

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	01/06/2019 15:55
Date Of Accident	31/05/2019 11:20
Exact Location Of Accident	ALONG ANN SIANG ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGM5461T
Insured/Policyholder	
Name Of Registered Owner	JUN EXPRESS GROUPS PTE. LTD.
Co Reg No	201420728H
Email Address	ADMIN@MYCAR.SG
Mobile Phone No	(LOCAL) +65-92270221
Alternative Phone No	OFFICE-93899756

Vehicle Particulars

Manufacturer	TOYOTA
Model	WISH
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	THIRD PARTY
Fleet Policy	NO
Policy Number	5106686396
Cover Note Number	

Driver

Name of Driver	JAS MAHAJAS BIN ABDUL KARIM
NRIC No	S7305038C
Date Of Birth	08/02/1973
Occupation	OUTDOOR
Date Of Driving Pass	15/07/1988
Driving Experience	30 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92270221
Fax Number	
Contact Number	OTHERS-93899756
Email Address	ADMIN@MYCAR.SG

Address	166B PUNGGOL CENTRAL #02-135
Postcode	822166
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

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)	2
Passenger 1	NAME: : PASSENGER GENDER: : MALE

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?	YES
Remarks/ Reasons:	WITH DRIVER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLJ5538M
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:

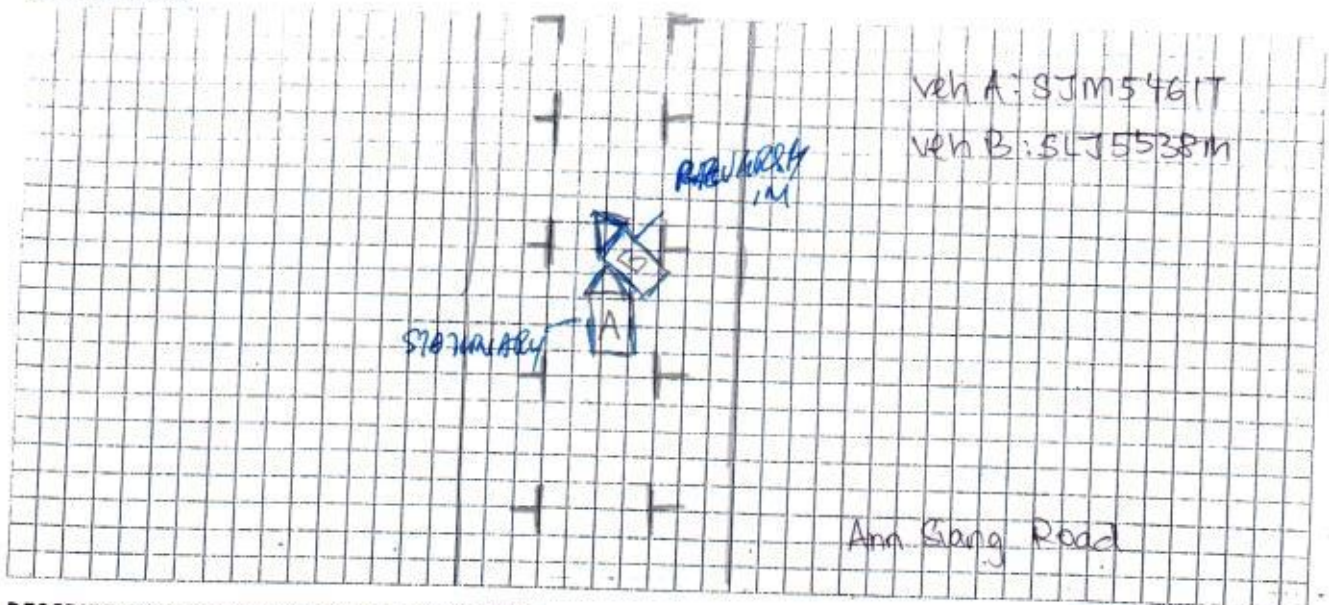
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.


