

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	04/09/2019 16:19
Date Of Accident	03/09/2019 10:45
Exact Location Of Accident	WOODLANDS CHECKPOINT DEPARTURE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGJ4986T
Insured/Policyholder	
Name Of Registered Owner	SUZANA BTE ABDUL RAHIM
NRIC No	S6908805H
Email Address	ENDONRAHIM@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-94575614
Alternative Phone No	OTHERS-93874040

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	GRANDIS
Exact Purpose for which vehicle was being used at time of accident	RIVATE 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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5050876237-08
Cover Note Number	

Driver

Name of Driver	MOHAMED SINAR BIN MANAF
NRIC No	S6916932E
Date Of Birth	11/05/1969
Occupation	OUTDOOR
Date Of Driving Pass	04/03/1993
Driving Experience	26 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94575614
Fax Number	
Contact Number	OTHERS-93874040
EEmail Address	CORLEONEGAM@AOL.COM

Address	BLK 243 PASIR RIS ST 21 #10-111
Postcode	510243
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	KAMPONG UBI NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 9 EUNOS CRESCENT #01-2687 , POSTCODE: 400009 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7479999 - FAX NO: 67453410
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20190904/2114

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	SKT535M
Vehicle Make/Model/Colour	
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)

SKETCH PLAN

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)**

(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.

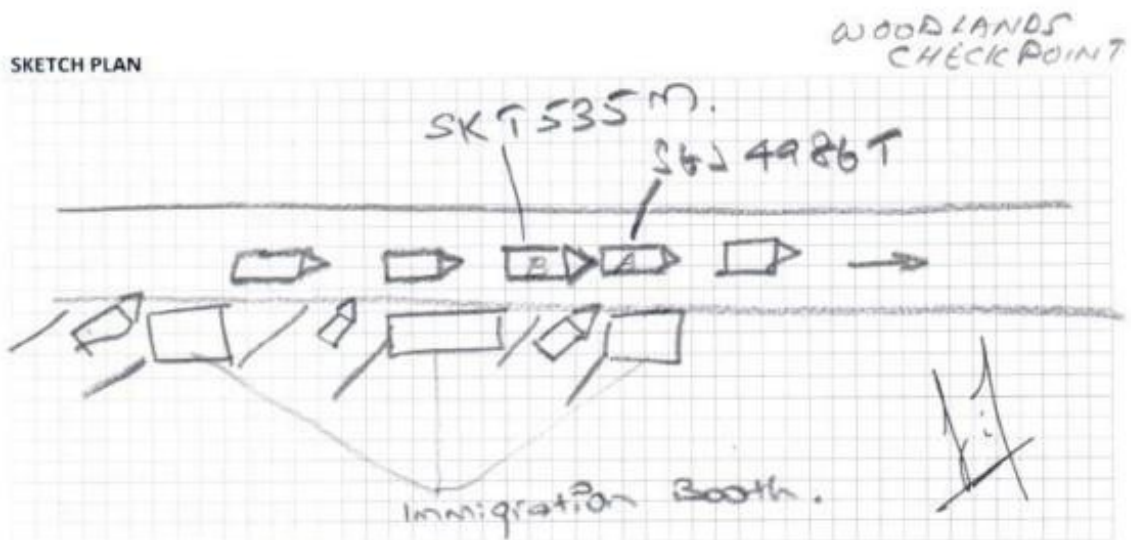
(e) the information so collected under (d) above may be shared / disclosed:

- (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.

 04/09/19
 Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Pls refer to the police report: T/20190904/2114

DECLARATION

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

Policyholder's Signature

Date & Time: 4/9/19

SPRINTAC SketchPlanForm v3.1

Driver's Signature
(If driver is not the policyholder)

Date & Time: 4/9/19

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Individual Statement



**SINGAPORE
POLICE FORCE**



T/20190904/2114

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Report No. T/20190904/2114

Police Station Of Origin:

Kampong Ubi NPP

9 Eunos Crescent #01-2687 SINGAPORE

400009

Tel No: 1800-7479999

CONTINUATION OF REPORT

Brief Details.

On 3/9/19 at about between 1045hrs to 1100hrs(I am not sure exactly the time of accident) , I was driving to Malaysia (Johor Bahru) at woodlands checkpoint just driving through Singapore immigration checkpoint and the traffic was very congested with vehicle at that point of time. The traffic was moving very slowly and subsequently I felt a impact from the rear side of my vehicle. As such, I went down to make a check and realized that one BMW vehicle(SKT535M) from the back collide into the rear bumper of my vehicle. There is several cameras at the vicinity.

There was no injuries suffered from either party. I did not exchange particulars with him because the traffic was very heavy and I just told him to lodged a traffic accident report regarding this matter. I wish to seek redress from Traffic Police regarding this incident and considering making an insurance claim.

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Police Report



**SINGAPORE
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T/20190804/2114

1 of 3

Police Station Of Origin:
Kampong Ubi NPP
9 Eunos Crescent #01-2687 SINGAPORE
400009
Tel No: 1800 7479969

Report No: T/20190804/2114

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/09/2019 15:44		Vide Report No.:		Station Diary No.: 18	
Informant's Particulars					
Name of Informant: MOHAMED SINAR BIN MANAF			Address: APT BLK 243 PASIR RIS STREET 21 #10-111 SINGAPORE 510243		
ID Type / ID No.: NRIC NO / S8918932E			Contact No.: Home/Office:		Mobile: 93874040
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 50	Date of Birth: 11/05/1969	Type of Informant: Driver		
Race: Malay			Language: English		Institution / School Name:
Occupation: Odd job person			Driving Licence Information: Class: 2B,2A,2,3		Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 03/09/2019 10:45	Type of Location: Straight Road
Location: Along Road 1 Woodlands Crossing				
Woodlands Checkpoint Departure				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

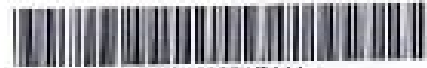
Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGJ4986T	Car	MITSUBISHI	GRANDIS 2.4	White	Slightly Damaged	0
SKT635M	Car	BMW	535i 3.0L AT D/AB 2WD 4DR GAS/D SR HUD	Grey		0

Police Report



**SINGAPORE
POLICE FORCE**



T/20190804/2114

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8 Eunos Crescent #01-2687 SINGAPORE

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Police Report



SINGAPORE
POLICE FORCE



T/20190904/2114

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Report No. T/20190904/2114

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Kampong Ubi NPP
8 Eunus Crescent #01-2687 SINGAPORE
400009
Tel No: 1800-7479999

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 2 MELSON CHEW WEI JIE

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIA /

Staff Sgt WONG SIEU LUI

Contact No.: 65476151

Authentication Stamp

NP189

Signature Of Informant:

Date/Time:

04/09/2019 15:44

Classification Of Case:



SINGAPORE
POLICE FORCE

SIGNATURE