### 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

atoresaid.	
	ACCIDENT STATEMENT
Date Of Report	11/06/2019 17:07
Date Of Accident	11/06/2019 13:15
Exact Location Of Accident	ALONG JALAN BUKIT MERAH NEAR ESSO STATION
Country/State of Loss	SINGAPORE
D	ETAILS OF OWN VEHICLE
Vehicle Registration Number	GZ7468T
Insured/Policyholder	
Name Of Registered Owner	QALAAMULLAH BIN MOHAMED FAHIM
NRIC No	S8740100F
Email Address	QALAAM.MNM@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98250149
Alternative Phone No	OTHERS-98250149
Vehicle Particulars	
Manufacturer	SSANGYONG
Model	MUSSO SPORT AT 4X2
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 FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5095121962-01
Cover Note Number	
Driver	
Name of Driver	QALAAMULLAH BIN MOHAMED FAHIM

Name of Driver QALAAMULLAH BIN MOHAMED FAHIM

NRIC No S8740100F
Date Of Birth 12/12/1987
Occupation INDOOR
Date Of Driving Pass 11/12/2009

Driving Experience 9 YEARS AND 6 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98250149

Fax Number

Contact Number OTHERS-98250149

EMail Address QALAAM.MNM@GMAIL.COM

**BLK 52 LENGKOK BAHRU** Address

#07-299

Postcode 150052

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** 

**COLLISION - HEAD TO REAR** Type Of Accident

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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

NO

2

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)

1

**Details of Police Action** 

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name **BUKIT MERAH WEST NPC** 

ROAD: 500 BUKIT MERAH VIEW #01-01, POSTCODE: 159682, Police Station Address

**COUNTRY: SINGAPORE** 

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

NO

### **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 NO

Was there any audio recorded?

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

SBX2U Vehicle Registration Number **AUDI A4** Vehicle Make/Model/Colour

**Details Of Properties** 

PRIVATE CAR Vehicle Category

Name of Driver

NRIC/Passport Number

96353564 **Contact Number** 

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Passenger 1 NAME:

GENDER: :

2

#### **Accident Sketch Plan**

#### SKETCH PLAN

### IMPORTANT NOTICE

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- 5. Any false reporting may be referred to the Police for investigation.
- The 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.
- 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:
  - 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.
  - 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:

11/05/2019

Driver's Signature

(If driver is not the policyholder)

11 / 06 / 2019

16:50

Reporting Centre Personney's Signature

NRIC/FIN No.-

## **Accident Sketch Plan**

A.	- JALAN BIKM MAROY	A) G274
J (B)	A	B) SBX 2
58X2V	RO	
DESCRIPT CINCULARIZATION OF	The spe test plan such plans	
DESCRIBE CIRCUMSTANCES OF	THE ACCIDENT	0
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RV		
DECLARATION		
I/We declare the foregoing particula	ars are true in every respect.	/11

## **POLICE REPORT**





Police Station Of Origin: Bukit Merah West N.P.C 500 Bukit Merah View #01-01 SINGAPORE 159682 1 of 3 Report No. T/20190611/2109

Tel No: 1800-3779999

### REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/06/2019 16:21		/lade:	Vide Report No.:	Station Diary No.: 38	
Informa	nt's Partic	ulars	The state of the state of	<b>可能而多之外是國際主義的</b> 第二	
	Informant: MULLAH BI	N MOHAMED	Address: APT BLK 52 LENGKOK BAH	RU #07-299 SINGAPORE 150052	
	/ ID No.: D / \$87401	OOF	Contact No.: Home/Office: Mobile: 98250149		
Nationality: SINGAPORE CITIZEN		EN	Email:		
Sex: Male	Age: 31	Date of Birth: 12/12/1987	Type of Informant: Driver		
Race: Indian			Language: English	Institution / School Name:	
Occupation: SCDF OFFICER			Driving Licence Information: Class: 2B,2A,2,3,4	Date of Expiry:	

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 11/06/2019 13:1	Type of Location Straight Road	
Location: Along Road 1 JALAN BUKIT		0			
Weather: Ro		Road Surface: Dry		Road Speed Limit:	
		Traffic Control: Traffic Light - Wo	rking	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
GZ7468T	Pick-up truck	SSANGYONG	MUSSO 4X2 AT	Silver	No Damage	0
SBX2U	Car				No Damage	1

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
GZ7468T	NTUC Income Insurance Co-Operative Limited	5095121962-01	25/02/2019	24/02/2020

#### POLICE REPORT



T/20190611/2109

Police Station Of Origin: Bukit Merah West N.P.C 500 Bukit Merah View #01-01 SINGAPORE

2 of 3 Report No. T/20190611/2109

Tel No: 1800-3779999

CONTINUATION OF REPORT

## Brief Details.

On 11/06/2019 at about 1315hrs, I was driving my vehicle bearing registration no. GZ7468T (V1) and exiting Jalan Bukit Merah ESSO petrol kiosk. I then came to a stopped at lane 2 nearby Jalan Bukit Merah ESSO petrol kiosk as there was heavy traffic. Vehicle bearing registration no. SBX2U(V2) was in front of mine. I realized there was another vehicle exiting the ESSO petrol kiosk and going the far most right lane.

I wanted to give way for the vehicle to make its way thus I honked at V2 and V2 then inch forward. As V2 was moving forward, it suddenly jammed brake, causing our vehicles to tapped onto each other. We then got out of the vehicle and made a check and there wasn't any damage to both vehicle. We did not exchange particulars as I did not wanted to hold up the traffic. I managed to get V2's driver no. HP: 96353564

I wish to state no one was injured, no government property damage. I wish to also state that V2 has an incar camera and I do not have any.

## POLICE REPORT





Police Station Of Origin: Bukit Merah West N.P.C 500 Bukit Merah View #01-01 SINGAPORE 159682 Tel No: 1800-3779999 3 of 3 Report No. T/20190611/2109

CONTINUATION OF REPORT

## Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Cinnature Of Officer Percepting The Deport

D / Sgt 2 SHARIFAH HANISAH BINTE SAMAT	Signature of Informance
Signature Of Interpreter: Not applicable	Date/Time: 11/06/2019 16:21
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:
Authentication Stampone NP168 SAUCE FUNCE SN	45















