

## 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	15/05/2019 15:01
Date Of Accident	14/05/2019 21:45
Exact Location Of Accident	CHANGI SOUTH AVENUE 2 NEAR TO ONE CHANGI CITY
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMK5980B
<b>Insured/Policyholder</b>	
Name Of Registered Owner	GRACE AUTO LEASING
Co Reg No	53387089E
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-96985643

### Vehicle Particulars

Manufacturer	TOYOTA
Model	WISH-1.8 (A)
Exact Purpose for which vehicle was being used at time of accident	
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5104594233
Cover Note Number	

### Driver

Name of Driver	MUHAMAD AL-HAFIZ BIN NORDIN
NRIC No	S8329093E
Date Of Birth	20/09/1983
Occupation	INDOOR
Date Of Driving Pass	06/01/2005
Driving Experience	14 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87764822
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 103 RIVERVALE WALK #02-82
Postcode	540103
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	PAID DRIVER
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

#### General Information of the Accident

Type Of Accident	COLLISION - CROSS JUNCTION
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	ANG MO KIO SOUTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 81 ANG MO KIO AVE 3 , <b>POSTCODE:</b> 569929 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-4519999 - <b>FAX NO:</b> 65535679
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

Refer to police report No.: T/20190515/2039.

#### 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	SHD9056P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
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	MUHAMAD AL-HAFIZ BIN NORDIN
Approximate Age	36
Injuries Sustain	
Injured person in which vehicle?	SMK5980B
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	BLK 103 RIVERVALE WALK #02-82
Postcode	540103

**SKETCH PLAN**

**IMPORTANT NOTICE**

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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:

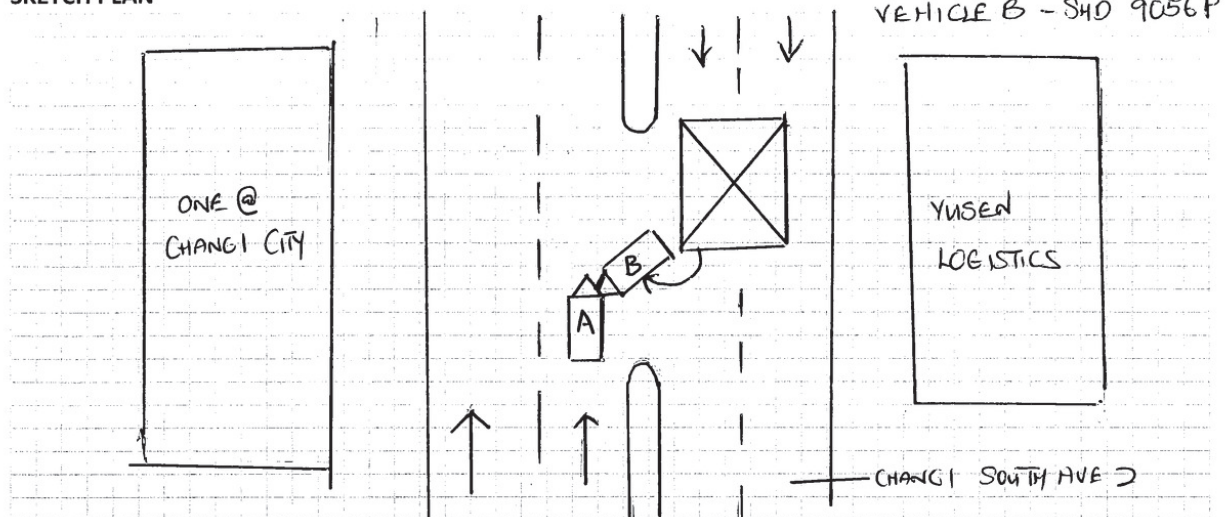
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:



Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

## Sketch Plan Pg. 2

### SKETCH PLAN



**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

AS PER POLICE REPORT , T|20190515|2039 , (AMK SOUTH NPC)