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



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated time & date

I was driving my vehicle SJM5461T on Ann Siang Road. The driver in front of me kept to the right and stopped so I stopped my vehicle too. He wanted to park at the right lot. My vehicle behind got other vehicle which I couldn't reverse. I only could stationery my vehicle. So he didn't check and just reverse and hit onto me.

My car was stationery.

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/1047194

Policy No.	5106686396	Vehicle No.	SGM5461T	GST Registration No.
Certificate No.				
Policyholder Name	JUN EXPRESS GROUPS PTE. LTD.			Policyholder NRIC
Product Code	PRIVATE CAR INSURANCE	Cover Type	Third Party	Loading
Contact No.(Mobile)	92270221	Contact No.(Office)		Contact No.(Home)
Email Address		Special Remark		eCode
KFK	<input type="radio"/> No <input type="radio"/> Yes	TCA	<input type="radio"/> No <input type="radio"/> Yes	eCode Reason
NCD Protection	No	NCD Entitlement(%)	0	Private Hire

▼ Accident Details

Report Date	01/06/2019 16:05	Accident Report Within 24 hrs	Yes	Accident Type
Date of Accident	31/05/2019	Time of Accident hh:mm	11:20	Country of Accident
Reporting Centre		Orange Force		ICM No.
Accident Location	ALONG ANN SIANG ROAD			

▼ Excess

Own damage Excess	0.00	Additional Excess	0	Windscreen Excess
Unnamed Driver Excess		Outside Singapore OD Excess	0.00	
Third Party Excess	1,000.00	Outside Singapore TP Excess	1,000.00	

▼ Benefits

▼ GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History	01/06/2019 16:08:49 System changed GST Status Verified from No to Yes		

▼ Policyholder Mailing Address

Address 1	68 KAKI BUKIT AVENUE 6	Address 2	#02-08 ARK@KB	Address 3
Address 4		Address Type	Singapore address	Post Code
Unit No.	01-16	Related Policy Number	5109407575	

▼ O1 Driver Info

Driver Name	Unnamed Driver	Driver Type	Unnamed Driver	Driver DOB
Unnamed driver Name	JAS MAHAJAS BIN ABDUL KARIN	Driver NRIC	S7305038C	Driving Experience
Register Date of Driver License	15/07/1998	Driver Age	46	Contact No.(Home)
Contact No.(Mobile)	93899756	Contact No.(Office)		Address 3
Address 1	BLK 166B #02-135	Address 2	PUNGOL CENTRAL	Post Code
Address 4		Address Type	Foreign address	
Unit No.	02-135			
Does he own a Singapore Registered car?	<input type="radio"/> Yes <input checked="" type="radio"/> No	Driver Vehicle No.	SGM5461T	Driver Insurer Comp.

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	JUN EXPR
Contact No.(Mobile)	81383333	Contact No. (Home)	NIL
Email Address	junexpressgroups@gmail.com	O1 Vehicle Number	SGM5461
Claim Description	SGM5461T / SLJ5538M ON 31 May 2019		
Preferred Workshop	Yes	Insured Liability	Not at Fault
Contract No. Finalisation	Repair Option	Preferred Workshop, Name unknown	GIA report
Date Registered	01/06/2019 16:09	Received	
Report Taken By	ROSLI WAHAB	Claim Close Date	
<input checked="" type="checkbox"/> Print AK letter			

Save

Submit

Attachment

Accident No.	MT/1047194	Claim No.	001
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	01/06/2019 16:13

Choose File	No file chosen	<div>Clear</div> <div>Clear</div> <div>Clear</div> <div>Clear</div> <div>Clear</div> <div>Clear</div>	Category *	Confidential
Choose File	No file chosen		Please Select	NO
Choose File	No file chosen		Please Select	NO
Choose File	No file chosen		Please Select	NO
Choose File	No file chosen		Please Select	NO
Choose File	No file chosen		Please Select	NO
Message Read				

