

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 14:00
Date Of Accident	10/08/2019 22:20
Exact Location Of Accident	ALONG COLLYER QUAY TWDS FINLAYSON GREEN
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDN7728S
Insured/Policyholder	
Name Of Registered Owner	MOHAMED JOHARI KAZURA
NRIC No	S7597027G
Email Address	JOHARI@SIFR.SG
Mobile Phone No	(LOCAL) +65-90307728
Alternative Phone No	OFFICE-90307728

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	TIGUAN
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 29113332 AV2
Cover Note Number	

Driver

Name of Driver	RADHIA JAMAL KAZURA
NRIC No	S9046294F
Date Of Birth	24/11/1990
Occupation	INDOOR
Date Of Driving Pass	15/09/2015
Driving Experience	3 YEARS AND 10 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-81271724
Fax Number	(LOCAL) +65-81271724
Contact Number	
Email Address	RADHIA24@GMAIL.COM

Address	241 ONAN ROAD
Postcode	424621
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SIBLING
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: : IZUANTO GENDER: : MALE

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

MORE DETAILS PLEASE REFER TO SKETCH PLAN

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC8385B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	TAN POH GUAN
NRIC/Passport Number	S1753737G
Contact Number	92724802
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN

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8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

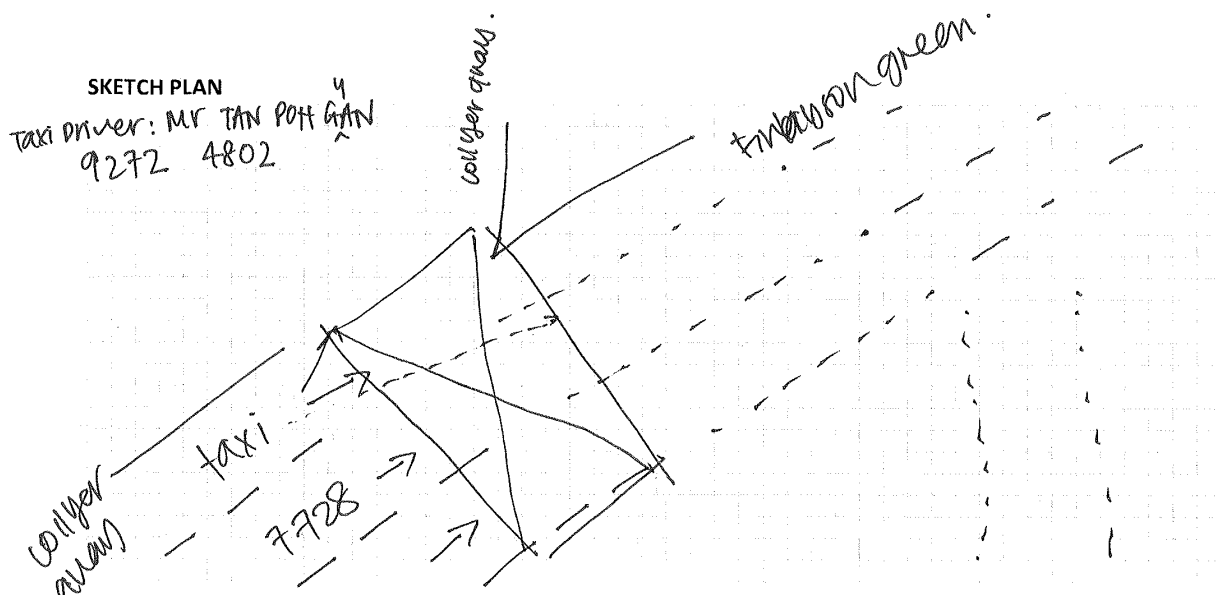
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "**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:

