

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 GI&A 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	13/05/2019 20:22
Date Of Accident	17/04/2019 19:00
Exact Location Of Accident	KJE TOWARD BKE AT EXIT WOODLANDS ROAD T JUNCTION
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJS4246M
Insured/Policyholder	
Name Of Registered Owner	SRS AUTO HOLDINGS PTE. LTD.
Co Reg No	201709236H
Email Address	SHAHAIMI160877@GMAIL.COM
Mobile Phone No	(LOCAL) +65-87423653
Alternative Phone No	OFFICE-87423653

Vehicle Particulars

Manufacturer	NISSAN
Model	LATIO
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5107022314
Cover Note Number	

Driver

Name of Driver	MOHAMAD SHAHAIMI BIN MD SHARIF
NRIC No	S7722427J
Date Of Birth	16/08/1977
Occupation	OUTDOOR
Date Of Driving Pass	04/09/2001
Driving Experience	17 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87423653
Fax Number	
Contact Number	OTHERS-87423653
Email Address	SHAHAIMI160877@GMAIL.COM

Address	BLK 602 JURONG WEST STREET 62 #02-181
Postcode	640602
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	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?	NO
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?	NO
If Yes, Please state which Police Station	
Was notice of Intended Prosecution given?	NO
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	SKL1276X
Vehicle Make/Model/Colour	HYUNDAI ELANTRA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	YE JIAN WEI
NRIC/Passport Number	S2680237G
Contact Number	98521640
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

SKETCH PLAN

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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.

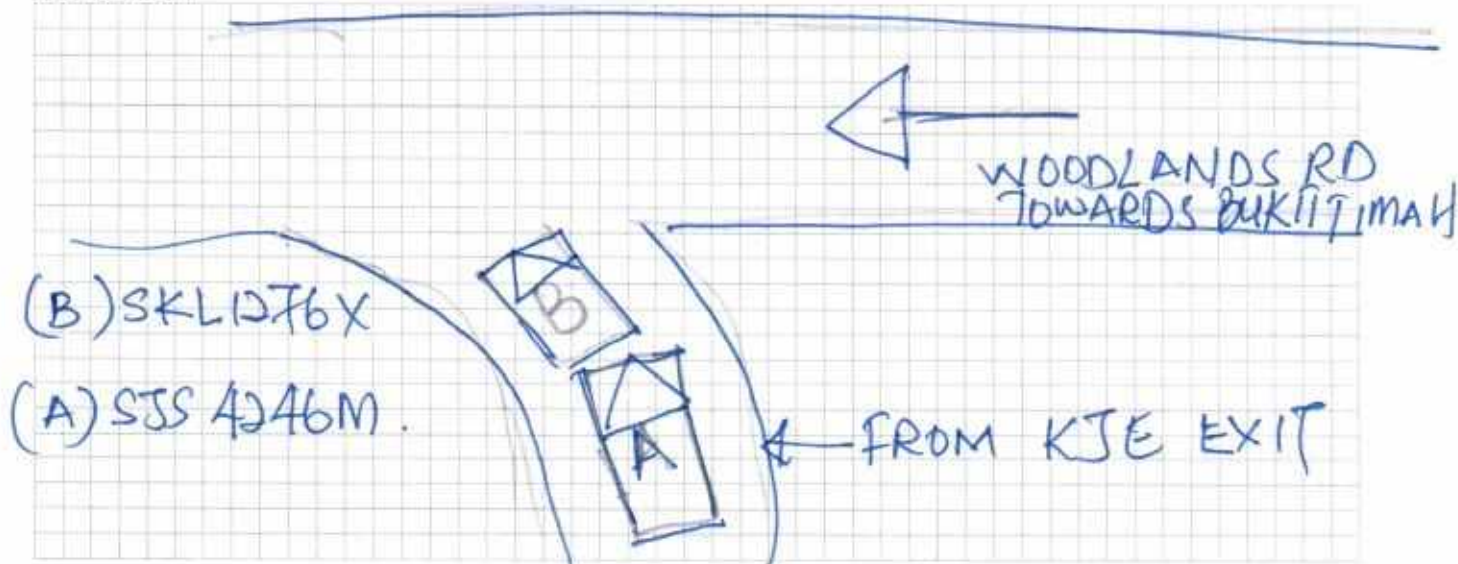


Policyholder's Signature
Date & Time:

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

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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 17th APRIL 2019 @ ABOUT 7 PM, I WAS DRIVING ALONG KJE (TOWARDS BKE) EXIT NEAR TO WOODLANDS ROAD (TOWARDS BUKIT TIMAH), AT THE FILTER LANE, I WAS STOPPING AT FIRST. WHEN THE FRONT VEHICLE MOVED (SKL 1276X) I ALSO MOVED. AS I WAS CHECKING MY BLINDSPOT AT THE ONCOMING LANE ON THE RIGHT, I ~~TURN~~ TURN BACK TO LOOK INFRONT AND I SAW THE FRONT VEHICLE BRAKE SUDDENLY BEFORE THE STOP SIGN, I IMMEDIATELY BRAKE BUT COULDN'T BRAKE IN TIME AND I HIT HIS BACK BUMPER. WE EXCHANGE PARTICULAR AND WE DECIDED ON PRIVATE SETTLEMENT.

DECLARATION

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



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.:

Claim Handling

Accident MT/1042465

Policy No.	5107022314	Vehicle No.	5154246H	GST Registration No.	201709236H
Certificate No.					
Policyholder Name	SRS AUTO HOLDINGS PTE. LTD.			Policyholder NRIC	201709236H
Product Code	PRIVATE CAR INSURANCE	Cover Type	Third Party	Leading	0
Contact No.(Mobile)	NA	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KPI	No	TCA	No	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	Not available
Accident Details					
Report Date	30/04/2019 17:58	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Head to Rear
Date of Accident	17/04/2019	Time of Accident (h:mm)	18:55	Country of Accident	Singapore
Reporting Centre		Grange Force		ICM No.	
Accident Location	KOE TOWARD SKE AT EXIT WOODLANDS ROAD T JUNCTION				
Excess					
Own damage Excess	0.00	Additional Excess	0	Windscreen Excess	0.00
Unnamed Driver Excess		Outside Singapore OD Excess	0.00		
Third Party Excess	1,500.00	Outside Singapore TP Excess	1,500.00		
Benefits					
GST Registered Information					
GST Registered	Yes	GST Registration Date	01/09/2017		
GST Registration No.	201709236H	GST Status Verified	Yes		
Modification History	30/04/2019 18:00:19 System changed GST Registration No. from NA to 201709236H 30/04/2019 18:00:19 System changed GST Registration Date from 01/01/2015 to 01/09/2017 30/04/2019 18:00:19 System changed GST Status Verified from No to Yes				
Policyholder Mailing Address					
Address 1	60 UBI CRESCENT	Address 2	#01-01	Address 3	SINGAPORE 408569
Address 4		Address Type	Singapore address	Post Code	408569
Unit No.		Related Policy Number	5108747045		
Q1 Driver Info					
Driver Name		Driver Type		Driver DOB	
Unnamed driver Name		Driver NRIC		Driving Experience	
Register Date of Driver License		Driver Age		Contact No.(Home)	
Contact No.(Mobile)		Contact No.(Office)		Address 1	
Address 1		Address 2		Address 3	
Address 4		Address Type	Foreign address	Post Code	
Unit No.					
Does he own a Singapore Registered car?	Yes	Driver Vehicle No.		Driver Insurer Company	

Modification History

Claim 002 New

Claim Type *	OD-MX	Insured Name	SRS AUTO HOLDINGS PTE. LTD.	Insured NRIC	201709236H
Contact No.(Mobile)		Contact No.(Home)		Contact No.(Office)	65482444
Email Address		Q1 Vehicle Number	5154246H	TP Vehicle Number	SKL1276X
Claim Description	5154246H / SKL1276X ON 17 Apr 2019			Name of Preferred Workshop	
Preferred Workshop		Insured Liability	Fully at fault		
Reason for Rejection	Yes	Report Option	Preferred Workshop, Name unknown	GIA report	Received
Date Registered				Claim Close Date	22/05/2019 14:17
Report Taken By				Date Received	22/05/2019 00:00
Print AK letter					

Save Submit

Attachment

Accident No.	MT/1042465	Claim No.	002		
LAST Doc. Received	Yes No	Upload Date	22/05/2019 14:18		
Path *		Category *	Confidential	Urgency *	Description *
Choose File	No file chosen	Clear	Please Select	NO	Normal
Choose File	No file chosen	Clear	Please Select	NO	Normal
Choose File	No file chosen	Clear	Please Select	NO	Normal
Choose File	No file chosen	Clear	Please Select	NO	Normal
Choose File	No file chosen	Clear	Please Select	NO	Normal
Choose File	No file chosen	Clear	Please Select	NO	Normal
Message Read					Send Message