## DECLARATION

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

Policyholder's Signature

Date &amp; Time:

Driver's Signature

(If driver is not the policyholder)

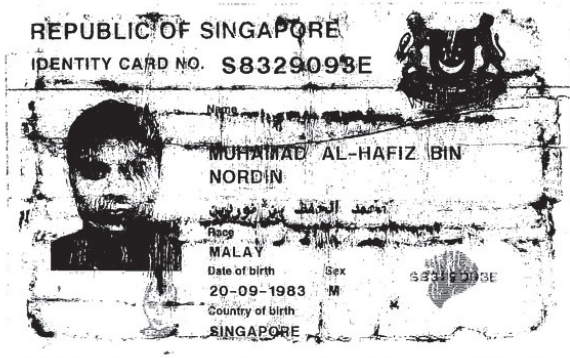
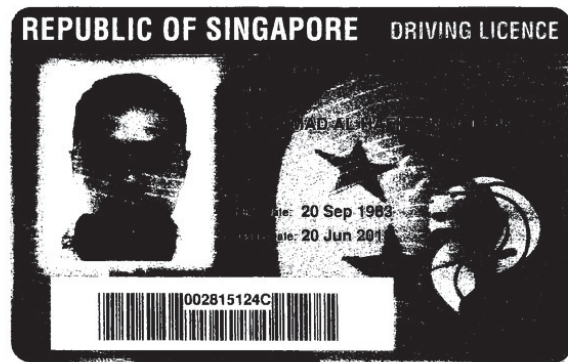
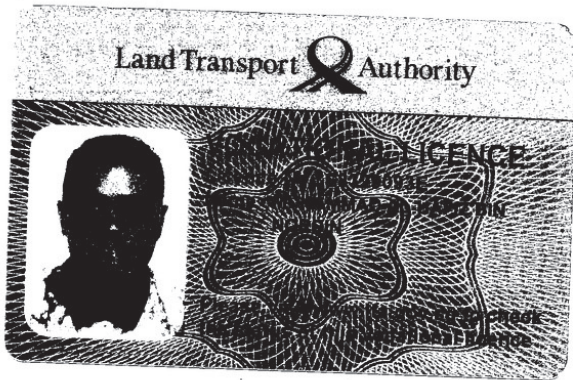
Date & Time.

Reporting Centre Personnel's Signature

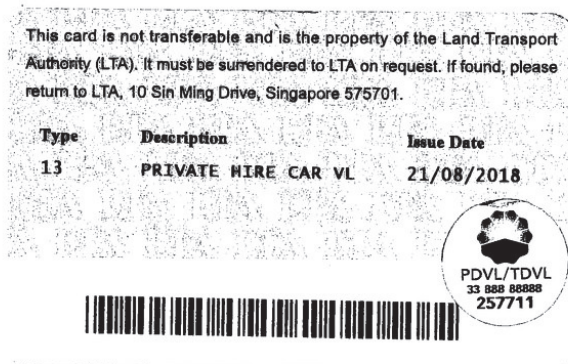
Name:

NRIC/FIN No.:



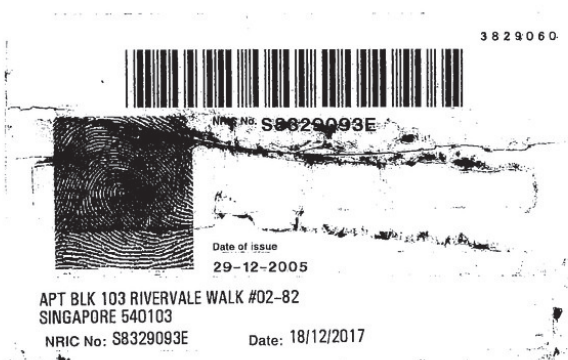


87764822



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	06 Jan 2005

NP 428A





**SINGAPORE  
POLICE FORCE**



T/20190515/2039

1 of 3

Police Station Of Origin:  
Ang Mo Kio South N.P.C  
81 Ang Mo Kio Avenue 3 SINGAPORE  
569929  
Tel No: 1800-4519999

