

## 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	14/08/2019 11:37
Date Of Accident	10/08/2019 17:20
Exact Location Of Accident	7 HARIYN RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBG6815R
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#### Insured/Policyholder

Name Of Registered Owner	ROBINSON CAR RENTAL PTE LTD
Co Reg No	200414041W
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-89999999

#### Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA 3.0 DIESEL TURBO M/T 2WD LORRY
Exact Purpose for which vehicle was being used at time of accident	WORKING
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	COMMERCIAL VEHICLE

#### Insurance Company

Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	D-19093213MFCV/34
Cover Note Number	

#### Driver

Name of Driver	RUHUL AMIN AZIZUL HAQUE KHAN
Passport No/FIN	G8021246T
Date Of Birth	12/03/1982
Occupation	OUTDOOR
Date Of Driving Pass	30/12/2009
Driving Experience	9 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-86520598
Fax Number	
Contact Number	OFFICE-86520598
Email Address	NOEMAIL

Address	9E YUAN CHING ROAD #02-60
Postcode	618647
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	COLLIDED INTO PROPERTY
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	1
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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)	0

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	GEYLANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 132 PAYA LEBAR ROAD , <b>POSTCODE:</b> 409014 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-8486999 - <b>FAX NO:</b> 68486799
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT - T/20190813/2039.

#### 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	LAMPPOST
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	GOVERNMENT
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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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.



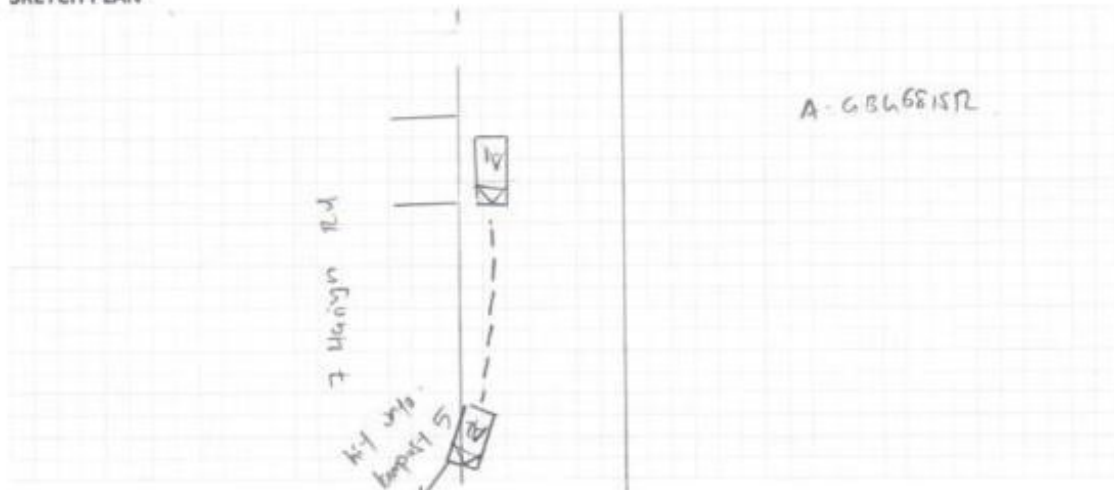
Policyholder's Signature  
Date & Time:

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

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

## Accident Sketch Plan

### SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

This image shows a single page of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

## 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:

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

# Accident Sketch Plan

10/21/2019

DATE & TIME:- 10/21/2019 around 17:00 hrs

LOCATION:- 7 Hariyn Road - Lamp post No-5.

Summary:-

Date:- 10/21/2019. Around 17:20 I took my vehicle and went  
of 7 Hariyn Road (Nippon side) & go down to check  
our pump for while, I came back around 5 to 6 minutes  
then the lorry is not there where I parked  
I saw lorry Automatic go down to hit lamp post  
no 5. I thought hand brake may failed.

Reel Him  
RUBIN ANUN  
GE8021246T.  
86520598.

# Police Report



**SINGAPORE  
POLICE FORCE**



T/20190813/2039

Police Station Of Origin:  
Geylang N.P.C  
132 Paya Lebar Road SINGAPORE 409014  
Tel No: 1800-8486999

1 of 3

Report No. T/20190813/2039

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/08/2019 11:44	Vide Report No.:	Station Diary No.: 54
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### Informant's Particulars

Name of Informant: AMIN RUHUL			Address: C/O 9E YUAN CHING ROAD #02-60 SINGAPORE		
ID Type / ID No.: FIN NO / G8021246T			Contact No.: Home/Office: Mobile: 86520598		
Nationality: BANGLADESHI			Email:		
Sex: Male	Age: 37	Date of Birth: 12/03/1982	Type of Informant: DRIVER OF COMPANY VEHICLE		
Race: Indian			Language:		Institution / School Name:
Occupation: CONSTRUCTION SUPERVISOR			Driving Licence Information: Class: Date of Expiry:		

### General Information of the Accident

Type of Accident:	Non-Injury Government Property	Drink Drive: No	Date/Time of Accident: 10/08/2019 17:20	Type of Location: Straight Road
Location: Along Road 1 HARLYN ROAD  7 HARLYN ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control:		Traffic Volume:
Type of Collision: Moving Vehicle Against - Lamp Post				Anyone conveyed by ambulance: No

### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBG6815R	Lorry	TOYOTA		Blue	Slightly Damaged	0

### Details of Person Involved

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



## Police Report



**SINGAPORE  
POLICE FORCE**



T/20190813/2039

Police Station Of Origin:

Geylang N.P.C

132 Paya Lebar Road SINGAPORE 409014

Tel No: 1800-8486999

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Report No. T/20190813/2039

### CONTINUATION OF REPORT

DRIVER OF THE PARKED VEHICLE			
Name	AMIN RUHUL	ID No.	G8021246T
Related Vehicle	GBG6815R (Lorry)	Contact No.	86520598
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

#### **Brief Details.**

On 10/08/2019 at 1720hrs, I parked my lorry along 7 Harlyn Road. I remember that I had pulled the handbrake so as to prevent the lorry from rolling forward as the road was downhill. About 7 minutes later, I exited the said location but did not see my lorry at the location in which I had parked it. I then walked down the road and spotted my lorry in a stationary position. I then discovered that it had rolled down and subsequently hit onto lamp post number 5, causing it to be uprooted and fall. I then informed the matter to LTA and provided my particulars to them. I am lodging this report as per instruction from the lorry rental company. That is all.



## Police Report



**SINGAPORE  
POLICE FORCE**



T/20190813/2039

3 of 3

Police Station Of Origin:  
Geylang N.P.C  
132 Paya Lebar Road SINGAPORE 409014  
Tel No: 1800-8486999

Report No. T/20190813/2039

### 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 /

Sgt 3 MOHAMAD AKMAL BIN MOHD ROSLAN

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

SI MOHAMAD ZULFAZDLI BIN ABDULLAH

Contact No.: 65476204

Signature Of Informant:

*Ruehl Aime*

Date/Time:

13/08/2019 11:44

Classification Of Case:

Authentication Stamp

NP168

Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo





Accident Photo

