

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	19/09/2019 12:03
Date Of Accident	18/09/2019 09:15
Exact Location Of Accident	ALONG THOMSON ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBC8345M
Insured/Policyholder	
Name Of Registered Owner	GOLDBELL CAR RENTAL PTE LTD
Co Reg No	200710651D
Email Address	MUHAMMADZAKI.SALIM@KONE.COM
Mobile Phone No	(LOCAL) +65-86866304
Alternative Phone No	OFFICE-86866304

Vehicle Particulars

Manufacturer	NISSAN
Model	NV200
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	999994313
Cover Note Number	

Driver

Name of Driver	MUHAMMAD ZAKI BIN SALIM
NRIC No	S7730693E
Date Of Birth	14/10/1977
Occupation	OUTDOOR
Date Of Driving Pass	28/07/2009
Driving Experience	10 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-86866304
Fax Number	
Contact Number	OTHERS-86866304
EEmail Address	MUHAMMADZAKI.SALIM@KONE.COM

Address	BLK 656 SENJA ROAD #08-266
Postcode	670656
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 MOTORCYCLIST
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	JTC5395 (MOTORCYCLE)
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	TELOK BLANGAH NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 51 TELOK BLANGAH DRIVE , POSTCODE: 100051 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2729999 - FAX NO: 63772526
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190918/2095

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	JTC5395
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LEE CHUN THIM
NRIC/Passport Number	840612-08-5861
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 Traffic Police Department for investigation.
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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' law firms/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;



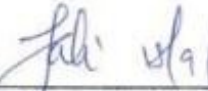

(iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelope/mail packages); and/or

(v) complying with applicable law in administering, processing, handling and/or dealing with my claims.

(collectively the "Purposes")

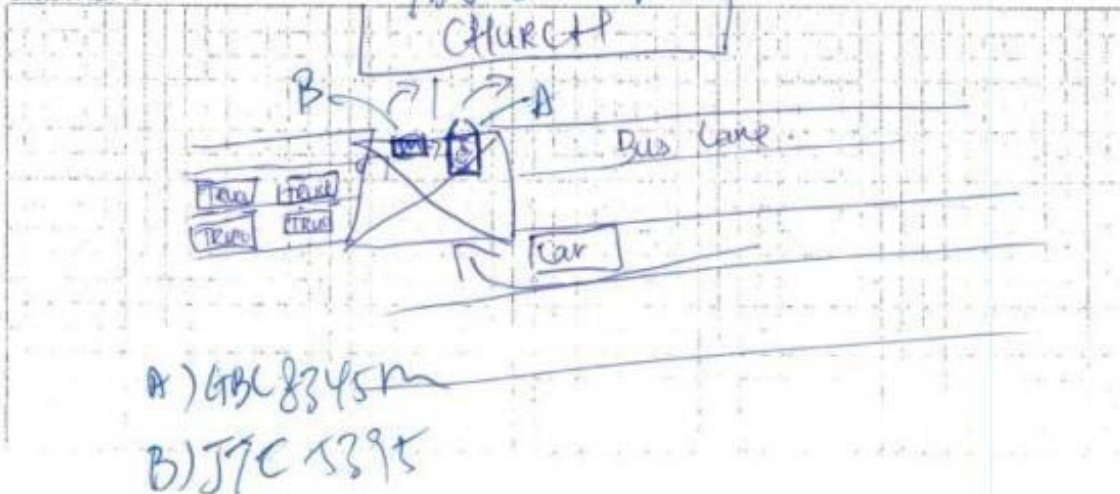
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(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.

Policyholder's Signature / Date & Time Driver's Signature (if driver is not the policyholder) / Date & Time Witnessed by Reporting Centre Personnel

Sketch Plan



Accident Sketch Plan

Describe Circumstance of the Accident *

- ① Along Road 1 Traveling Toward Road 2
- ② Thomson Road to Marymount Road
- ③ Junction of St. Alphonsus Church
- ④ X - Junction
- ⑤ Heavy traffic
- ⑥ Not Controlled traffic
- ⑦ Turning right into Navena Church of Alphonsus

REFER TO POLICE REPORT 1/20190918/2015

Declaration

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

Policyholder's Signature / 

* Driver's Signature (if driver is not the policyholder) / Date & Time *John 18/9/2019 1500Hrs.*

Witnessed by Reporting Centre Personnel *19/09/2019*

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190918/2095

Police Station Of Origin:
Telok Blangah NPP
51 Telok Blangah Drive #01-116
SINGAPORE 100055
Tel No: 1800-2729999

1 of 3
Report No: T/20190918/2095

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/09/2019 14:03	Video Report No.: E/20190918/0051	Station Diary No.: 11
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Informant's Particulars			
Name of Informant: MUHAMMAD ZAKI BIN SALIM		Address: APT BLK 656 SENJA ROAD #08-266 SINGAPORE 670656	
ID Type / ID No: NRIC NO / S7730693E		Contact No.: Home/Office: Mobile: 86866304	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 41	Date of Birth: 14/10/1977	Type of Informant: Driver
Race: Javanese		Language:	Institution / School Name:
Occupation: STOREMAN		Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Non-Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 18/09/2019 09:15	Type of Location: X-Junction
Location: Along Road 1 Traveling Toward Road 2 THOMSON ROAD MARYMOUNT ROAD Junction of St. Alphonsus Church				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBC8345M	Van	NISSAN	NV200	White	Slightly Damaged	1
JTC5395	Motorcycle				Slightly Damaged	0

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

POLICE REPORT



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T/20190918/2095

Police Station Of Origin:
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51 Telok Blangah Drive #01-116
SINGAPORE 100055
Tel No: 1800-2729999

2 of 3

Report No. T/20190918/2095

CONTINUATION OF REPORT

Driver			
Name	MUHAMMAD ZAKI BIN SALIM	ID No.	S7730693E
Related Vehicle	GBC8345M (Van)	Contact No.	86866304
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Rider			
Name	LEE CHUN TIM	ID No.	G7885935R
Related Vehicle	JTC5395 (Motorcycle)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details:

On 18/09/2019 at around 0916hrs, I was at the junction of Thomson Road towards Marymount Road near L/P 42/1 as I was waiting to make a right turn. As the oncoming vehicles had stopped before the yellow box due to the heavy traffic, I proceeded to make the right turn after checking that it was safe to do so. However as I make the right turn, one Malaysian registered motorcycle came from the oncoming traffic in the left most lane along the double yellow line. At that point of time, the said motorcycle had overtaken a heavy vehicle in the said lane on its left side. As such, the motorcycle collided onto the left side of my vehicle while I was making the right turn.

I wish to state no one was injured during the accident and that the front left fender of my vehicle was damaged. I wish to add that I do not have any camera installed in my vehicle and Traffic Police had attended to the accident earlier.

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190918/2095

Police Station Of Origin:
Telok Blangah NPP
51 Telok Blangah Drive #01-116
SINGAPORE 100055
Tel No: 1800-2729999

3 of 3

Report No. T/20190918/2095

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:

D /

Staff Sgt MUHAMMAD FADLEY BIN
MASHWARI

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

Sgt 2 SHARIFAH NOR FARIZAN BINTE SYED
MOHD SAID

Contact No: 65476172

Authentication Stamp

NP168

Singapore Police Force

Signature Of Informant:

Date/Time:

18/09/2019 14:03

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

