

## 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	01/08/2019 10:43
Date Of Accident	18/07/2019 00:00
Exact Location Of Accident	PIE (TUAS) AFTER TOH GUAN ROAD EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLE5985G
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CAR COVE LEASING PTE LTD
Co Reg No	201602573M
Email Address	EDWIN@CARCOVE.COM.SG
Mobile Phone No	(LOCAL) +65-87818338
Alternative Phone No	OFFICE-90078858

### Vehicle Particulars

Manufacturer	TOYOTA
Model	AXIO-1.5 X (A)
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	999994246
Cover Note Number	

### Driver

Name of Driver	IRFAN SALIHIN BIN MOHAMAD IRWAN
NRIC No	S9600207F
Date Of Birth	01/01/1996
Occupation	INDOOR
Date Of Driving Pass	20/04/2018
Driving Experience	1 YEAR AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87818338
Fax Number	
Contact Number	OTHERS-90078858
EEmail Address	EDWIN@CARCOVE.COM.SG

Address	BLK 271C JURONG WEST STREET 24 #02-58
Postcode	643271
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?	YES
Was any injured conveyed to hospital by ambulance?	YES
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	NANYANG N.P.C
Police Station Address	<b>ROAD:</b> 2 JURONG WEST AVE 5 , <b>POSTCODE:</b> 649482 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-7929999 - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190719/2024 AND D/20190731/2037

#### Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	UNKNOWN
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
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	IRFAN SALIHIN BIN MOHAMAD IRWAN
Approximate Age	
Injuries Sustain	CHEST PAIN
Injured person in which vehicle?	SLE5985G
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

Accident Sketch Plan

SKETCH PLAN

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- 5. Any false reporting may be referred to the Police for investigation.
- 6. 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.
- 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:

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

Accident Sketch Plan

SKETCH PLAN

UNKNOWN

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO POLICE REPORT  
7/20190719/2019  
D/20190731/2019

DECLARATION

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

  
Policyholder's Signature  
Date & Time:

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

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



POLICE REPORT



SINGAPORE POLICE FORCE



T/20190719/2024

2 of 3

Report No. T/20190719/2024

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999

CONTINUATION OF REPORT

Driver			
Name	IRFAN SALIHIN BIN MOHAMAD IRWAN	ID No.	S9600207F
Related Vehicle	SLE5985G (Car)	Contact No.	90078858
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	05	Degree of Injury	Slight

**Brief Details.**

On the 18/07/19 at about 0000hrs, I was driving my car SLE5985G along PIE towards Tuas after Toh Guan Road exit. As I was going home after grocery shopping, I felt tired, and had accidentally dozed off while-driving. After dozing off for a short period of time, I suddenly felt an impact. I realized that the front of my vehicle had collided into the rear of a 10 foot lorry. We immediately both stopped our vehicles. The lorry then filtered to the road shoulder, and the other driver then got out and came to assist me. I was still able to walk properly and I hence managed to get out of my car.

An off duty officer happened to be driving past, and he assisted us by calling for ambulance and police. Soon after, ambulance arrived and assessed me. I felt chest pains, and they hence conveyed me to Ng Teng Fong General Hospital as they wanted to make a further check on me. I was then given a 5 day MC by the doctor. He informed that I was suffering from chest contusion.

I did not manage to get the particulars of the other parties, as well as the off duty officer who helped us. I also do not have the vehicle plate number of the lorry. My car does not have any in-car camera. I wish to inform that my car was a rental car. My car was seriously damaged and it was towed away as it could not be driven anymore. I also did not receive any case cards from the Police, as I had already been conveyed to the hospital.

POLICE REPORT



SINGAPORE  
POLICE FORCE



T/20190719/2024

3 of 3

Report No. T/20190719/2024

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999

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: J/ TAN JUN HERN, DAMIAN 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 19/07/2019 10:22
Officer In Charge Of Case: TP / GIT / Staff Sgt QHAIRIL BIN ZULKEFLEE Contact No.: 65476187	Classification Of Case:
Authentication Stamp NP168	<div style="text-align: right;">SN 127</div>  Signature:  Singapore Police Force

POLICE REPORT



**SINGAPORE  
POLICE FORCE**



D/20190731/2037

1 of 2

POLICE REPORT (NP299)

Report No. D/20190731/2037

Police Station Of Origin  
Commonwealth NPP  
111 Commonwealth Crescent (Annex) #01-  
288A SINGAPORE 140111  
Tel No: 1800-4749999

Date/Time Report Made 31/07/2019 12:28		Vide Report No.		Station Diary No. 5	
Name Of Informant NG JI HUI		Address APT BLK 470B FERVALE LINK #18-432 SINGAPORE 792470			
ID Type / ID No. NRIC NO / S8315757G		Contact No. Home/Office		Mobile 87818338	
Nationality SINGAPORE CITIZEN		Email Address			
Occupation Company director		Sex Male	Age 36	Date of Birth 26/05/1983	Race Chinese
Institution/School Name		Language English			
Date/Time Of Incident 18/07/2019 00:00 - 31/07/2019 11:45		Location Of Incident 1557 KEPPEL ROAD CANTONMENT CENTRAL SINGAPORE 089066			

**Brief details.**

On 18/07/2019, a client of us, namely Irfan Salihin Bin Mohamad Irwan S9600207F, met with an accident involving a car which he rented from us. He had lodged a police report regards to the accident. Ever since, my company have been trying to contact him for claiming purposes. However, his phone is ringing but not answering. As such, we already engaged a lawyer to take up civil action.

I am lodging this report to produce to my lawyer for legal actions.

Signature Of Officer Recording The Report: D / Sgt 1 NOORHIDAYAT BIN WAHID		Signature Of Informant: 
Signature Of Interpreter: Not applicable		Date/Time: 31/07/2019 12:28
Officer In-Charge Of Case: D / Clementi Police Divisional Investigation Branch / Insp KIMBERLY LIM PEIXUAN Contact No.: 68727964		Classification Of Case:

Authentication Stamp

POLICE REPORT



SINGAPORE  
POLICE FORCE



D/20190731/2037

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. D/20190731/2037

Signature Of Officer Recording The Report: D / Sgt 1 NOORHIDAYAT BIN WAHID
Signature Of Interpreter: Not applicable
Officer In-Charge Of Case: D / Clementi Police Divisional Investigation Branch / Insp KIMBERLY LIM PEIXUAN Contact No.: 68727964

Signature Of Informant:
Date/Time: 31/07/2019 12:28
Classification Of Case:

Authentication Stamp

Identification Card

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO: S9600207F



Name  
IRFAN SALIHIN BIN  
MOHAMAD IRFWAN

For LKK/NAC Use Only

Race  
BOYANESE

Date of Birth  
01-01-1995

Sex  
M

Country of Birth  
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE



002432879A



SG  
LC

4700327



MR S9600207F

For LKK/NAC Use Only

Date of Issue  
23-03-2011

101, BEN QUITO JEWELRY WEST STREET 24 #02-50  
SINGAPORE 043477

IRFAN BIN S9600207F Date: 20/09/2012 No: 7112122

YOU ARE LICENCED TO DRIVE VEHICLES IN THE FORM OF

Class	Description	Valid Until
Class 2B	Motorcycle up to 200 CC	20 May 2018
Class 2A	Motorcycle between 201 CC and 400 CC	20 Apr 2018
Class 3	Motor cars up to 3500 kg with not more than 9 seats, exclusive of the driver, and motor tractors up to 2500 kg	20 Apr 2018

For LKK/NAC Use Only

S / No. 9000318E07

IR 429A

IRFAN BIN S9600207F

