

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	10/06/2019 09:20
Date Of Accident	19/03/2019 16:50
Exact Location Of Accident	SERANGOON RD TWDS BALESTIER
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLC9543H
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Insured/Policyholder

Name Of Registered Owner	SUPREME LEASING & LIMOUSINE PTE LTD
Co Reg No	53287737C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-86836000

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL 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	PRIVATE HIRE

Insurance Company

Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	18-MH001493-R02
Cover Note Number	

Driver

Name of Driver	JOHAN HISHAM BIN IBRAHIM
NRIC No	S7233747F
Date Of Birth	01/08/1972
Occupation	OUTDOOR
Date Of Driving Pass	17/10/2006
Driving Experience	12 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82505230
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 336 BUKIT BATOK ST 32 #05-305
Postcode	650336
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?	YES
If Yes, Please state which Police Station	
Police Station Name	EUNOS NPP
Police Station Address	ROAD: 629 BEDOK RESERVOIR ROAD #01-1620 , POSTCODE: 470629 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT:G/20190531/2109

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	SLP7861J
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)

Accident Sketch Plan

SKETCH PLAN

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3. 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:

 10/06/19
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please find attached documents as requested.
Driver was unco-operative, kindly direct to driver.

Note: Please note that your insurer may have 14 days time frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check your policy for more information.

DECLARATION

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



Policyholder's Signature
Date & Time:

CARPONE (SINGAPORE) LTD

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

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

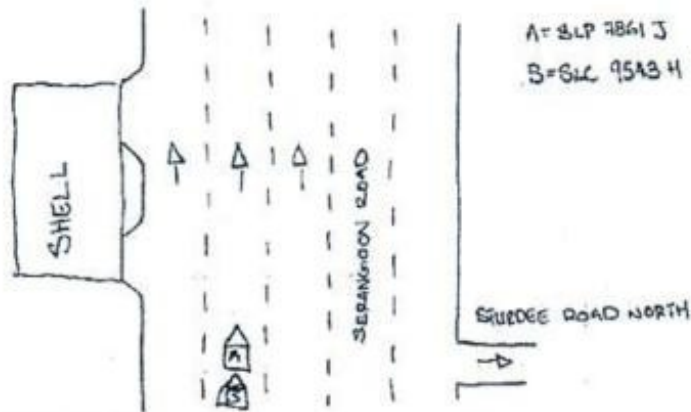
TP SKETCH PLAN



SKETCH PLAN

Sketch Plan #2

TP



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 19/03/19, at about 1850hrs, I was driving my vehicle, SLP 7861 J, along Seungoon Road towards Beledier. As the traffic was congested and the light was red, I had my vehicle stopped for over 30 seconds. When suddenly, there was a bad fluid coming from the rear portion of my vehicle. Nobody was injured.

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: 18/03/19
18/3/19

Reporting Centre Personnel's Signature
Name: EAFU
NRIC/ID No

Individual Statement



**SINGAPORE
POLICE FORCE**



G/20190531/2109

1 of 2

POLICE REPORT (NP299)

Report No. G/20190531/2109

Police Station Of Origin
Eunos NPP
629 Bedok Reservoir Road #01-1620
SINGAPORE 470629
Tel No: 1800-4439999

Date/Time Report Made 31/05/2019 16:17	Vide Report No.	Station Diary No. 28
Name Of Informant ALAN CHIA TECK SHENG	Address APT BLK 175A YUNG KUANG ROAD #19-05 SINGAPORE 611175	
ID Type / ID No. NRIC NO / S7421227A	Contact No. Home/Office	Mobile 86836000
Nationality SINGAPORE CITIZEN	Email Address	
Occupation MANAGER	Sex Male	Age 44
Institution/School Name	Date of Birth 03/07/1974	Race Chinese
Date/Time Of Incident 28/05/2019 18:00 - 31/05/2019 16:00	Location Of Incident APT BLK 785 WOODLANDS RISE WOODLANDS PASTURE II SINGAPORE 730785 Multi-Storey Carpark	

Brief details.

On 28/05/19 at about 1000hrs, my company towed our rental vehicle, a silver colour Toyota Altis bearing plate number SLC9543H from Blk 785 Woodlands Rise multi-storey carpark as the hirer was unable to repay the rental charges. The hirer has at times defaulted his monthly payments and failed to report an accident on 19/03/19 which involved the vehicle. He made a partial payment a few months ago, and promised to pay off the remaining instalments at a later date. Even though multiple requests have been

Signature Of Officer Recording The Report: G / Staff Sgt NG ZHENG YANG	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 31/05/2019 16:17
Officer In-Charge Of Case: G / Bedok Police Divisional Investigation Branch / Staff Sgt MOHAMAD RAFEEQ BIN HAJI MOHAMAD RASHID Contact No.: 62447200	Classification Of Case:
Authentication Stamp 	

Individual Statement



**SINGAPORE
POLICE FORCE**



G/20190531/2109

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20190531/2109

made known to the hirer to settle his outstanding payments, he ignored calls and messages from the company to do so.

I am lodging this report for my company's record purposes and to follow up on any legal action that we might take against him.

