

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	13/08/2019 18:43
Date Of Accident	12/08/2019 10:30
Exact Location Of Accident	ENTRY TO JOHOR IMMIGRATION CIQ TOWARDS S'PORE
Country/State of Loss	MALAYSIA/JOHOR DARUL TAKZIM
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKX9583T
Insured/Policyholder	
Name Of Registered Owner	GOBEE S/O RAMANULAJU
NRIC No	S2584712A
Email Address	GOBEE@SINGNET.COM.SG
Mobile Phone No	(LOCAL) +65-97944025
Alternative Phone No	OTHERS-97944025
Vehicle Particulars	
Manufacturer	TOYOTA
Model	COROLLA-1.5 AXIO (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	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	FWD SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	PNPV2019-00000997
Cover Note Number	
Driver	
Name of Driver	GOBEE S/O RAMANULAJU
NRIC No	S2584712A
Date Of Birth	22/11/1960
Occupation	INDOOR
Date Of Driving Pass	01/08/1991
Driving Experience	28 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97944025
Fax Number	
Contact Number	OTHERS-97944025
EEmail Address	GOBEE@SINGNET.COM.SG

Address	BLK 157 LORONG 1 TOA PAYOH #11-1247
Postcode	310157
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	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?	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)	2
Passenger 1	NAME: : WIFE GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT E/20190812/7017

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	SLQ3438U
Vehicle Make/Model/Colour	TOYOTA HARRIER
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)

Accident Sketch Plan

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.

Policyholder's Signature

Date & Time:

13/08/2019

Driver's Signature

(If driver is not the policyholder)

Date & Time:

13/08/2019

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

13/08/2019
Roshan Umair

Accident Sketch Plan

SKETCH PLAN

MALAYSIA CHECKPOINT TOWARDS S'PORE



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Handwritten text across the grid: "PS REFER TO POLICE REPORT E/20190812/2017"

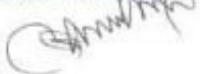
DECLARATION

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



Policyholder's Signature

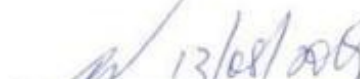
Date & Time: 13/08/2019



Driver's Signature

(If driver is not the policyholder)

Date & Time: 13/08/2019

 13/08/2019

Reporting Centre Person's Signature

Name:

NRIC/FIN No.:

POLICE REPORT



**SINGAPORE
POLICE FORCE**



E/20190812/7017

1 of 2

POLICE REPORT (NP299)

Police Station Of Origin
Tanglin Division HQ
21 Kampong Java Road SINGAPORE
228892
Tel No: 1800-3910000

Report No. E/20190812/7017

Date/Time Report Made 12/08/2019 20:49	Vide Report No.	Station Diary No.
Name Of Informant GOBEE S/O RAMANUJALU	Address APT BLK 157 LORONG 1 TOA PAYOH #11-1247 SINGAPORE 310157	
ID Type / ID No. NRIC NO / S2584712A	Contact No. Home/Office:	Mobile: 97944025
Nationality MALAYSIAN	Email Address gobee@singnet.com.sg	
Occupation Retiree	Sex Male	Age 58
Institution/School Name	Date of Birth 22/11/1960	Race Indian
Date/Time Of Incident 12/08/2019 10:15 - 12/08/2019 10:45	Location Of Incident Entry to Johor Bahru checkpoint CIQ towards Singapore	
Brief details.		

On 12 August 2019 between 10.15am and 10.45am I was driving my vehicle SKX9583T through the Malaysia Johor Bahru checkpoint CIQ towards Singapore. At the entry to the checkpoint, Singapore registered vehicle SLQ 3438U driven by a male driver with two female and one male passenger hit the rear right side of my vehicle. My car suffered damage.

The male driver refused to exchange driver's particulars at the location of the collision at the CIQ. One of passengers, a lady, gave a tel number to contact her. She said she will bring us to her workshop and cover the expense. I later messaged her for the driver's particulars and to go to an independent party

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 12/08/2019 20:49
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	

POLICE REPORT



**SINGAPORE
POLICE FORCE**



E/20190812/7017

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. E/20190812/7017

Borneo Motors for an assessment of the damage. She did not agree. She also did not provide the drivers particulars.

Subjects Involved			
Victim			
Person Name	GOBEE S/O RAMANUJALU		
ID Type	NRIC NO	ID No	S2584712A
Gender	Male	Age	58
Race	Indian	Language	English
Occupation	Retiree	Address Type	
Address	APT BLK 157 LORONG 1 TOA PAYOH #11-1247 SINGAPORE 310157		Mobile No 97944025
Is Informant A Victim?	Yes		
Person Name GOBEE S/O RAMANUJALU (Informant)			

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 12/08/2019 20:49
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp:	

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

