# 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 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.

| ACCIDENT STATEMENT | |
|---|---|
| Date Of Report | 28/08/2019 12:43 |
| Date Of Accident | 28/08/2019 01:25 |
| Exact Location Of Accident | KAKI BUKIT AUTOHUB BLK 2 KAKI BUKIT AVE 2 #01-15 |
| Country/State of Loss | SINGAPORE |
| **DETAILS OF OWN VEHICLE** | |
| Vehicle Registration Number | SJW2052Y |
| **Insured/Policyholder** | |
| Name Of Registered Owner | MOHAMED ALI BIN ABIDIN |
| NRIC No | S1796260D |
| Email Address | NOEMAIL |
| Mobile Phone No | (LOCAL) +65-98378165 |
| Alternative Phone No | OTHERS-98378165 |
| **Vehicle Particulars** | |
| Manufacturer | PROTON |
| Model | EXORA |
| Exact Purpose for which vehicle was being used at time of accident | PARKED AT THE WORKSHOP |
| Are you claiming under your own insurance policy for repair to your vehicle? | YES |
| If No, Please state action to be taken | |
| Vehicle Category | PRIVATE CAR |
| **Insurance Company** | |
| Name of Insurance Company | AIG ASIA PACIFIC INSURANCE PTE. LTD. |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | 2100196987-09 |
| Cover Note Number | |
| **Driver** | |
| Name of Driver | MOHAMED ALI BIN ABIDIN |
| NRIC No | S1796260D |
| Date Of Birth | 04/02/1967 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 03/03/1997 |
| Driving Experience | 22 YEARS AND 5 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-98378165 |
| Fax Number | |
| Contact Number | OTHERS-98378165 |
| EMail Address | NOEMAIL |

| | |
|---|---|
| Address | BLK 547 PASIR RIS ST 51<br>#10-39 |
| Postcode | 510547 |
| 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 | -<br>-<br>- |
| Insurance Company of Driver's Own Vehicle | -<br>-<br>- |

**General Information of the Accident**

| | |
|---|---|
| Type Of Accident | FIRE, EXPLOSION OR LIGHTNING |
| Weather Conditions | INSIDE WORKSHOP |
| Road Surface | INSIDE WORKSHOP |

**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? | NO |
| Was any other material or property damaged? | NO |
| 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 N.P.C |
| Police Station Address | **ROAD**: 132 PAYA LEBAR ROAD , **POSTCODE:** 409014 , **COUNTRY**: SINGAPORE |
| Police Station Contact | **TEL NO**: - **FAX NO**: |
| Was notice of intended Prosecution given? | NO |
| If Yes,against whom? | |

**Circumstances of Accident**

PLS REFER TO THE POLICE REPORT:G/20190828/2058

**Attachment(s)**

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

## SKETCH PLAN

### IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
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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:

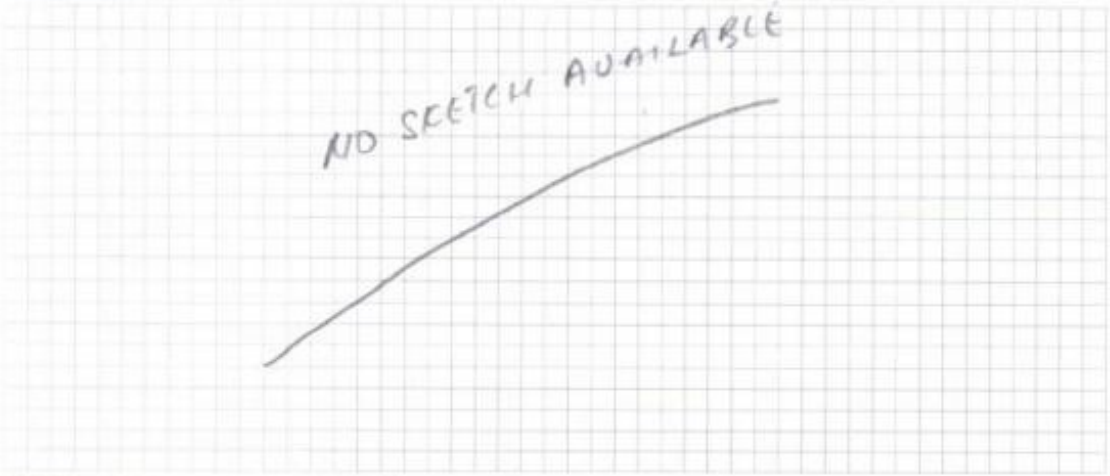
   (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

