

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	10/05/2019 11:02
Date Of Accident	04/05/2019 13:35
Exact Location Of Accident	ALONG ANG MO KIO AVENUE 5 TOWARDS BUANGKOK GREEN
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBH707D
Insured/Policyholder	
Name Of Registered Owner	M/S MC2 PTE LTD
Co Reg No	5783M
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-63345880

Vehicle Particulars

Manufacturer	NISSAN
Model	NV350 PANEL VAN 2.5 5AT 5DR EURO V
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN1771301801
Cover Note Number	

Driver

Name of Driver	RAHMAN ATIKUR
Passport No/FIN	G3230022M
Date Of Birth	01/06/1994
Occupation	OUTDOOR
Date Of Driving Pass	09/07/2018
Driving Experience	0 YEAR AND 9 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-82503404
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	C/O 9 TAGORE LANE #02-16
Postcode	787472
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	COLLISION - HEAD TO REAR
Weather Conditions	DRIZZLING
Road Surface	WET

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?	
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	YISHUN NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 31 YISHUN CENTRAL , POSTCODE: 768827 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8529999 - FAX NO: 68522299
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN AND POLICE REPORT: T/20190505/2022.

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	SJN5995D
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
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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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:

10 MAY 2013

11:02 AM

GIA/IC SketchPlanForm_V3



Driver's Signature

(If driver is not the policyholder)

Date & Time:

10 MAY 2013

11:02 AM



Reporting Centre Personnel's Signature

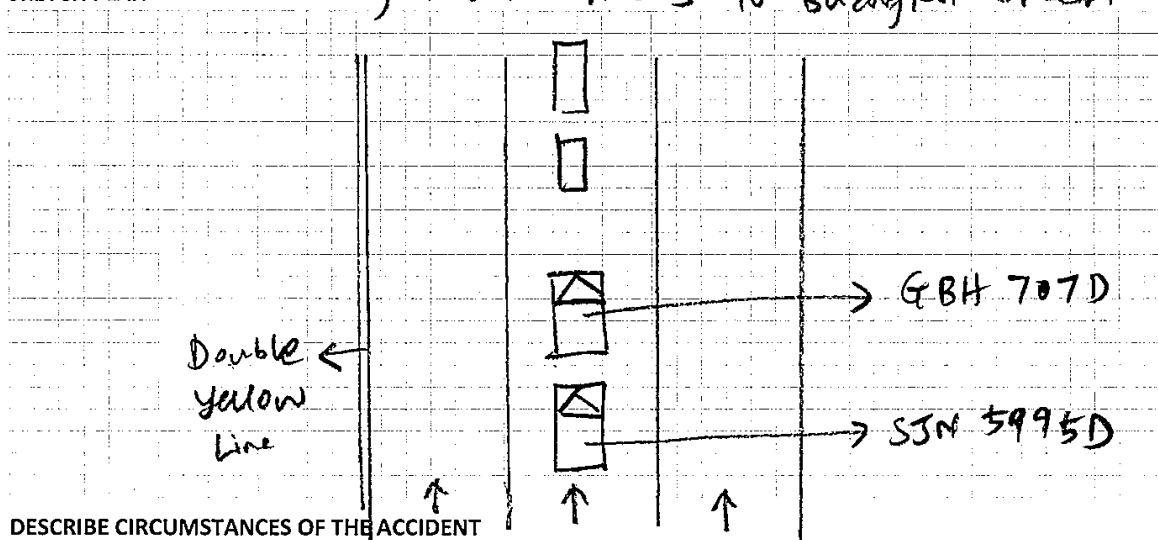
Name:

Don Kwee Choo

NRIC/FIN No. S6840583A

SKETCH PLAN

Ang Mo Kio Ave 5 to Buangkok Green



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report: T/20190505/2022

DECLARATION

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

Policyholder's Signature

Date & Time: 10 MAY 2019

CIARMC Speech Platform V2

Driver's Signature

(If driver is not the policyholder)

Date & Time: 10 MAY 2019

Reporting Centre Personnel's Signature

Name: **Pongwee Choo**
NRIC/FIN No.: **S6840583A**



**SINGAPORE
POLICE FORCE**



T/20190505/2022

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

1 of 3

Report No. T/20190505/2022

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/05/2019 09:52		Vide Report No.:		Station Diary No.: 58
Informant's Particulars				
Name of Informant: RAHMAN ATKUR		Address: APT BLK 9 SELEGIE ROAD #03-36 SELEGIE HOUSE SINGAPORE 180009		
ID Type / ID No.: FIN NO: / G3230022M		Contact No.: Home/Office: Mobile: 82503404		
Nationality: BANGLADESHI		Email:		
Sex: Male	Age: 24	Date of Birth: 01/06/1994	Type of Informant: Driver	
Race: Indian		Language: English	Institution / School Name:	
Occupation: CONSTRUCTION WORKER		Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 04/05/2019 13:35	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 ANG MO KIO AVENUE 5 BUANGKOK GREEN				
Weather: Drizzling		Road Surface: Wet	Road Speed Limit:	
Traffic Flow:		Traffic Control: Traffic Light - Working	Traffic Volume: Heavy	
Type of Collision: Moving Vehicle Against Stationary Vehicle - Head to Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No	Type	Make	Model	Color	Condition	No. of Passenger
GBH707D	Van	NISSAN	NV350 PANEL VAN 2.5 5AT 5DR EURO V	Silver	Slightly Damaged	0
SJN5995D	Car	MITSUBISHI	OUTLANDE R 2.0 CVT SUNROOF	White		0



