#### 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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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

<ol><li>By the lodgement of this report to the insurers, you hereby consaforesaid.</li></ol>	sent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	28/08/2019 12:13
Date Of Accident	15/07/2019 17:15
Exact Location Of Accident	UNKNOWN
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJS5027Y
Insured/Policyholder	
Name Of Registered Owner	SRS AUTO HOLDINGS PTE. LTD.
Co Reg No	201709236H
Email Address	ROGERKTM525@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-90503927
Alternative Phone No	OFFICE-90503927
Vehicle Particulars	
Manufacturer	KIA
Model	CERATO FORTE
Exact Purpose for which vehicle was being used at time of accident	UNKNOWN
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5107510355
Cover Note Number	
Driver	
Name of Driver	MUHAMMAD SUFIYAN BIN RAZALI
NRIC No	S8806271Z
Date Of Birth	04/03/1988

 NRIC No
 \$8806271Z

 Date Of Birth
 04/03/1988

 Occupation
 OUTDOOR

 Date Of Driving Pass
 30/08/2012

Driving Experience 6 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-90503927

Fax Number

Contact Number OTHERS-90503927

EMail Address ROGERKTM525@YAHOO.COM.SG

Address BLK 711 HOUGANG AVENUE 2

#02-143

Postcode 530711

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 NO COLLISION
Weather Conditions UNKNOWN
Road Surface UNKNOWN

**Other Information** 

ambulance?

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?

Was any injured conveyed to hospital by

Was any other material or property damaged?

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

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YES

NO

Number of Passengers (Including Driver)

**Details of Police Action** 

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name CENTRAL POLICE DIVISIONAL HQ (A DIVISION)

Police Station Address

ROAD: 391 NEW BRIDGE ROAD #03-112 POLICE CANTONMENT

COMPLEX BLOCK A, POSTCODE: 088762, COUNTRY: SINGAPORE

Police Station Contact **TEL NO**: 1800-2240000 - **FAX NO**: 62200877

Was notice of intended Prosecution given?

NO

### **Circumstances of Accident**

If Yes, against whom?

PLEASE REFER TO POLICE REPORT A/20190824/7010

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

Vehicle Make/Model/Colour

Details Of Properties UNKNOWN
Vehicle Category NA/UNKNOWN

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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- 5. Any false reporting may be referred to the Police for investigation.
- 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.
- 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 insurers) 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:
  - 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 finanagement 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.

Driver's Signature

Policyho

Date & Tin

(If driver is not the policyholder)

Date & Time:

orting Centre Pe

NRIC/FIN No.:

## **Accident Sketch Plan**

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RCUMSTANCES OF THE ACCIDENT	
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#### POLICE REPORT





1 of 2

#### POLICE REPORT (NP299)

Police Station Of Origin Central Division HQ A 391 New Bridge Road #03-112 Police Cantonment Complex SINGAPORE 088762 Tel No:1800-2240000 Report No. A/20190824/7010

Vide Re	port No.		Station Diary No.
Address			
APT BLK 105 BEDOK NORTH AVENUE 4 #05-2182			
SINGAPORE 460105			
Contact No. Home/Office: Mobile: 90503927			
Email Address absrental.sales@gmail.com			
Sex	Age	Date of Birth	Race
Male	37	18/09/1981	Malay
Language English			
Location Of Incident 6001 BEACH ROAD #22-04A GOLDEN MILE TOWER			
SINGAPORE 199589			
	Address APT BLI SINGAP Contact Home/O Email Adabsrenta Sex Male Languag English Location 6001 BE	SINGAPORE 46011 Contact No. Home/Office:  Email Address absrental.sales@gr Sex Age Male 37 Language English Location Of Incident 6001 BEACH ROA	Address APT BLK 105 BEDOK NORTH AVEN SINGAPORE 460105 Contact No. Home/Office: Mobile: 90503927 Email Address absrental.sales@gmail.com Sex Age Date of Birth Male 37 18/09/1981 Language English Location Of Incident 6001 BEACH ROAD #22-04A GOLDE

#### Brief details.

On the 26th February 2019, we rented a car SJS5027Y Kia Forte to 247 Express Enterprise Pte Ltd at 4pm. 247 Express Enterprise Pte Ltd is a company that do delivery whom usually rents fleet of cars from us ABS Rental Pte Ltd.

Everything was normal until an accident happened on the 15th of July at 5:15pm which was not reported to us. We were told by 247 Express that the driver of the car during the accident was not contactable.

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: 24/08/2019 14:03	
Officer In-Charge Of Case:	Classification Of Case:	
Authentication Stamp		

GBG 2378L

## POLICE REPORT





POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. A/20190824/7010

Suspect			Kensel Edward British British British
Person Name	247 express enterprise pte ltd driver		
ID Type	OTHERS / UEN	ID No	201736626Z
Gender	Unknown	Race	Others
Language	Others	Address	879b TAMPINES AVE 8 #09-57 SINGAPORE 522879
Mobile No	90585820		

Signature Of Officer Recording The Report:	Signature Of Informant: The identity of the person making this
Not applicable	report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 24/08/2019 14:03
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp





























