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	15/05/2019 15:11			
Date Of Accident	14/05/2019 15:15			
Exact Location Of Accident	TECK WHYE AVENUE GOING INTO JALAN TECK WHYE T-JUNC			
Country/State of Loss	SINGAPORE			
DETAILS OF OWN VEHICLE				
Vehicle Registration Number	GBG140T			
Insured/Policyholder				
Name Of Registered Owner	ROBINSON CAR RENTAL PTE LTD			
Co Reg No	-			
Email Address	FAUZIAH_JABBAR@CERTISGROUP.COM			
Mobile Phone No	(LOCAL) +65-98552521			
Alternative Phone No	OFFICE-98552521			
Vehicle Particulars				
Manufacturer	NISSAN			
Model	-			
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	MS FIRST CAPITAL INSURANCE LTD			
Type Of Coverage	COMPREHENSIVE			
Fleet Policy	NO			
Policy Number	D-19093213MFCV/21			
Cover Note Number				
Driver				
Name of Driver	FAUZIAH JILL BINTE JABBAR MRS JILL MASHADI			

NRIC No S9025652A

Date Of Birth 23/07/1990

Occupation OUTDOOR

Date Of Driving Pass 30/01/2013

Driving Experience 6 YEARS AND 3 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-98552521

Fax Number

Contact Number OTHERS-98552521

EMail Address FAUZIAH JABBAR@CERTISGROUP.COM

Address BLK 815A CHOA CHU KANG AVENUE 7

#11-13

Postcode 681815

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - HIRER

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

ambulance?

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

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?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

PLS REFER TO THE ATTACHED STATEMENT.

Attachment(s)

Are accident photos available for attachment? YES
Was there any video captured by Car Camera? YES
Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number FU1515T

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category MOTORCYCLE

Name of Driver MOHAMAD NAZARY BIN TAMBY

NRIC/Passport Number S1337331J Contact Number 84350020

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Page 2 of 26

SKETCH PLAN

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
- Information provided must be as truthful and accurate as possible. Any witful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
- 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 faise reporting may be referred to the Police for investigation.
- 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.
- 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)
 - 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:
 - 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.

SO SENT

Policyholder's Signature Date & Time

Driver's Signature -

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name: NRIE/FIN No

TCH PLAN	Per to the P	Hacked	
- PIS Re	Per to		
CRIBE CIRCUMSTANCES O	F THE ACCIDENT	a Hacke	2
	Der	to Ke	
9/5			
RATION CONTRACTOR PARTICULAR	are true in every respect		
der's Standture	Driver's Signature (if driver is not the policyholder) Date & Time:	Reporting Centre Perspanel's Si	15 5 20

Date/Time of Accident: Tuesday, 14 May 2019,1519hrs

Place of Accident: Teck Whye Avenue going into Jalan Teck Whye T- Junction

Vehicle Number: GBG 140 T Reported Officer: Fauziah Jabbar

Summary

On the above mentioned date and time, I was waiting behind a car for my turn at the Teck Whye Avenue main road to Turn Right into Jalan Teck Whye at the T-Junction small lane. I have also signalled right to indicate my intention to turn right. After the car in front had Turn Right, I waited again to let an incoming car to pass through. After which, I've checked and ensure that there's no more incoming traffic, I proceeded to Turn Right. I was already almost entering Jalan Teck Whye when I felt an impact on my right side near driver seat. I then learnt that it was Honda Phantom FU1515T, was actually from Jalan Teck Whye turning right into Teck Whye Avenue. He collided and fell. It happened so fast and that he even manage to get up and moved his motorcycle even before I was able to get down from the van to take photos. As there were many incoming traffic, I then proceeded to drive forward into Jalan Teck Whye and stopped my vehicle there to settle the issue. The rider, Mohamad Nazary Bin Tamby of \$1337331J admitted that it was his fault. He mentioned that he was blur and unaware of my van coming into Jalan Teck Whye. He also added that he just got his license which was recently suspended and that he pleaded for me not to report the incident. After checking, he also mentioned that he was not injured and his bike was not damaged whereas the van was dented at the right side door. I was not injured as well. We then parted ways and he was also informed that I have to report the incident as I was driving company's vehicle. He also agreed for it to be claim under insurance as he mentioned he has no money to settle privately.

I have video footage of the incident and the sketch for your reference. Thank you,



A-GBG140T B-FULSIST

St. S.





Driver Licence change Name warting?





\$ old Driver Licences and Whiting for new Driver Licences for Name change?



TRAFFIC POLICE SINGAPORE POLICE FORCE 10, UBI AVENUE 3 SINGAPORE 408865 Tel: 65470000 www.police.gov.sg

Private & Confidential

FAUZIAH JILL BINTE JABBAR

APT BLK 815A CHOA CHU KANG AVENUE 7 #11-13 SINGAPORE 681815 You will receive your photocard drivlicence by registered post within 10 to working days from the tate of applica unless you made a special request to co at Traffic Police at the time of application

You can drive while awaiting the deliof your photocard driving licence

Please turn overleaf for important notes.

S9025652A (3A) C001481585

\$25/-

YOU CAN DRIVE WHILE AWAITING THE DELIVERY OF YOUR PHOTOCARD

29/04/2019

(Please do not detach)

DRIVING LICENCE.

IMPORTANT NOTES

 To check the delivery status of your photocard driving licence, you may visit the following webpage

http://www.police.gov.sg/e-services

FOR NEW DRIVING LICENCE HOLDER

- 2. Your driving licence is now placed on one-year probation.
- Please be reminded that your driving licence will be revoked for a period of one-year if you fail to display the P-plate sign twice or accumulated 13 or more demerit points within the first 12 months from the date your driving licence was issued.
- If your driving licence is revoked, you are required to pass the prescribed tests of competency (theory and practical) before you can be issued with a new driving licence.

(Please do not detach)

SENIS

SETOTAL: SETERATE OF THE SETE

APPROVED

NETS

































