIEN STANLEY	ID No.	S7534266G
Related Vehicle	SLW2308L (Car)	Contact No.	96909083
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the 23/04/2019 at about 1850 hrs I (SJS9893L) was travelling along SLE (BKE) before Mandai Exit when a vehicle in front of me jammed braked, I managed to stop in time however the vehicle (SLW2308L) behind me could not stop in time and hit onto the rear of my vehicle.

After the accident we moved our vehicle to the side of the road and exchanged particulars, no ambulance or police were at scene. While exchanging particulars I experience neck pain and decided to go for a check up thereafter.

On the 23/04/2019 I went to KTPH and was given 1 day MC, on the 24/04/2019 I went to Temasek Medical Centre for further checks as my neck pain intensified and was given a further 2 days of MC. In total I received 3 days of MC from the 23/04/2019 to the 25/04/2019.