Report No. T/20190515/2039

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 15/05/2019 10:32		Vide Report No.:		Station Diary No.: 51	
<b>Informant's Particulars</b>					
Name of Informant: MUHAMAD AL-HAFIZ BIN NORDIN			Address: APT BLK 103 RIVERVALE WALK #02-82 SINGAPORE 540103		
ID Type / ID No.: NRIC NO / S8329093E			Contact No.: Home/Office: Mobile: 87764822		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 35	Date of Birth: 20/09/1983	Type of Informant: Driver		
Race: Malay		Language: English		Institution / School Name:	
Occupation: GOJEK DRIVER		Driving Licence Information: Class: 3 Date of Expiry:			

<b>General Information of the Accident</b>				
Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 14/05/2019 21:45	Type of Location:
Location: Along Road 1 CHANGI SOUTH AVENUE 2  NEAR TO ONE CHANGI CITY				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision: Between Moving Vehicles - Head On				Anyone conveyed by ambulance: No

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No. of Passenger
SMK5980B	Car				Seriously Damaged	0

<b>Details of Person Involved</b>	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





**SINGAPORE  
POLICE FORCE**



T/20190515/2039

2 of 3

Police Station Of Origin:  
Ang Mo Kio South N.P.C  
81 Ang Mo Kio Avenue 3 SINGAPORE  
569929  
Tel No: 1800-4519999

Report No. T/20190515/2039

**CONTINUATION OF REPORT**

Driver			
Name	MUHAMAD AL-HAFIZ BIN NORDIN	ID No.	S8329093E
Related Vehicle	SMK5980B (Car)	Contact No.	87764822
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	15/05/2019	Date Discharge	15/05/2019
No. of Days granted Medical Leave	04	Degree of Injury	NIL

**Brief Details.**

On the 14/05/2019 at about 2147hrs, I was driving in my vehicle bearing registration plate number SMK5980B along Changi South Avenue 2 on the most right lane when suddenly one vehicle bearing registration plate number SHD9056P made an illegal U-Turn from the opposite lane when I didnt have enough time to stop and collided onto him. It was a head to head collision. I came on the front left side of my vehicle as I couldn't open my driver's door and noticed that the whole front, front left side and driver's door of the vehicle is damaged. The driver admitted that he was in the wrong and penned down that he will bear all the consequences on a A4 paper and passed it to me. The name of the taxi driver is - Oh Yew Tiong bearing NRIC S7639059C contact 93894274. There is also a front in built car camera that is functioning and the footage has been captured however is in the car and its at my workshop.

On the 15/05/2019 I proceeded to Mount Alvernia Hospital as my neck and my back was in pain. I was given a total of 4 days of MC.





**SINGAPORE  
POLICE FORCE**



T/20190515/2039

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Report No. T/20190515/2039

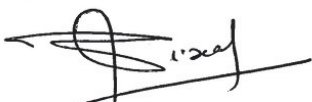

Police Station Of Origin:  
Ang Mo Kio South N.P.C  
81 Ang Mo Kio Avenue 3 SINGAPORE  
569929  
Tel No: 1800-4519999

## 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: F / Sgt 2 CHEE JIN RONG, CLEMENT	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 15/05/2019 10:32
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No : 65476151	Classification Of Case:
<div style="display: flex; justify-content: space-between; align-items: center;"> <div data-bbox="226 1870 478 1926">           Authentication Stamp NP168         </div> <div data-bbox="287 1825 774 2058" style="border: 1px solid black; padding: 5px;">  Singapore Police Force         </div> <div data-bbox="686 1870 774 1904">           SN 085         </div> </div>	