

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	05/08/2019 12:11
Date Of Accident	03/08/2019 12:00
Exact Location Of Accident	TPE SLIP RD EXIT TPE TWDS HOUGANG & LOR HALUS
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJQ1623M
Insured/Policyholder	
Name Of Registered Owner	YASIM B MANSOOR
NRIC No	S0126642Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96702009
Alternative Phone No	OTHERS-96702009

Vehicle Particulars

Manufacturer	HONDA
Model	FIT
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	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	5108299873
Cover Note Number	

Driver

Name of Driver	YASIM B MANSOOR
NRIC No	S0126642Z
Date Of Birth	15/04/1954
Occupation	OUTDOOR
Date Of Driving Pass	12/07/1977
Driving Experience	42 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96702009
Fax Number	
Contact Number	OTHERS-96702009
Email Address	NOEMAIL

Address	BLK 741 PASIR RIS ST 71 #09-43
Postcode	510741
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

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?	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: : SALMI BINTE KASNO GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	PASIR RIS NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 1 PASIR RIS DRIVE 4 , POSTCODE: 519457 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5852999 - FAX NO: 65855261
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20190805/2022

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	SGQ5354Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	SOH SERENE
NRIC/Passport Number	
Contact Number	93880950

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

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SJX4563X
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver HK TAN
NRIC/Passport Number S1763434H
Contact Number 96990444
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SJG1488P
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver TAW YEW WEE
NRIC/Passport Number
Contact Number 90272073
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name YASIM B MANSOOR
Approximate Age
Injuries Sustain BODY
Injured person in which vehicle? SJQ1623M
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

DETAILS OF INJURED PERSON 2

Name SALMI BINTE KASNO
Approximate Age
Injuries Sustain PAIN RIGHT ABDOMEN
Injured person in which vehicle? SJQ1623M
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address

Postcode

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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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:

5/8/19

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

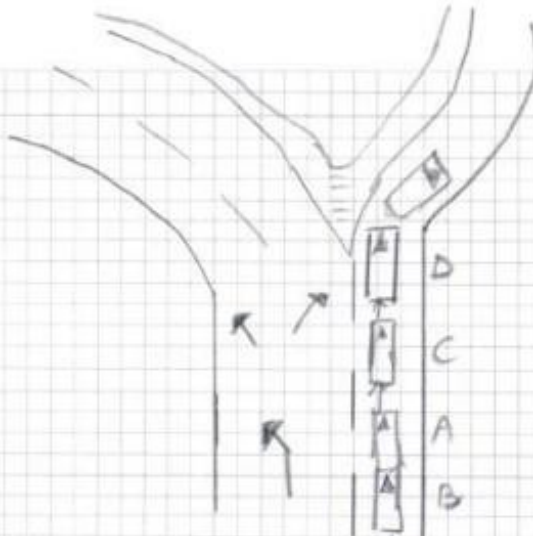
NRIC/FIN No.:

5/8/19

Accident Sketch Plan

SKETCH PLAN

A - SJQ 1623M
B - SGQ 53542
C - SJX 4563X
D - SJG 1488P



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PUNGGOL ↑ KPE

Pls refer to the police report: T/20190805/2022

DECLARATION

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

Policyholder's Signature

Date & Time: 5/8/19

Driver's Signature

(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Individual Statement



**SINGAPORE
POLICE FORCE**



T/20190805/2022

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

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Report No. T/20190805/2022

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJQ1623M	NTUC Income Insurance Co-Operative Limited	5108299873	29/03/2019	26/04/2020

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	YASIM BIN MANSOOR	ID No.	S0126642Z
Related Vehicle	SJQ1623M (Car)	Contact No.	96702009
Hospital/Clinic	CHANGI GENERAL HOSPITAL	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	04	Degree of Injury	Slight
Passenger			
Name	SALMI BINTI KASNO	ID No.	S1539059Z
Related Vehicle	SJQ1623M (Car)	Contact No.	96790943
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	04	Degree of Injury	Slight

Brief Details.

On the 3rd of August 2019, at about 12:00pm, I was driving my vehicle SJQ1623M, along the slip road exiting TPE towards the direction of Hougang/Lorong Halus, and I was on the right lane heading towards Hougang. My wife was seated in the passenger seat next to me.

Suddenly, a vehicle VRN SJX456X, a white Opel which was in front of me in the same lane, jammed brake and came to a complete stop. I applied the brakes of my vehicle and managed to come to a complete stop about 1m behind. Subsequently, I felt an impact from the rear of my vehicle, and the impact caused my vehicle to move forward and hit the vehicle in front of me. My wife and I managed to exit the vehicle, and realized that my vehicle was the third vehicle involved in the accident, and there was a total of four cars involved in this accident. The vehicle that my car hit, also was moved forward by the impact, and hit another car (VRN SJG1488P). The vehicle that hit the rear of my vehicle has the VRN: SGQ5354Z.

There was no police or ambulance or tow truck on scene. All the drivers of the 4 vehicles, myself

Individual Statement



**SINGAPORE
POLICE FORCE**



T/20190805/2022

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

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Report No. T/20190805/2022

CONTINUATION OF REPORT

included, exchanged our particulars, and took pictures of the accident. Subsequently, all 4 vehicles drove off from the scene. I was able to drive off from the accident scene. My car has damages on both the front and rear of the vehicle.

I then drove my car to my insurance's approved workshop (MTA Auto Solutions Pte Ltd), where my wife complained of pain in her right abdomen. We then decided to go to Changi General Hospital to make a check. Both my wife and I were given 4 days of MC each, and my wife was referred to a polyclinic for further follow up on symptoms. For myself, I feel a bit of slight ache in my body.

I do not know if the other drivers or passengers involved in the accident needed medical attention. My vehicle did not have an in-car camera at that point of time. I will be reporting this incident to my insurer and also lodging an accident report.

The details of the other drivers are as follows:

- 1) First car: SJG1488P TAW YEW WEE (HP: 9027 2073)
- 2) Second car: SJX4563X HK TAN (S1763434H) (HP: 9699 0444)
- 3) Last car: SGQ5354Z SOH SERENE (HP: 9388 0950)

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



T/20190805/2022

Police Station Of Origin:

1 of 4

Pasir Ris N.P.C

Report No. T/20190805/2022

1 Pasir Ris Drive 4 #01-01 SINGAPORE

519457

Tel No: 1800-5852999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/08/2019 11:16	Video Report No.:	Station Diary No.: 28
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Informant's Particulars

Name of Informant: YASIM BIN MANSOOR			Address: APT BLK 741 PASIR RIS STREET 71 #09-43 SINGAPORE 510741		
ID Type / ID No.: NRIC NO / S0126642Z			Contact No.: Home/Office: Mobile: 96702009		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 65	Date of Birth: 15/04/1954	Type of Informant: Driver		
Race: Javanese			Language:	Institution / School Name:	
Occupation: DISPATCH			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: 03/08/2019 12:00	Type of Location: Y-Junction
Location: Along Road 1 Traveling Toward Road 2 TAMPINES EXPRESSWAY				
Sliproad exiting TPE, at the junction towards Hougang and Lorong Halus				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGQ5354Z	Car					0
SJG1488P	Car				Slightly Damaged	0
SJQ1623M	Car	HONDA	FIT 1.3G A	Silver	Slightly Damaged	1
SJX4563X	Car					0

Police Report



**SINGAPORE
POLICE FORCE**



T/20190805/2022

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
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Tel No: 1800-5852999

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CONTINUATION OF REPORT

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Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJQ1623M	NTUC Income Insurance Co-Operative Limited	5108299873	29/03/2019	26/04/2020

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	YASIM BIN MANSOOR		ID No.	S0128642Z
Related Vehicle	SJQ1623M (Car)		Contact No.	96702009
Hospital/Clinic	CHANGI GENERAL HOSPITAL		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	04		Degree of Injury	Slight
Passenger				
Name	SALMI BINTI KASNO		ID No.	S1539059Z
Related Vehicle	SJQ1623M (Car)		Contact No.	98790943
Hospital/Clinic	CHANGI GENERAL HOSPITAL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	04		Degree of Injury	Slight

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There was no police or ambulance or tow truck on scene. All the drivers of the 4 vehicles, myself

Police Report



**SINGAPORE
POLICE FORCE**



T/20190805/2022

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852998

3 L
Report No. T/20190805/2022

CONTINUATION OF REPORT

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Police Report



SINGAPORE
POLICE FORCE



T/20190805/2022

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800 6862000

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Report No. T/20190805/2022

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 / Insp JUSTIN KHAW WEI LIANG	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 05/08/2019 11:16
Officer In Charge Of Case: TP / AEIT / SSI 2 JUREMAH BINTE AHMAD Contact No.: 65476219	Classification Of Case:
Authentication Stamp NP165 	