**SINGAPORE
POLICE FORCE**



T/20190505/2022

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

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Report No. T/20190505/2022

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	RAHMAN ATIKUR	ID No.	G3230022M
Related Vehicle	GBH707D (Van)	Contact No.	82503404
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
Driver			
Name	TAY CHEE KWANG	ID No.	S1390857E
Related Vehicle	SJN5995D (Car)	Contact No.	91720088
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 04/05/2019 at about 1335hrs, I was driving my company van bearing registration plate no. GBH707D along Ang Mo Kio Avenue 5 towards Buangkok Green on lane 2 (middle lane). During which, my vehicle was stationary and there were a few cars ahead of me. Suddenly, I felt an impact on the rear left portion of my vehicle. I then alighted to make a check and discovered that another car bearing registration plate no. SJN5995D had collided into my vehicle. No Traffic Police or Ambulance was called to scene as nobody was injured at the point of time.

I wish to state that I have an in-car camera installed in my company van however it is not recording as the memory card storage is full. I further state that due to the impact, my vehicle sustained damages such as broken left tail lamp and a dislodged rear bumper. I am lodging this report for my company record purpose. That is all.



**SINGAPORE
POLICE FORCE**



T/20190505/2022

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

3 of 3

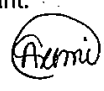
Report No. T/20190505/2022

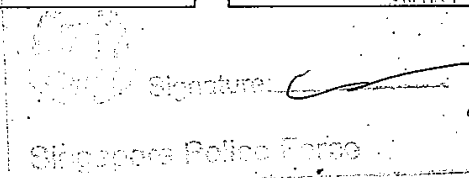
CONTINUATION OF REPORT

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 1 RICKSON ONG KIAN MENG	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 05/05/2019 09:52
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:
Authentication Stamp NP168	SN 005



CERTIFICATE OF INSURANCE Pg. 1



中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Co. Reg. No. 200208384E

MZ300/C
R SN
AN0633A
Cov.Type: C

MOTOR COMMERCIAL VEHICLE

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)

ORIGINAL

CERTIFICATE No. DMCVSN1771301801

Engine No :YD25422184A
ChaNo:JN1MC2E26Z0008576

1. Index Mark and Registration
Number of Vehicle

GBH707D

2. Name of Policy Holder

M/S MC2 PTE LTD

3. Effective date of the Commencement of
Insurance for the purposes of the Regulations,
Ordinance or Enactment

29 December 2018

Excess Sect I S\$350.00
EX ON WINDSCREEN S\$100.00

4. Date of Expiry of Insurance

28 December 2019

5. Persons or Classes of Persons entitled to drive*

Any person who is driving on the Policyholder's order or with their 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:

- (1) Use in connection with the Policyholder's business.
 - (2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
 - (3) Use for social, domestic or pleasure purposes.
- The Policy does not cover.
- (1) Use for hire or reward or racing, pace-making, reliability trial or speed testing.
 - (2) Use whilst drawing a trailer except the towing of any one disabled mechanically propelled vehicle.

HIRE PURCHASE CO. : ETHOZ CAPITAL LTD AS HP OWNER

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (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.

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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: SKYLINK INSURANCE AGENCY PTE LTD
Authorised Officer

.....
Authorised Signatory

3 Anson Road #16-00 Springleaf Tower Singapore 079909 Tel: 6389 6111 Fax: 6225 3592 Website: www.sg.cntaiping.com

DRIVER'S WORK PERMIT + DRIVING LICENCE Pg. 1

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **G3230022M**
Name: **RAHMAN ATIKUR**

Birth Date: **01 Jun 1994**
Issue Date: **09 Jul 2018**
Valid Till: **08/07/2023**

002821712B

S PASS
Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore

Employer: **ALTO CONSTRUCT PTE. LTD.**

Name: **RAHMAN ATIKUR**
S Pass No.: **0 64173758**
Sector: **CONSTRUCTION**

K0896027

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

	EFFECTIVE DATE
Class 3 Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles with unladen weight \leq 2500kg	09 Jul 2018

Licence No: G3230022M

NP 428A

VISIT PASS
Immigration Regulations

Name: **RAHMAN ATIKUR**

FIN: **G3230022M**
Date of Birth: **01-06-1994** Sex: **M**
Nationality: **BANGLADESHI**

MULTIPLE JOURNEY VISA ISSUED

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU.

Download SGWorkPass App to check status

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Chassis Number

