

## 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	19/07/2019 17:02
Date Of Accident	18/07/2019 21:30
Exact Location Of Accident	SLIP RD TO TPE (CHANGI AIRPORT)AFTER TAMPINES
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKN2377X
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CARRO LEASING PTE. LTD.
Co Reg No	201825832G
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-67146652

### Vehicle Particulars

Manufacturer	VOLVO
Model	S60 D2
Exact Purpose for which vehicle was being used at time of accident	
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 HIRE

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	5103618547
Cover Note Number	

### Driver

Name of Driver	MUHAMMAD FITRI BIN MUSTAFA
NRIC No	S9213257I
Date Of Birth	05/04/1992
Occupation	OUTDOOR
Date Of Driving Pass	17/09/2011
Driving Experience	7 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91880648
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 859A TAMPINES AVENUE 5 #06-601
Postcode	521859
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	SIDE SWIPE
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?	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: : GRAB PASSENGER GENDER: : MALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	EUNOS NEIGHBOURHOOD POLICE POST
Police Station Address	<b>ROAD:</b> BLK 629 BEDOK RESERVOIR ROAD #01-1620 , <b>POSTCODE:</b> 470629 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-4439999 - <b>FAX NO:</b> 62444376
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

AS PER POLICE REPORT No.T/20190719/2060;

#### 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	SMA5804E
Vehicle Make/Model/Colour	MERCEDES BENZ / GLA180 URBAN (R18 LED)
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	NOOR AZLAN BIN PAINI
NRIC/Passport Number	S7440453G
Contact Number	91073855
Address	

Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1	
Name	MUHAMMAD FITRI BIN MUSTAFA
Approximate Age	27
Injuries Sustain	
Injured person in which vehicle?	SKN2377X
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	
Address	BLK 859A TAMPINES AVENUE 5 #06-601
Postcode	521859


SKETCH PLAN


IMPORTANT NOTICE

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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: 

**IDAC KAKI BUKIT(VAC)**  
**23 KAKI BUKIT AVE 4**  
Reporting Centre  
Name: **Singnet 45588**  
Tel: 67416697  
NRIC/FIN No.: **Fax: 67492305**  
Email: **vackb@singnet.com.sg**

SKETCH PLAN

VEHICLE A - SKN 3877X  
VEHICLE B - SMA 5804E

SLIP ROAD FROM TAMPINES AVENUE 10, TURNING TO THE (PIE) → CHANGI AIRPORT

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

AS PER POLICE REPORT, T/20190719/2060 (EUNDS NPP).

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:

IDAC KAKI BUKIT(VAC)  
23 KAKI BUKIT AVE 4  
Singapore 415933  
Tel: 67416687  
Fax: 67492305  
Email: vackb@singnet.com.sg  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:



# Accident Sketch Plan Pg. 1



**SINGAPORE  
POLICE FORCE**



T/20190719/2060

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

1 of 3

Report No. T/20190719/2060

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/07/2019 13:06	Vide Report No.:	Station Diary No.: 18
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Informant's Particulars			
Name of Informant: MUHAMMAD FITRI BIN MUSTAFA		Address: APT BLK 859A TAMPINES AVENUE 5 #06-601 SINGAPORE 521859	
ID Type / ID No.: NRIC NO / S92132571		Contact No.: Home/Office: Mobile: 9188 0648	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 27	Date of Birth: 05/04/1992	Type of Informant: Driver
Race: Malay		Language:	Institution / School Name:
Occupation: GRAB DRIVER		Driving Licence Information: Class: 2B,2A,3 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 18/07/2019 21:30	Type of Location:
Location: Along Road 1 TAMPINES EXPRESSWAY				
SLIP ROAD AFTER JUNCTION OF TAMPINES AVENUE 10 (TPE TOWARDS CHANGI AIRPORT)				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision:			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKN2377X	Car	VOLVO	S60	Silver		1
SMA5804E	Car	MERCEDES BENZ	GLA180	Black		0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

# Accident Sketch Plan Pg. 1



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POLICE FORCE**



T/20190719/2060

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

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Report No. T/20190719/2060

## CONTINUATION OF REPORT

<b>Driver</b>			
Name	MUHAMMAD FITRI BIN MUSTAFA	ID No.	S9213257I
Related Vehicle	SKN2377X (Car)	Contact No.	9188 0648
Hospital/Clinic	PARKWAY EAST HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment	18/07/2019	Date Discharge	18/07/2019
No. of Days granted Medical Leave	05	Degree of Injury	NIL
<b>Driver</b>			
Name	NOOR AZLAN BIN PAINI	ID No.	S7440453G
Related Vehicle	SMA5804E (Car)	Contact No.	9107 3855
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

## Brief Details.

On 18/07/2019 at about 9.30pm, I was driving my car (SKN2377X). At that point of time I was at the junction of Tampines Ave 10 turning right to TPE (Towards Changi Airport). There is a 2 lane turning right and I was on the left lane. After the traffic light turn green, I proceed to turn right. While at the slip road to TPE, I maintained at my lane however a car (SMA5804E) which was on the right lane suddenly went in to my lane and hit my car. Both of us went down and exchange particulars.

Due to the impact, I felt pain on my neck. I then went to Parkway East Hospital on 18/07/2019 and was given 5 days MC. As for my car, there is a dent and scratches on the right front bumper.



**SINGAPORE  
POLICE FORCE**



T/20190719/2060

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SINGAPORE 470629  
Tel No: 1800-4439999

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Report No. T/20190719/2060 //

**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:  
G /  
SI ABDUL RAHMAN BIN ABDUL RAHIM

Signature Of Informant:

Signature Of Interpreter:  
Not applicable

Date/Time:  
19/07/2019 13:06

Officer In Charge Of Case:  
TP / AEIT /  
✓ SSI 2 JUREMAH BINTE AHMAD  
✓ Contact No.: 65476219

Classification Of Case:

Authentication Stamp  
NP168





Accident Photo



## Driving License



Accident Photo





Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo





**Accident Photo**



**Accident Photo**

