

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	28/05/2019 13:33
Date Of Accident	27/05/2019 14:00
Exact Location Of Accident	BISHAN RD TRAFFIC JUNC WITH BISHAN ST 21
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	GV6527J
Insured/Policyholder	
Name Of Registered Owner	COTTON CARE
Co Reg No	52943438E
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-67477844
Vehicle Particulars	
Manufacturer	TOYOTA
Model	LITEACE
Exact Purpose for which vehicle was being used at time of accident	WORKING
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 FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5045697475-08
Cover Note Number	-
Driver	
Name of Driver	MUHAMMAD IBRAHIM BIN HARON
NRIC No	S8304638D
Date Of Birth	28/02/1983
Occupation	OUTDOOR
Date Of Driving Pass	25/05/2010
Driving Experience	9 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96484379
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 431D YISHUN AVE 1 #06-609
Postcode	764431
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	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?	
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

I STOP BEHIND VEH B AT THE TRAFFIC JUNC OF BISHAN RD & BISHAN ST 21 DUE TO RED LIGHT, MY VEH ACCIDENTALLY ROLLED FORWARD TOUCH ONTO VEH B REAR PORTION. NO SERIOUS DAMAGE ON OUR BOTH VEH.

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	SGE2229K
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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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.



COTTON CARE

80236918 / 81301018 / 8747784

53 Lbi Ave 1 #01-29 Pava US

ark S408934

http://www.cottoncare.com.sg

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

Bishan St 21

Bishan St 11

Bishan Rd

A = 5V 6527J
B = 5GE2229K

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please Refer to statement

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.:

REPUBLIC OF SINGAPORE
 MY CARD NO. S8304638D



Name
MUHAMMAD IBRAHIM BIN HARON

Race
MALAY

Date of birth
28-02-1983

Sex
M

Country of birth
SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number **S8304638D**

Name
MUHAMMAD IBRAHIM BIN HARON

Birth Date **28 Feb 1983**

Issue Date **25 May 2010**




001860012A



NRIC No. **S8304638D**



Date of issue
14-10-2004

APT BLK 4310 YISHUN AVENUE 1 #06-809
 SINGAPORE 764431


NRIC No: **S8304638D**

Date: **17/03/2015**


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

EFFECTIVE DATE

Class 3 Motor Cars \leq 3000kg with \leq 7 passengers, exclusive of the driver; and other motor vehicles \leq 2500kg **25 May 2010**



NP 428A



Licence No: **S8304638D**

Hello, NAC_PAYA_UBI_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)**Policy Query**

Policy No. Date of Accident
Vehicle No.(For Motor) Certificate Number

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5045697475-08		COTTON CARE	52943438E	GCV	Third Party, Fire & Theft	GV6527J	GV6527J	01/10/2018	30/09/2019

Claim Handling

Accident MT/1046559

Policy No.	5045697475-08	Vehicle No.	GV6527J	GST Registration No.	
Certificate No.					
Policyholder Name	COTTON CARE			Policyholder NRIC	529430
Product Code	COMMERCIAL VEHICLE INSURANCE	Cover Type	Third Party, Fire & Theft	Loading	0
Contact No.(Mobile)	67477844	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	TCA	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	eCode Reason	
NCD Protection	No	NCD Entitlement(%)	0	Private Hire	Yes
Accident Details					
Report Date	28/05/2019 17:31	Accident Report Within 24 hrs	Yes	Accident Type	Collision
Date of Accident	27/05/2019	Time of Accident hh:mm	14:00	Country of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	BISHAN RD TRAFFIC JUNC WITH BISHAN ST 21				
Excess					
Own damage Excess	0.00	Additional Excess		Windscreen Excess	0.00
Unnamed Driver Excess		Outside Singapore OD Excess			
Third Party Excess	0.00	Outside Singapore TP Excess			
Benefits					
GST Registered Information					
GST Registered	No	GST Registration Date		GST Status Verified	Yes
GST Registration No.					
Modification History					
Policyholder Mailing Address					
Address 1	53 UBI AVENUE 1	Address 2	#01-29 PAYA UBI INDUSTRIAL F	Address 3	SINGAPORE
Address 4		Address Type	Singapore address	Post Code	408930
Unit No.	01-29	Related Policy Number	S087968406-02		
OI Driver Info					
Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB	28/02/1980
Unnamed driver Name	MUHAMMAD IBRAHIM BIN HARC	Driver NRIC	S8304638D	Driving Experience	9
Register Date of Driver License	25/05/2010	Driver Age	36	Contact No.(Home)	
Contact No.(Mobile)	96484379	Contact No.(Office)		Contact No.(Home)	
Address 1	BLK 431D #06-609	Address 2	YISHUN AVENUE 1	Address 3	VISTA
Address 4	SINGAPORE 764431	Address Type	Singapore address	Post Code	764430
Unit No.	06-609				
Does he own a Singapore Registered car?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Driver Vehicle No.		Driver Insurer Company	
Declaration					
Breathalyser or Blood Test Reading?	0 mg	Any injury?	<input type="radio"/> Yes <input checked="" type="radio"/> No		

Modification History

Claim 001 **New**

Claim Type *	OD-MX	Insured Name	COTTON CARE
Contact No.(Mobile)		Contact No. (Home)	
Email Address		Vehicle Number	GV6527J
Claim Description	GV6527J / SGE2229K ON 27 May 2019		
Preferred Workshop	0	Insured Liability	Fully at Fault
Preferred Repair Option	Yes	Preferred Workshop, Name unknown	GIA report
Date Registered	28/05/2019 17:34	Received	
Report Taken By	LEW SHAN HUI	Claim Close Date	
<input checked="" type="checkbox"/> Print AK letter			

Save Submit

Attachment

Accident No. MT/1046559

Claim No. 001

Last Doc. Received

☒ Yes ☐ No

Upload Date

28/05/2019 17:35

Path *

Choose File No file chosen

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Message Read

Clear

Category *

Please Select ▼

Confidential

NO ▼

Urgency *

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NO ▼

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Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 28 May 2019 17:35	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-5-28
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 28 May 2019 17:35	SAS	Normal	SAS 2019-5-28
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 28 May 2019 17:35	Photos	Normal	Photos 2019-5-28
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 28 May 2019 17:34	Photos	Normal	Photos 2019-5-28
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 28 May 2019 17:34	Photos	Normal	Photos 2019-5-28
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	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 28 May 2019 17:34	Photos	Normal	Photos 2019-5-28

Video List

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