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent? (CO)
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 May 2019 14:18	Photos	Normal	Photos 2019-5-22	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 May 2019 14:18	Photos	Normal	Photos 2019-5-22	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 May 2019 14:18	Photos	Normal	Photos 2019-5-22	
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 May 2019 14:18	Photos	Normal	Photos 2019-5-22	

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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 May 2019 14:18	Photos	Normal	Photos 2019-5-22
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 May 2019 14:17	Photos	Normal	Photos 2019-5-22
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 May 2019 14:17	Photos	Normal	Photos 2019-5-22
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 May 2019 14:17	Photos	Normal	Photos 2019-5-22
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 May 2019 14:17	SAS	Normal	SAS 2019-5-22
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 22 May 2019 14:17	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-5-22

Video List

Uploaded By/Date	Folder Date	File Name	Source	Action
		Display in New Window	Scan and uploading	

ACCIDENT STATEMENT

ACCIDENT DATE: 17/4/2019 (DD/MM/YYYY), TIME: 19:00 (HH:MM)

LOCATION: KJE (opp woodlands rd)

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SJS 4246M
 b) INSURANCE COMPANY: NIUC
 c) POLICY NUMBER: 5107022314
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: NISSAN LATID
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: DRIVING
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- a) NAME: SRS AUTO HOLDINGS P/L (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
 c) ADDRESS: _____

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: Mohdhan Sirajuddin Bin M. Sharif (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S77224271 CONTACT: 87423653
 c) ADDRESS: BK 602 Jurong West St. 62 #02-181

* d) DATE OF BIRTH: 16/08/1977 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS 2004

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: RENTAL

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: _____

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: SKL 1276X MODEL: ELANTRA
 b) DRIVER'S NAME: YE JIAN WEI
 c) NRIC/FIN/PASSPORT: S26802376 CONTACT: 98521640

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: SKL 1276X MODEL: ELANTRA
 e) DRIVER'S NAME: _____
 f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

email = shaharmi160877@gmail.com
 VIDEO

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7722427J



Name
MOHAMAD SHAHAIMI BIN MD SHARIF
محمد شاهيمي بن محمد شريف

Race
JAVANESE

Date of Birth
15-08-1977

Sex
M

Country of Birth
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S7722427J

Name
MOHAMAD SHAHAIMI BIN MD SHARIF

Birth Date: 15 Aug 1977

Issue Date: 17 Nov 2003

Barcode

NAME NO. S7722427J

Expiry Date
21-08-2011

AP. 60 JURONG WEST STREET 02
SINGAPORE 640602

THE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CATEGORIES

CLASS	VEHICLE TYPE	EXPIRY DATE
Class 2B	Motorcycles <= 200 CC	12 Nov 1997
Class 2A	Motorcycles between 201 CC and 400 CC	02 Aug 1999
Class 2	Motorcycles > 400 CC	15 Jun 2004
Class 3	Motor cars <= 3500 kg with <= 7 passengers, exclusive of the driver; and motor tractors/vehicles <= 2500 kg	04 Sep 2001
Class 4	Heavy motor cars and motor tractors > 2500 kg	08 Jul 2005
Class 5	Motor vehicles > 7250 kg not constructed to carry any load	22 Jan 2008

S7722427J

S / No. 9000068012

Licence No: S7722427J

P 428A

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)

Certificate Number: 5107022314

Cover : Third Party

1. Index mark and Registration Number of Vehicle : **SJS4246M**
Chassis Number : **JN1BAAC11Z0021321**
2. Name of Policyholder : **SRS AUTO HOLDINGS PTE. LTD.**
3. Effective Date of Insurance : **15 Jan 2019**
4. Expiry Date of Insurance : **14 Aug 2019**
5. Persons or Classes of Persons entitled to drive#
(a) The Policyholder.
(b) Any other person who is driving on the Policyholder's order or with his/her 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#
(a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

This Policy does not cover

- (a) Use for racing, pace-making, reliability trial or speed-testing.
- (b) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (c) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

EXCESS (SECTION 1)	: N/A
EXCESS (SECTION 2)	: S\$1,500
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: N/A
NCD PROTECTION	: NO
PRIMARY DRIVER	: N/A
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: N/A

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)

Agency : **SININS AGENCY PTE. LTD. (00000615123)**
Date of Issue : **14 Jan 2019 14:41 hrs**

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Countersigned By:



Authorised Officer



Chief Executive