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.

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	ACCIDENT STATEMENT	
Date Of Report	29/05/2019 18:11	
Date Of Accident	28/05/2019 07:15	
Exact Location Of Accident	BEDOK RESERVOIR ROAD SLIP ROAD	
Country/State of Loss	SINGAPORE	
	DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJJ5751L	
Insured/Policyholder		
Name Of Registered Owner	ASLAM SYED ZARRAR	
Passport No/FIN	G0715551X	
Email Address	NOEMAIL	
Mobile Phone No	(LOCAL) +65-91808142	
Alternative Phone No	OFFICE-91808142	
Vehicle Particulars		
Manufacturer	TOYOTA	
Model	AXIO-1.5 X (A)	
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	THIRD PARTY	
Vehicle Category	PRIVATE CAR	
Insurance Company		
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD	
Type Of Coverage	THIRD PARTY	
Fleet Policy	NO	
Policy Number	5103750540	
Cover Note Number		
Dulican		

Driver

Name of Driver ASLAM SYED ZARRAR

Passport No/FIN G0715551X
Date Of Birth 21/12/1974
Occupation INDOOR
Date Of Driving Pass 08/10/2015

Driving Experience 3 YEARS AND 7 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-91808142

Fax Number

Contact Number OFFICE-91808142

EMail Address NOEMAIL

Address 2 BEDOK RESERVOIR VIEW #07-02

THE CLEARWATER

Postcode 479232

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OWNER

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?

Was any injured conveyed to hospital by ambulance?

NO YES

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

3

Passenger 1

NAME: : UNKNOWN

GENDER: : FEMALE

Passenger 2 NAME: : UNKNOWN

GENDER: : FEMALE

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

REFER TO STATEMENT

Attachment(s)

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

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SKU1426H

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 Pg. 1

SKETCH PLAN

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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			< Common
			B = SKU 142611
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	olib III		
Bed			
Yescry	2) 4		
DESCRIBE CIRCUMSTANCES	OF THE ACCIDENT		
PESCHIBE CINCOMSTAIVEES	THE ACCIDENT		Av3, 9 stopped m my right side, there was an u bumped in to ck bumper badly is be checked after
AT around	07:15hrs on	28" May	2019 9 was
ariving or	bedok res	lervoir n	sad, upon reaching
the slip	, wad to be	dok north	AV3, 9 Stopped
as a bu	s was pas	rsing from	n my right side,
from may	in road . Si	udden ly	there was an
Im pect	from behind	, a co	u bumped in to
ne from	bact side.		, A
	No gryunes,	My 69	ck bumper badly
danage	d - More dan	ages to	be checked after
removing	s bumper.		D
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ECLARATION			· · · · · · · · · · · · · · · · · · ·
We declare the foregoing partic	ulars are true in every respect.		10
(52/5/92	(5)102	** 4 • ** 4	Car .
olicyholder's Signature	Driver's Signature	ė	Reporting Centre Personnel's Signature

(If driver is not the policyholder)

Date & Time:

Name:

NRIC/FIN No.:

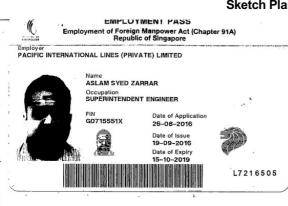
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Date & Time:

GIARMOS teloupiaV3

Page 5 of 14

Sketch Plan #3 Pg. 1





BER 2 Bedolf Reservoir View #107-02 The Clear Water 5(479232)

> pussenge 2 gir. HIP: 91808142 My Clean

VISIT PASS

Name ASLAM SYED ZARRAR



Date of Birth Se: 21-12-1974 M

PAKISTANI

Date of Issue 130715551X 19-09-2016

Date of Expire 15-10-2019

MULTIPLE JOURNEY VISA ISSUED

YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLE OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU



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

EFFECTIVE DATE

Class 3 Motor Cars =< 3000kg with =<7 passengers, exclusive 08 Oct 2015 of the driver; and other motor vehicles =< 2500kg

Licence No:G0715551X

NP 428A















