

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	25/06/2019 10:21
Date Of Accident	23/06/2019 20:00
Exact Location Of Accident	WOODLANDS AVE 2 TWDS WOODLANDS AVE 1 /LAMP POST 75
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GQ4876R
Insured/Policyholder	
Name Of Registered Owner	GOH SIN HUAT ELECTRICAL PTE LTD
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93813380
Alternative Phone No	OFFICE-93813380

Vehicle Particulars

Manufacturer	NISSAN
Model	-
Exact Purpose for which vehicle was being used at time of accident	WORK
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	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	18-MX005009-R04
Cover Note Number	

Driver

Name of Driver	JOHARI BIN MASRAN
NRIC No	S1196241F
Date Of Birth	18/11/1955
Occupation	OUTDOOR
Date Of Driving Pass	28/01/1995
Driving Experience	24 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93813380
Fax Number	
Contact Number	OTHERS-93813380
EEmail Address	NOEMAIL

Address	BLK 308 SERANGOON AVENUE 2 #03-132
Postcode	550308
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	CHAIN COLLISION
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	3
Was any body injured in the Accident?	YES
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: : PUNGOT BINTE JUHAKU GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	YISHUN NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 31 YISHUN CENTRAL , POSTCODE: 768827 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8529999 - FAX NO: 68522299
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT : T/20190624/2004

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	REVERT
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKR9528K
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)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SJP5217G
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)

DETAILS OF INJURED PERSON 1

Name PUNGOT BINTE JUHAKU
Approximate Age
Injuries Sustain SLIGHT
Injured person in which vehicle? GQ4876R
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? YES
Address
Postcode

Sketch Plan

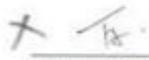
SKETCH PLAN

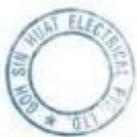
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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

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: 24/6/19



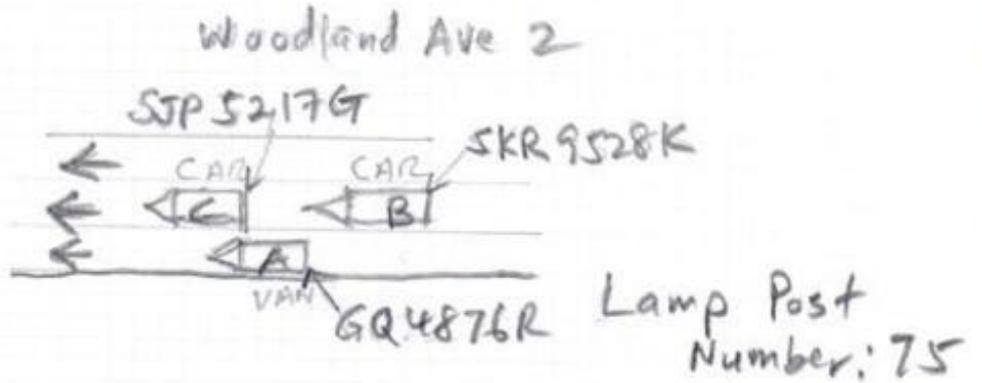

Driver's Signature
(if driver is not the policyholder)
Date & Time:


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

Sketch Plan #2

SKETCH PLAN

Woodland Ave 1



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

P/S Refer to the Police Report
T/20190624/2004

DECLARATION

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

X *[Signature]*
Policyholder's Signature
Date & Time: 24/6/19



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

[Signature] 25/6/2019
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Sketch Plan #3



**SINGAPORE
POLICE FORCE**



T/20190624/2004

2 of 3

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

Report No. T/20190624/2004

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No		Use of Pedestrian Crossing: NA	
No. of Pedestrians Injured: NIL			
Driver			
Name	JOHARI BIN MASRAN	ID No.	S1196241F
Related Vehicle	GQ4876R (Van)	Contact No.	93813380
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 23/06/2019 at about 2000hrs, I was driving my company van bearing registration number - GQ4876R on lane 3 at along Woodlands Avenue 2 on a 3-lane road.

There was a vehicle bearing registration number - SJP5217G who was on lane 2 suddenly did an emergency brake. The vehicle bearing registration number - SKR9528K behind him collide onto the vehicle SJP5217G.

Out of a sudden, I felt a collision from my right hand side. Vehicle SKR9528K have collided onto the right side of my vehicle.

There is no in-vehicle camera installed in my company van. My wife (Pungot Binte Juhaku, NRIC:S1838408F, Address: Blk 308 Serangoon Ave 2 #03-132, Occupation: Housewife) was injured and was subsequently conveyed to KTPH. She is still warded.

I was then instructed by TP IO Riduan to lodge a Traffic Accident Report reference L/20190623/0141.

Sketch Plan #5

(Driver Company)



吳信發電器私人有限公司
GQH SIN HUAT ELECTRICAL PTE LTD
49 Kaki Bukit Place
Eunos Techpark
Singapore 416227
Sales Tel: 6467 4833 Fax: 6467 2181
SVC Tel: 6479 8611 Fax: 6479 4996

