

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 | 03/10/2019 16:26 |
| Date Of Accident | 03/10/2019 12:50 |
| Exact Location Of Accident | BRADDELL RD TWDS CTE |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------|
| Vehicle Registration Number | SML3987R |
|-----------------------------|----------|

Insured/Policyholder

| | |
|--------------------------|------------------------------|
| Name Of Registered Owner | SUPER STAR LIMO & CAR RENTAL |
| Co Reg No | 53359119L |
| Email Address | NOEMAIL |
| Mobile Phone No | |
| Alternative Phone No | OFFICE-89999999 |

Vehicle Particulars

| | |
|--|--|
| Manufacturer | TOYOTA |
| Model | NOAH HYBRID 1.8X AT ABS D/AIRBAG 2WD 5DR |
| Exact Purpose for which vehicle was being used at time of accident | COMMERCIAL 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 HIRE |

Insurance Company

| | |
|---------------------------|--|
| Name of Insurance Company | NTUC INCOME INSURANCE CO-OPERATIVE LTD |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | YES |
| Policy Number | 5108614334 |
| Cover Note Number | |

Driver

| | |
|----------------------|----------------------------|
| Name of Driver | MOHAMMAD FADZLI BIN SARIFF |
| NRIC No | S8233487D |
| Date Of Birth | 17/10/1982 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 10/01/2006 |
| Driving Experience | 13 YEARS AND 8 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-86088839 |
| Fax Number | |
| Contact Number | OFFICE-86088839 |
| Email Address | NOEMAIL |

| | |
|---|-------------------------------------|
| Address | BLK 138 BISHAN STREET 12 #09-466 |
| Postcode | 570138 |
| 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 | COLLISION - MAJOR/MINOR RD |
| Weather Conditions | CLEAR |
| Road Surface | DRY |

Other Information

| | |
|---|---------------------|
| Was any foreign vehicle involved in this accident? | YES |
| Foreign Vehicle Registration Number | VDB702 (MOTORCYCLE) |
| Number of vehicles (including own vehicle) involved in the accident | 4 |
| Was any body injured in the Accident? | YES |
| 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 | BISHAN NEIGHBOURHOOD POLICE CENTRE |
| Police Station Address | ROAD: 20 BISHAN STREET 23 , POSTCODE: 579757 , COUNTRY: SINGAPORE |
| Police Station Contact | TEL NO: 1800-5529999 - FAX NO: 65561905 |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

REFER TO POLICE REPORT - T/20191003/2099.

Attachment(s)

| | |
|---|-----------------------------------|
| Are accident photos available for attachment? | YES |
| Was there any video captured by Car Camera? | YES |
| Remarks/ Reasons: | VIDEO FOOTAGE WITH TRAFFIC POLICE |
| Was there any audio recorded? | NO |

DETAILS OF OTHER VEHICLE PROPERTY 1

| | |
|-----------------------------|---------------|
| Vehicle Registration Number | PA7485T |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | BUS |
| Name of Driver | TAN SENG HONG |
| NRIC/Passport Number | S0228154F |
| Contact Number | |
| Address | |

Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number VDB702
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category MOTORCYCLE
Name of Driver
NRIC/Passport Number
Contact Number 98811769
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver) 2
Passenger 1
NAME: :
GENDER: :

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number QS55J
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category MOTORCYCLE
Name of Driver
NRIC/Passport Number
Contact Number 81610163
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver) 2
Passenger 1
NAME: :
GENDER: :

DETAILS OF INJURED PERSON 1

Name MOHAMMAD FADZLI BIN SARIFF
Approximate Age
Injuries Sustain BODY
Injured person in which vehicle? SML3987R
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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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.

SUPER STAR LIMO & CAR RENTAL
Reg. No.: 53359119L

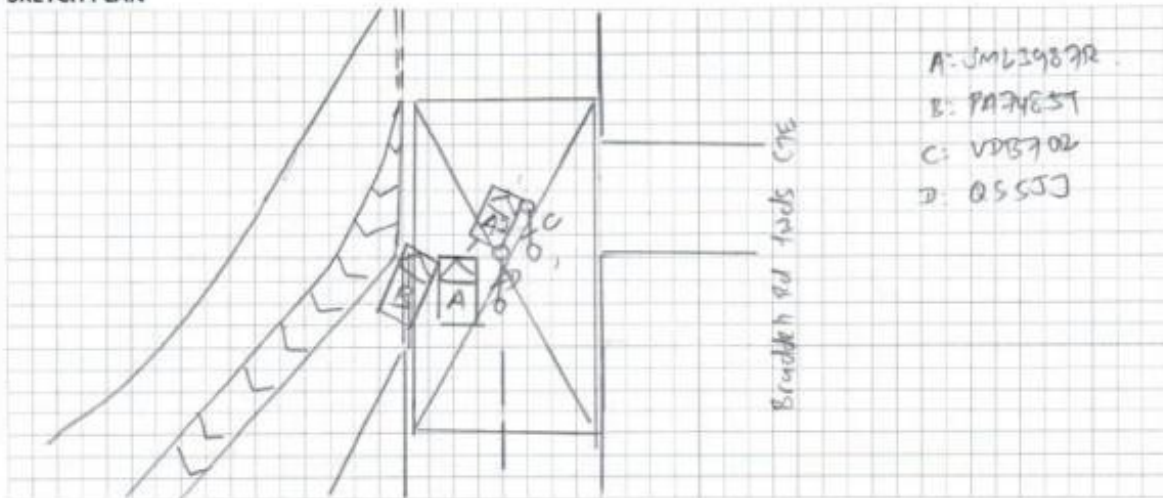
Policyholder's Signature
Date & Time:

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

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

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report - 7/2019/003/2019.