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

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

13/08/2019



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the 10th of Aug 19, I was driving down in my vehicle (SPN 7728) along Collyer Quay towards Finlayson Green 10:19pm on lane 2 (total of 3 lanes). as soon as I went past the traffic light of the junction of Collyer Quay and Robinson Road, I switched on my left indicator. The purpose of this was to indicate to other motorists around me that I was going to move towards lane 2 of Finlayson Green where there were another set of traffic lights. There were 5 cars in total on Finlayson Green. I was in the middle of the yellow box and approaching lane 2 of Finlayson Green with my indicator. As I was approaching lane 2 of Finlayson Green, suddenly out of nowhere a taxi (STC 8385B) came from the left and cut straight into my lane and cut me off my direction. The taxi didn't put on any right signal and he very abruptly swerved into my lane. As the taxi cut into my lane very abruptly without signalling, I applied brakes immediately but wasn't able to avoid impact. The front left of my car had contact with the rear right of the taxi. There were damages to the taxi to the rear lower body as well as the wheel. There were damages to the lower front area of my car. As soon as the impact occurred, I got off the car with my passenger (Zhuanto, LC: S8910084D) to speak to the driver of the taxi.

DECLARATION

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

Continued behind.

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.:

13/08/2019

We exchanged particulars (took photos and agreed to proceed with our insurance companies and report with the police.

I believe the taxi was moving along behind my vehicle on lane 1 of Collyer Quay approaching Finlayson Green. As per road markings, Lane 1 vehicles on Collyer Quay/ Robinson Road Junction have an option to continue left (continue on Collyer Quay) or go towards Finlayson Green (straight). As per road markings, I would assume that ^{vehicles} ~~vehicles~~ on lane 1 of Collyer Quay should filter and keep left most ~~most~~ lane (lane 1 of Finlayson Green) before switching lanes. In the case of this accident, the taxi entered right and tried to get ^{into} ~~that~~ lane 2 even before crossing the yellow box. This is why the accident happened. I have in car video footage (front view) of the accident to corroborate my statement.

Freeh
13/08/2019



MSIG Insurance (Singapore) Pte. Ltd.
4 Shenlon Way #21-01 SGX Centre 2 Singapore 068807
Tel: (65) 6827 7888 Fax: (65) 6827 7800
Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

MOTOR INSURANCE COVER NOTE

Cover Note No. 50508563

A 29113332 Ar2

The Insured named in the Schedule below having proposed for insurance in respect of the Motor Vehicle described in the Schedule below the risk is hereby HELD COVERED in the terms of the Company's usual form of Policy applicable thereto for the period as stated below unless the cover be terminated by the Company by notice in writing in which case the insurance will thereupon cease and a proportionate part of the annual premium otherwise payable for such insurance will be charged for the time the Company has been on risk.

SCHEDULE

Agent No. : 156346
Name of Insured : MOHAMED JOHARI KAZURA
Make and Description of Vehicle : VOLKSWAGEN TIGUAN 1.4 TSI HL
Vehicle Registration No. : SDN 7728 S
Year of Manufacture : 2018
Engine No. : CZE390775
Chassis No. : WVGZZZ5NZJW972674
Capacity : 1,395 Cubic Capacity
Cover Type : Comprehensive
Sum Insured (SGD) : Market Value
Period of Insurance : One year from Date of Registration of the vehicle with LTA
Excess (SGD) : As Agreed
Finance Company : DBS BANK LIMITED

\$1.5k + 7%
Mod: NO
- 30%

I/We hereby certify that this Cover Note is issued in accordance with the Provisions of the Motor Vehicles (Third Party Risks & Compensation) Act (Cap. 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or any Amendment, Act or Acts passed in substitution thereof.

Not valid unless countersigned by the
Company's Authorised Representative

MSIG Insurance (Singapore) Pte. Ltd.
Authorised Insurers

Winner Consultancy Pte. Ltd.

Amy Ler
Senior Vice President, Agencies

Date of Issue : 22/12/2018

This Cover Note is valid for 30 days from the date of issue.

Driving License



radhia24@gmail.com
8127 1724

Identification Card



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo