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



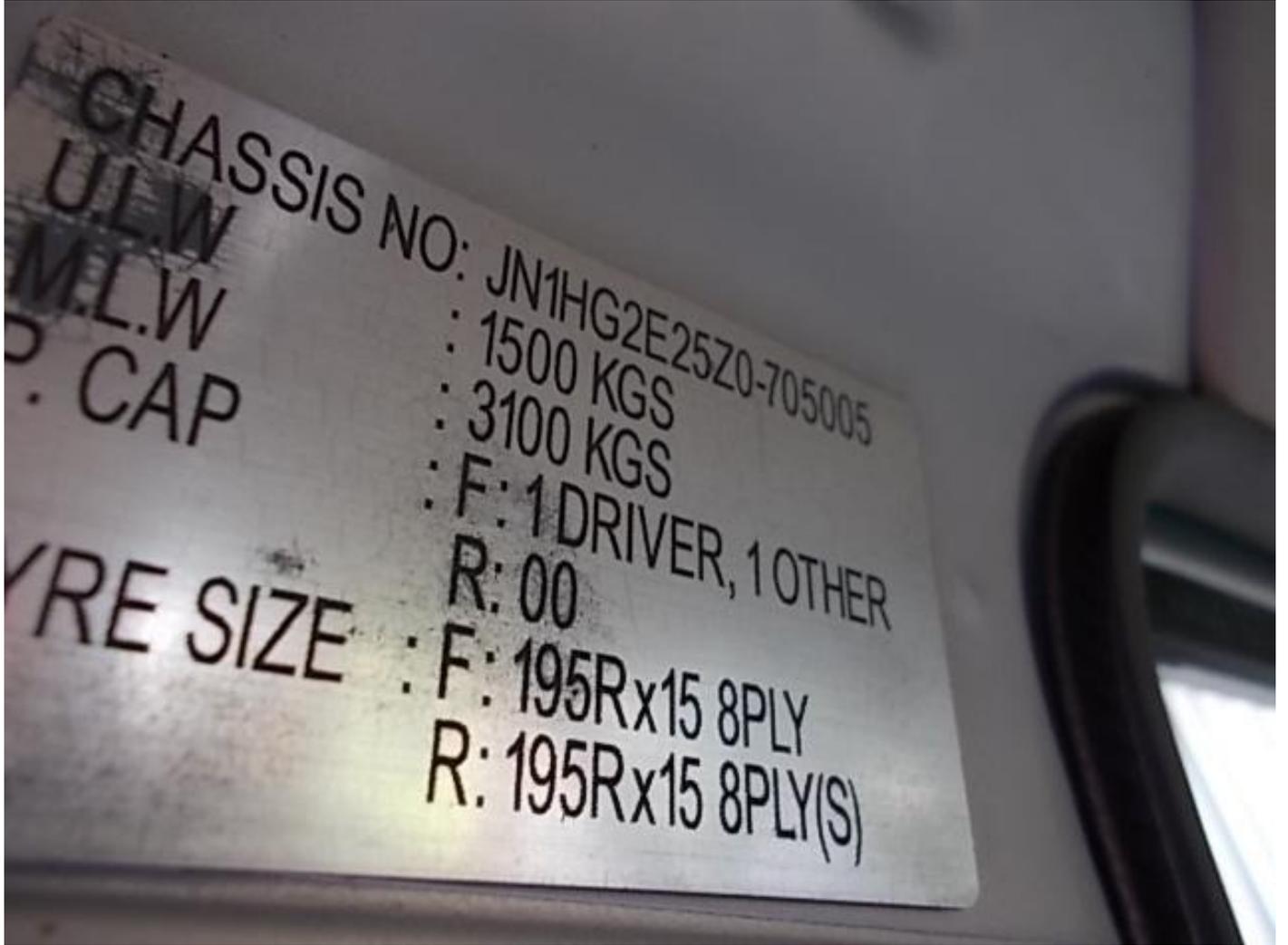
Accident Photo



Accident Photo



Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



T/20190624/2004

1 of 3

Report No. T/20190624/2004

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/06/2019 00:26	Vide Report No.: L/20190623/0141	Station Diary No.: 11
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Informant's Particulars			
Name of Informant: JOHARI BIN MASRAN		Address: APT BLK 308 SERANGOON AVENUE 2 #03-132 SINGAPORE 550308	
ID Type / ID No.: NRIC NO / S1196241F		Contact No.:	Mobile: 93813380
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 63	Date of Birth: 18/11/1955	Type of Informant: Driver
Race: Malay		Language: English	Institution / School Name:
Occupation: TECHNICIAN		Driving Licence Information: Class: 3	Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 23/06/2019 20:00	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 WOODLANDS AVENUE 2 WOODLANDS AVENUE 1 Lamp Post Number: 75				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: CHAIN COLLISION AMONG VEHICLES			Anyone conveyed by ambulance: Yes	

Details of Vehicles Involved						
Registration No.	Vehicle Type	Make	Model	Color	Condition	No. of Passenger
GQ4876R	Van	NISSAN	URVAN 4 DOOR SWB (D)	Silver	Slightly Damaged	1
SJP5217G	Car	HYUNDAI				1
SKR9528K	Car	HONDA				5

Police Report



**SINGAPORE
POLICE FORCE**



T/20190624/2004

2 of 3

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Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

Report No. T/20190624/2004

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No		Use of Pedestrian Crossing: NA	
No. of Pedestrians Injured: NIL			
Driver			
Name	JOHARI BIN MASRAN	ID No.	S1196241F
Related Vehicle	GQ4876R (Van)	Contact No.	93813380
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

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Police Report



**SINGAPORE
POLICE FORCE**

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T/20190624/2004

3 of 3

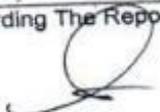
Report No. T/20190624/2004

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.

Signature Of Officer Recording The Report: L / Sgt 2 LIM SUI-LING 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 24/06/2019 00:26
Officer In Charge Of Case: TP / GIT / Sgt 3 MOHAMED RIZWAN BIN IBRAHIM Contact No.: 93265045	Classification Of Case: 
Authentication Stamp NP168	