DECLARATION

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

SUPER STAR LIMO & CAR RENTAL
Reg. No.: 53359119L

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.:

Police Report



**SINGAPORE
POLICE FORCE**



T/20191003/2099

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

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Report No. T/20191003/2099

REPORT OF A TRAFFIC ACCIDENT

| | | | | |
|--|------------|---|------------------------------|--------------------------|
| Date/Time Report Made: 03/10/2019 15:25 | | Vide Report No.: E/20191003/0073 | | Station Diary No.: 77 |
| Informant's Particulars | | | | |
| Name of Informant: MOHAMMAD FADZLI BIN SARIFF | | Address: APT BLK 138 BISHAN STREET 12 #09-466 SINGAPORE 570138 | | |
| ID Type / ID No.: NRIC NO / S8233487D | | Contact No.: Home/Office: Mobile: 86088839 | | |
| Nationality: SINGAPORE CITIZEN | | Email: | | |
| Sex: Male | Age: 36 | Date of Birth: 17/10/1982 | Type of Informant: Driver | |
| Race: Malay | | Language: English | Institution / School Name: | |
| Occupation: GOJEK DRIVER | | Driving Licence Information: Class: 3 Date of Expiry: | | |

| | | | | |
|---|------------------------------------|-----------------------------|--|---------------------------------|
| General Information of the Accident | | | | |
| Type of Accident: | Injury Foreign Vehicle | Drink Drive: No | Date/Time of Accident: 03/10/2019 12:50 | Type of Location: X-Junction |
| Location: Along Road 1 Traveling Toward Road 2 BRADDELL ROAD CENTRAL EXPRESSWAY Occurred at junction of Lorong Chuan and CTE along Braddell Road. | | | | |
| Weather: Cloudy | Road Surface: Dry | Road Speed Limit: | | |
| Traffic Flow: One Way | Traffic Control: Not Controlled | Traffic Volume: Moderate | | |
| 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 |
| PA7485T | Van | | | | Slightly Damaged | 0 |
| QS55J | Motorcycle | | | | Slightly Damaged | 1 |
| SML3987R | Car | TOYOTA | NOAH HYBRID 1.8X AT ABS D/AIRBAG 2WD 5DR | White | Slightly Damaged | 0 |

Police Report



**SINGAPORE
POLICE FORCE**



T/20191003/2099

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

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Report No. T/20191003/2099

CONTINUATION OF REPORT

| Details of Vehicle Involved | | | | | | |
|-----------------------------|------------|------|-------|-------|------------------|-----------------|
| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
| VDB702 | Motorcycle | | | | Slightly Damaged | 1 |

| Details of Person Involved | | | |
|-----------------------------------|----------------------------|--------------------------------|---|
| Any Pedestrian Involved: No | | | |
| No. of Pedestrians Injured: NIL | | Use of Pedestrian Crossing: NA | |
| Driver | | | |
| Name | TAN SENG HONG | | ID No. S0228154F |
| Related Vehicle | PA7485T (Van) | | 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 |
| Driver | | | |
| Name | Unknown | | ID No. NIL |
| Related Vehicle | QS55J (Motorcycle) | | Contact No. 81610163 |
| 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 Slight |
| Driver | | | |
| Name | MOHAMMAD FADZLI BIN SARIFF | | ID No. S8233487D |
| Related Vehicle | SML3987R (Car) | | Contact No. 86088839 |
| Hospital/Clinic | NIL | | Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL |
| Date Treatment | NIL | | Date Discharge NIL |
| No. of Days granted Medical Leave | NIL | | Degree of Injury NIL |

Police Report



**SINGAPORE
POLICE FORCE**



T/20191003/2099

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

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Report No. T/20191003/2099

CONTINUATION OF REPORT

| | | | | |
|-----------------------------------|---------------------|------------------|--|-----------------------------------|
| Name | Unknown | | ID No. | NIL |
| Related Vehicle | VDB702 (Motorcycle) | | Contact No. | 98811769 |
| 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 | Slight | |

Brief Details.

On 03/10/2019 at about 1250hrs, I was travelling along Braddell Road(From Bartley Road) towards CTE(SLE) in my vehicle(SML3987R) on the leftmost lane of a 2 lane road. Whilst at the junction of Braddell Road(from Lornie Highway) and Lorong Chuan, I suddenly felt an impact come from the left of my vehicle, causing it to be pushed to the right where I collided into two other Malaysian registered motorcycles(VDB702) and (QS55J). I thus exited my vehicle and made a check, and there discovered that another van(PA7485T) had collided into the left side of my vehicle. I immediately called for police and ambulance. I do have in car camera installed at the front and rear of my vehicle, and it has already been handed over to traffic police. I am lodging this report at the instruction of traffic police.

Police Report



**SINGAPORE
POLICE FORCE**



T/20191003/2099

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

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Report No. T/20191003/2099

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:

E /

Sgt 2 LEE QI, THEODORE

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

03/10/2019 15:25

Officer In Charge Of Case:

TP / AEIT /

SI MOHAMAD ZULFAZDLI BIN ABDULLAH

Contact No.: 65476204

Classification Of Case:

Authentication Stamp
NP168

SN 061

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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