   (ii) for complying with requirements under any regulations, laws or court orders.

| | | |
|---|---|---|
| Policyholder's Signature<br>Date & Time: 28/8/2019. | Driver's Signature<br>(If driver is not the policyholder)<br>Date & Time: | 28/08/19<br>Reporting Centre Personnel's Signature<br>Name:<br>NRIC/FIN No.: |

## Accident Sketch Plan

**SKETCH PLAN**




**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

P/S refer to the police report.

**DECLARATION**

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

Policyholder's Signature
Date & Time: 28/8/2019.

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

28/08/19
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SINGAPORE POLICE FORCE

G/20190828/2058



**POLICE REPORT (NP299)**

Report No. G/20190828/2058

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

| Date/Time Report Made | Vide Report No. | Station Diary No. |
|---|---|---|
| 28/08/2019 14:19 | | 93 |

| Name Of Informant | Address |
|---|---|
| MOHAMED ALI BIN ABIDIN | APT BLK 547 PASIR RIS STREET 51 #10-39 SINGAPORE 510547 |
| ID Type / ID No. NRIC NO / S1796260D | Contact No. Home/Office: Mobile: 98378165 |
| Nationality SINGAPORE CITIZEN | Email Address |

| Occupation | Sex | Age | Date of Birth | Race |
|---|---|---|---|---|
| Service Engineer | Male | 52 | 04/02/1967 | Indian |

| Institution/School Name | Language |
|---|---|
| | |

| Date/Time Of Incident | Location Of Incident |
|---|---|
| 28/08/2019 01:25 | 2 KAKI BUKIT AVENUE 2 KAKI BUKIT AUTOHUB SINGAPORE 417921 |

**Brief details.**

I sent my vehicle 27/8/19 at around 0000hrs for repairs at "Hup Soon Batteries and Auto Services" located at Blk 2 Kaki Bukit Ave 2 #01-15. My vehicle is Proton Exora bearing the registration plate number of SJW2052Y in silver colour.
On 28/8/19 at around 0955hrs, I received a call from the workshop and they informed me that my vehicle engine caught fire however the fire was put out by SCDF. There were police at scene as well. At around 1000hrs, I went down to make a check on the condition of my vehicle and the whole vehicle very badly

| Signature Of Officer Recording The Report: | Signature Of Informant: |
|---|---|
| G / Sgt 2 CHANG JUN KAI | |
| Signature Of Interpreter: Not applicable | Date/Time: 28/08/2019 14:19 |
| Officer In-Charge Of Case: G / Bedok Police Divisional Investigation Branch / Insp FU ZHANWEI Contact No.: 62447200 | Classification Of Case: |

Authentication Stamp

SIGNATURE

SINGAPORE POLICE FORCE

G/20190828/2058



POLICE REPORT (NP299) CONTINUATION OF REPORT Report No. G/20190828/2058

burnt and not drivable anymore.
I am lodging this police report for insurance claiming purposes. I would also like to state that no one was injured.

