

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	12/07/2019 11:20
Date Of Accident	10/07/2019 08:20
Exact Location Of Accident	ECP MCE BEFORE MSC TUNNEL
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SJM9509D
Insured/Policyholder	
Name Of Registered Owner	MOHAMED IQBAL BIN MOHAMED
NRIC No	S7100775H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97480911
Alternative Phone No	OTHERS-96562889
Vehicle Particulars	
Manufacturer	HONDA
Model	FIT
Exact Purpose for which vehicle was being used at time of accident	LEISURE
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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5107741985
Cover Note Number	DRIVO CLASSIC
Driver	
Name of Driver	OMAR BIN MOHAMED IQBAL
NRIC No	S9937432B
Date Of Birth	23/11/1999
Occupation	INDOOR
Date Of Driving Pass	03/08/2018
Driving Experience	0 YEAR AND 11 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-96562889
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	21 PEAKVILLE GROVE
Postcode	487750
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
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	4
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	BEDOK NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 30 BEDOK NORTH ROAD , POSTCODE: 469676 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2449999 - FAX NO: 62447258
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

I was travelling along lane 1. Suddenly, the vehicle in front of me jammed brakes and stopped. Upon seeing this, I jammed my brakes and came to a complete stop without hitting into the rear of the vehicle in front of me. After stopping, I noticed that vehicle B, who was travelling behind, came to a complete stop without hitting into the rear of my vehicle A. However, moments after, vehicle C hit into the rear of vehicle B. The impact pushed vehicle B forward and hit into the rear of my vehicle A. After collision, I alighted from my vehicle A and realised that vehicle C was hit into the rear by vehicle D. Hence, in total, there were 4 vehicles involved in this chain collision.

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	SJD7121Z
Vehicle Make/Model/Colour	DARK BROWN HONDA STREAM
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MOHAMMED ZULFADLI BIN MOHAMMED HAYON
NRIC/Passport Number	S8723613G
Contact Number	98371090

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

2

Passenger 1

NAME: : PASSENGER

GENDER: : FEMALE

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SLD6241T

Vehicle Make/Model/Colour

WHITE TOYOTA SIENTA

Details Of Properties

Vehicle Category

PRIVATE HIRE

Name of Driver

UNKNOWN

NRIC/Passport Number

Contact Number

UNKNOWN

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

2

Passenger 1

NAME: : PASSENGER

GENDER: : MALE

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number

UNKNOWN

Vehicle Make/Model/Colour

CITROEN C4 CACTUS

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

UNKNOWN

NRIC/Passport Number

Contact Number

UNKNOWN

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

1

Sketch Plan Pg. 1

INCOME MOTOR SERVICE CENTRE

Report Date & Start Time: 12/07/2019 / 11:15

Region No: MT

D.O.A: 10/07/2019
Time: 08:20 hrs

Vehicle No: SJV9589D Reporting Type:

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.

12/07/19 / 11:15

Policyholder's Signature / Date & Time

Only

12/07/19 / 11:15

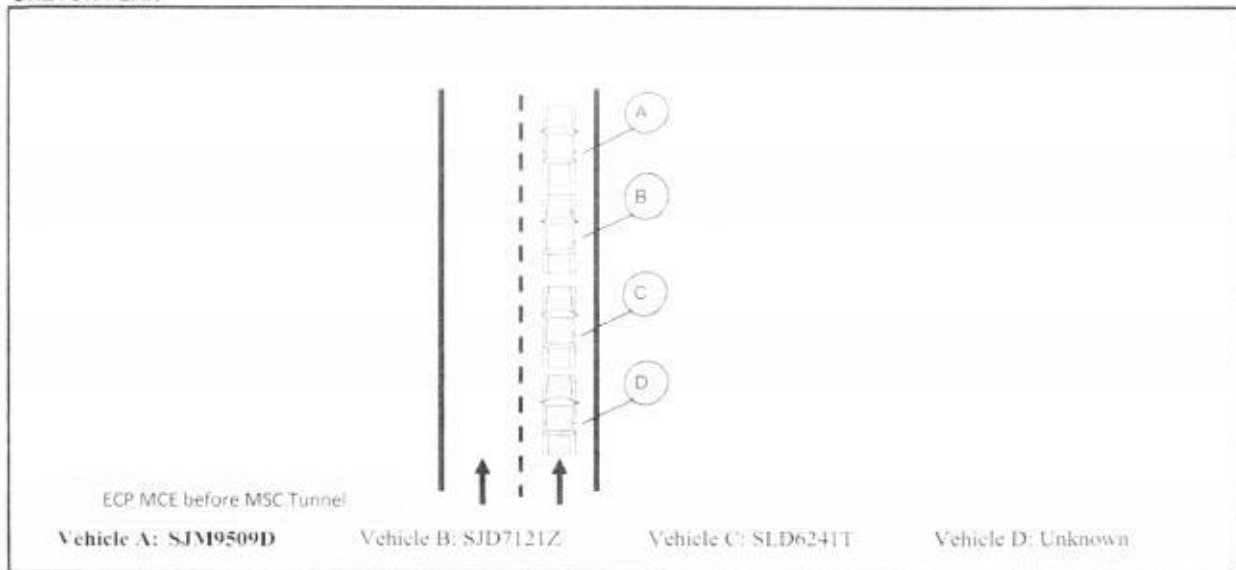
Driver's Signature (If driver is not the policyholder) / Date & Time

Alan Tang (S098825)
Customer Care Executive
Motor Service Centre

Witnessed by Reporting Centre Personnel

Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling along lane 1. Suddenly, the vehicle in front of me jammed brakes and stopped. Upon seeing this, I jammed my brakes and came to a complete stop without hitting into the rear of the vehicle in front of me. After stopping, I noticed that vehicle B, who was travelling behind, came to a complete stop without hitting into the rear of my vehicle A. However, moments after, vehicle C hit into the rear of vehicle B. The impact pushed vehicle B forward and hit into the rear of my vehicle A. After collision, I alighted from my vehicle A and realised that vehicle C was hit into the rear by vehicle D. Hence, in total, there were 4 vehicles involved in this chain collision.

Declaration

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

12/07/19 / 11:15
Policyholder's Signature / Date & Time

[Signature] 12/07/19 / 11:15
Driver's Signature (If driver is not the policyholder) / Date & Time

Alan Tang (S098825)
Customer Care Executive
Motor Service Centre
[Signature]
Witnessed by Reporting Centre Personnel

ANNEX E

NOTICE OF REPORTING

This is to confirm that OMAR BIN MOHAMED IQBAL, NRIC: S9937432B, has reported to the Police a non-injury traffic accident which occurred at EAST COAST PARKWAY TOWARDS MCE on 10/07/2019 at 0820hrs involving the following vehicles:

- SJM9549D (WHITE HONDA FIT)
- SJD7121Z (DARK BROWN HONDA STREAM)
- SLD6241T (WHITE TOYOTA CAR)
- FOURTH VEHICLE'S REGISTRATION NUMBER, MAKE AND MODEL WAS NOT CAPTURED

2. If accident was reported to the Police within 24 hrs of its occurrence, then he has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

 **Bedok North NPC**
No. 30 Bedok North Road
Singapore 469676
Tel: 1800-7480000

Rank / Name of Issuing officer: **SSGT T120165 Shawn Yuen**

Date: 10/07/2019

Time: 2114hrs

S/D Ref:

125

Police Post/ Unit: BEDOK NORTH NPC

Original - To be issued to informant

Duplicate- to be submitted to Traffic Police