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Descr
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 01 Jun 2019 16:13	NRIC/ Driving License	Normal	NRIC/ Driving L
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 01 Jun 2019 16:13	SAS	Normal	SAS 2f
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 01 Jun 2019 16:13	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 01 Jun 2019 16:13	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 01 Jun 2019 16:09	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 01 Jun 2019 16:09	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 01 Jun 2019 16:09	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 01 Jun 2019 16:09	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 01 Jun 2019 16:09	Photos	Normal	Photos 2
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 01 Jun 2019 16:09	Photos	Normal	Photos 2

Video List

Uploaded By/Date

Folder Date

File Name

Display in New Window

Scan and uploading

Date of Accident : 31 May 2019 Accident Time: 1121am (24-HR-Format)
Accident Place : Ann Siang Road
Vehicle Reg. No. (Car Plate No.) : SIM 1178 SGM 5461T
Vehicle Make/Model : Toyota Wish
Insurance Company : NTUC Policy No. _____
Owner or Company Name / IC No. : Jun Express
Owner or Company Contact No. : 92270221 Owner's Hp _____ Company Tel _____
DRIVER'S Name / IC No. : Jas Mahajas Bin Abdul Karim
DRIVER'S Date Of Birth : 08-02-1973 DRIVER'S License Pass Date 15-Jul 1998
Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: Rental
DRIVER'S Address : 166B Punggol Central #02-135 s' (822166)
DRIVER'S Contact No / Alt No. : 1) 93899756 2) _____
DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)
Email Address : Admin@MyCar.sg
Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET
Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance
Number of Passengers (Including Driver): 2 (male passenger) *No Injury.
Was there any video Captured by car camera: YES \ NO
Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose

Other Party Driver's Particular (if any)

Vehicle Reg. No: SLJ5538M	Vehicle Reg. No: _____
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name Driver: _____	Name Driver: _____
IC No. Driver: _____	IC No. Driver: _____
Driver's Contact & Add: _____	Driver's Contact & Add: _____

31521

S7305038C

JAS MAHAJAS BIN ABDUL KARIM

166B PUNGGOL CENTRAL
#02-135
SINGAPORE 822166

S7305038C
08.02.1973
(M) INDIAN
SKH

AP1 BLK 166B PUNGGOL CENTRAL SINGAPORE 822166

NRIC No: S7305038C Date: 03-12-2003 No: 4828414

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7305038C

JAS MAHAJAS BIN ABDUL KARIM

جس ماہاجس بن ابڊول کاریم

Race: BENGALI
Date of Birth: 08-02-1973 Sex: M
Country of Birth: SINGAPORE

S7305038C

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

Class	Description	PASS DATE
Class 2B	Motorcycles not exceeding 200 cc	19 Oct 1995
Class 2A	Motorcycles between 201 cc and 400 cc	09 Sep 1997
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	15 Jul 1998

Licence No: S7305038C

NP 428A

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S7305038C

JAS MAHAJAS BIN ABDUL KARIM

Birth Date: 08 Feb 1973
Issue Date: 23 Oct 2003

100947294K

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to the LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
02	TAXI VL	04/06/2004
03	BUS VL	08/05/2000
04	BUS ATTENDANT	08/05/2000

Land Transport Authority

PDVL/TDVL
31 888 8888
281607

VOCATIONAL LICENCE

Licence No: S7305038C
Name: JAS MAHAJAS B ABD KARIM
Issue Date: 28/4/2017

Please visit www.lta.gov.sg to check the status of this vocational licence

For LKK/NAC Use Only

Hello, NAC_PAYA_UBI_800601

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

Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="31/05/2019 15:53"/>
Vehicle No.(For Motor)	<input type="text" value="SGM5461T"/>	Certificate Number	<input type="text"/>
<input type="button" value="Search"/>			

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input checked="" type="radio"/>	5106686396		JUN EXPRESS GROUPS PTE. LTD.	201420728H	GPC	Third Party	SGM5461T	SGM5461T	28/12/2018	27/12/2019