Subjects Involved			
Defendant			
Person Name	JOHAN HISHAM BIN IBRAHIM		
ID Type	NRIC NO	ID No	S7233747F
Gender	Male	Age	47
Nationality	SINGAPORE CITIZEN	Race	Javanese
Address Type	Apt Blk	Address	APT BLK 336 Bukit Batok Street 32 #05-305 SINGAPORE 650336
Mobile No	82505230		

Signature Of Officer Recording The Report: G / Staff Sgt NG ZHENG YANG
Signature Of Interpreter: Not applicable
Officer In-Charge Of Case: G / Bedok Police Divisional Investigation Branch / Staff Sgt MOHAMAD RAFEEQ BIN HAJI MOHAMAD RASHID Contact No.: 62447200
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Signature Of Informant:
Date/Time: 31/05/2019 16:17
Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



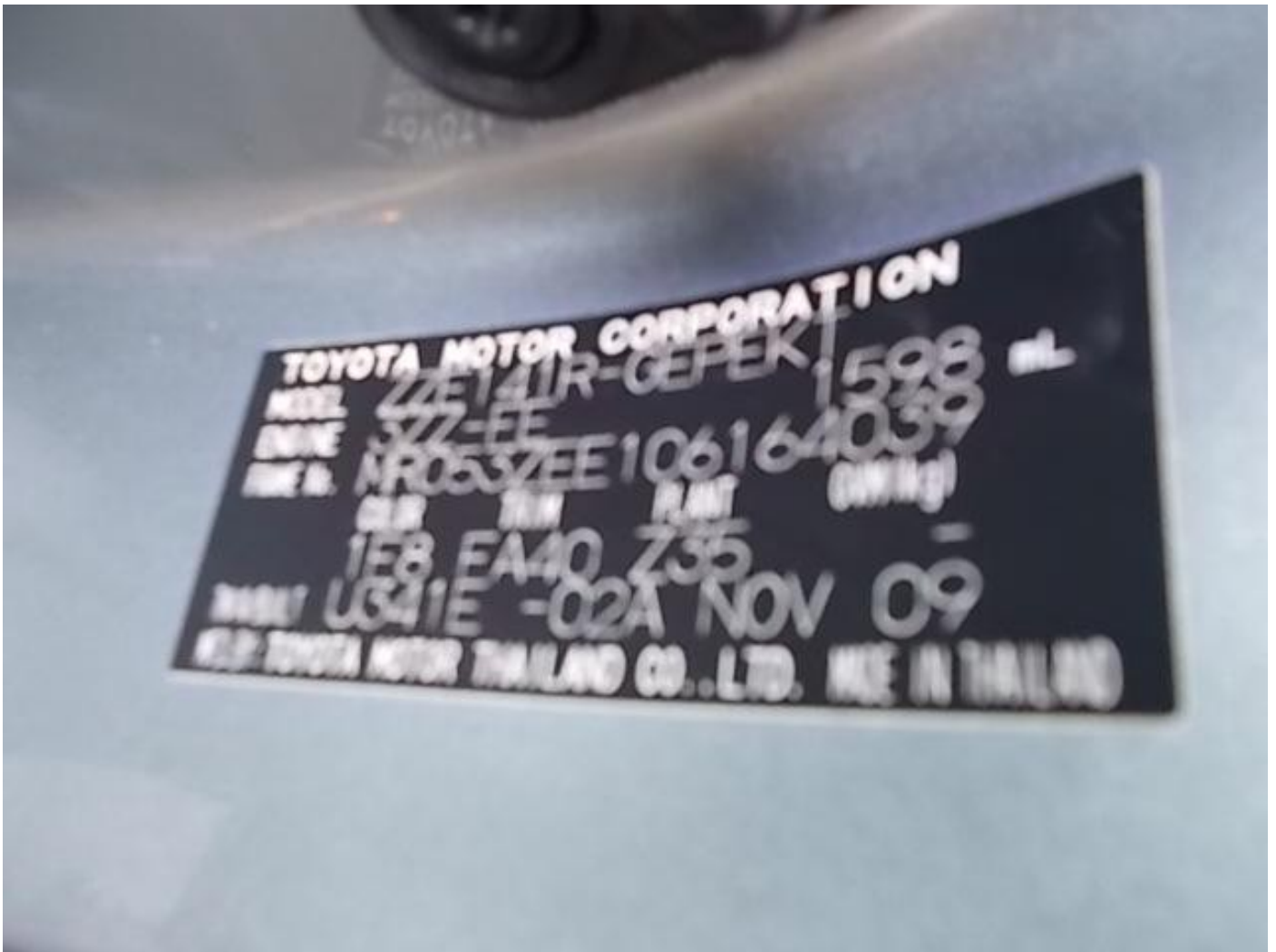
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Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



0/20190531/2109

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Institution/School Name		Language			
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Police Report



**SINGAPORE
POLICE FORCE**



G/20190531/2109

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Identification Card

DRIVER
SC95731

REPUBLIC OF SINGAPORE
Identification Card S7233747F



 Name
JOHAN HISHAM BIN IBRAHIM

Race
JAVANESE

Date of birth
01-08-1972

Sex
M

Country/Place of birth
SINGAPORE

 S7233747F

REPUBLIC OF SINGAPORE DRIVING LICENCE

 Licence Number **S7233747F**

Name
JOHAN HISHAM BIN IBRAHIM

Birth Date: **01 Aug 1972**

Issue Date: **24 Apr 2015**

 002419945J

Driving License

DRIVER
SLC9143H

5402567



S7233747F



Date of issue
04-12-2014

Address
APT BLK 338 BUKIT BATOK STREET 32
#05-205
SINGAPORE 650336

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

	EFFECTIVE DATE
Class 2B Motorcycles <= 200 cc	26 Jun 1989
Class 2A Motorcycles between 201 cc and 400 cc	22 Apr 2006
Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles <= 2500kg	17 Oct 2006
Class 4 Motor vehicles which are constructed to carry load or passengers and the unladen weight > 2500kg	16 Jun 2009
Motor vehicles which are not constructed to carry load and the unladen weight < 7250kg	

NP 428A

Licence No: S7233747F