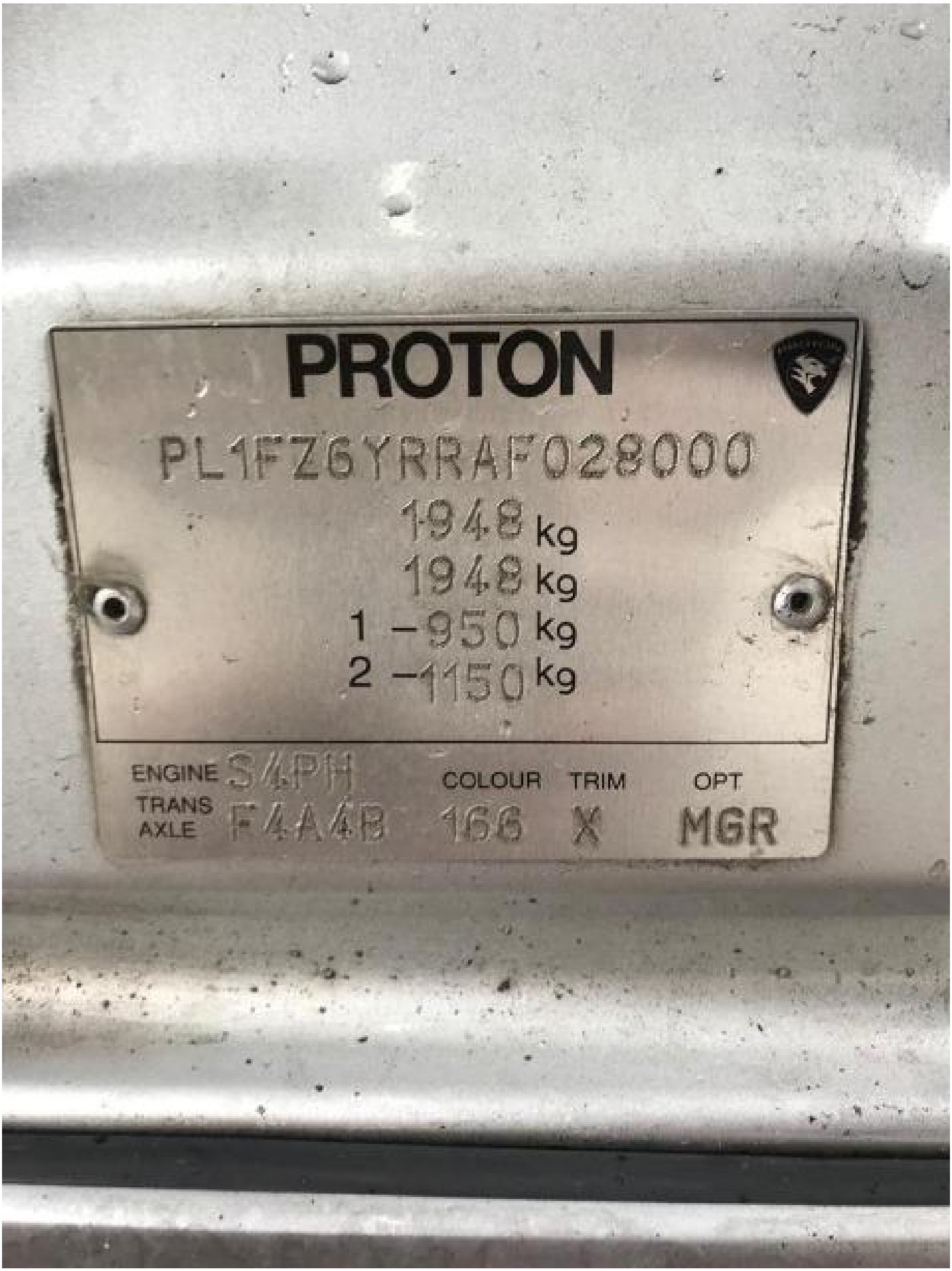
| | |
|---|---|
| Signature Of Officer Recording The Report:<br>G / Sgt 2 CHANG JUN KAI | Signature Of Informant: |
| Signature Of Interpreter:<br>Not applicable | Date/Time:<br>28/08/2019 14:19 |
| Officer In-Charge Of Case:<br>G / Bedok Police Divisional Investigation Branch / Insp FU ZHANWEI<br>Contact No.: 62447200 | Classification Of Case: |

Authentication Stamp

SINGAPORE POLICE FORCE

**Accident Photo**

**Accident Photo**



**Accident Photo**

**Accident Photo**

**Accident Photo**

**Accident Photo**

**Accident Photo**

**Accident Photo**

**Identification Card**