

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	25/10/2019 17:54
Date Of Accident	25/10/2019 00:55
Exact Location Of Accident	SERANGOON NORTH AVE 1 CARPARK ENTRANCE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGK3317B
Insured/Policyholder	
Name Of Registered Owner	ISMAIL BIN SHAJOHAN
NRIC No	S9419265Z
Email Address	ISMAILSHAJOHAN@GMAIL.COM
Mobile Phone No	(LOCAL) +65-97726923
Alternative Phone No	OFFICE-97726923

Vehicle Particulars

Manufacturer	MITSUBISHI
Model	LANCER
Exact Purpose for which vehicle was being used at time of accident	PRIVATE 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	5097861361-01
Cover Note Number	

Driver

Name of Driver	ISMAIL BIN SHAJOHAN
NRIC No	S9419265Z
Date Of Birth	24/05/1994
Occupation	OUTDOOR
Date Of Driving Pass	14/05/2013
Driving Experience	6 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97726923
Fax Number	
Contact Number	OFFICE-97726923
Email Address	ISMAILSHAJOHAN@GMAIL.COM

Address	BLK 924 TAMPINES STREET 91 #02-257 SINGAPORE 520924
Postcode	520924
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	-
	-
	-
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	TAMPINES N.P.C
Police Station Address	ROAD: TAMPINES N.P.C , POSTCODE: 529682 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH DRIVER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMH8260S
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)

Accident Sketch Plan

SKETCH PLAN


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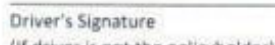
8. Consent under the Personal Data Protection Act (PDPA)

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' 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
Date & Time:



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



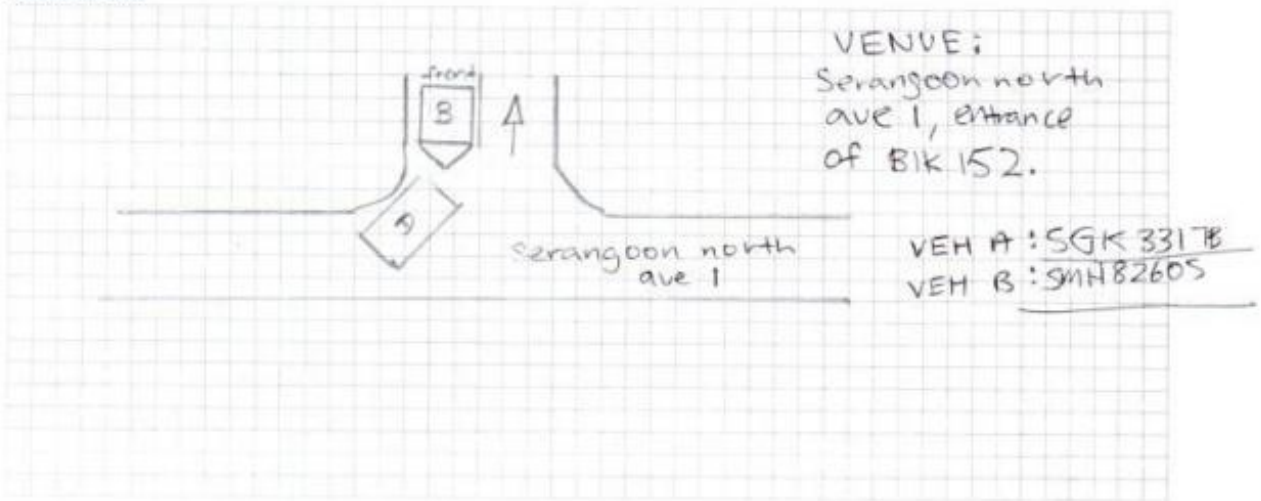
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN

VENUE:
Serangoon north
ave 1, entrance
of BIK 152.

VEH A: SGK 3317B
VEH B: SMH 8260S



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

refer to
Police report
report no. T/20191025/2128

DECLARATION

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

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/20191025/2128

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

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Report No. T/20191025/2128

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/10/2019 17:09	Vide Report No.:	Station Diary No.: 68
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Informant's Particulars				
Name of Informant: ISMAIL BIN SHAJOHAN		Address: APT BLK 924 TAMPINES STREET 91 #02-257 SINGAPORE 520924		
ID Type / ID No.: NRIC NO / S9419265Z		Contact No.: Home/Office: Mobile: 97726923		
Nationality: SINGAPORE CITIZEN		Email:		
Sex: Male	Age: 25	Date of Birth: 24/05/1994	Type of Informant: Driver	
Race: Malay		Language: English	Institution / School Name:	
Occupation: GRAB DRIVER		Driving Licence Information: Class: 2B,2A,3		Date of Expiry:

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 25/10/2019 00:55	Type of Location: T-Junction
Location: Along Road 1 SERANGOON NORTH AVENUE 1 carpark entrance of Blk 152 Serangoon North Ave 1				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control: Not Controlled	Traffic Volume: No Traffic	
Type of Collision: CAR REVERSED INTO REAR CAR			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGK3317B	Car	MITSUBISHI	LANCER 1.6 A	Silver	Slightly Damaged	0
SMH8260S	Car				Slightly Damaged	2

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SGK3317B	NTUC Income Insurance Co-Operative Limited	5097861361-01	07/02/2019	06/02/2020

Police Report



**SINGAPORE
POLICE FORCE**



T/20191025/2128

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Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

Report No. T/20191025/2128

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	ISMAIL BIN SHAJOHAN	ID No.	S9419265Z
Related Vehicle	SGK3317B (Car)	Contact No.	97726923
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the 25/10/2019 at about 0054hrs, I was driving my car bearing SGK3317B along Serangoon North Ave 1. I was turning into carpark of Blk 152 Serangoon North Ave 1, there was a dark colored Hyundai Kona bearing vehicle no.SMH8260S in front of my car that also turned into the carpark entrance of Blk 152 Serangoon North Ave 1. However, he stopped before the carpark gantry and picked up 2 male passengers. As such, I had stopped and my car was stationary and waiting behind the car the entire time. However, after the car had picked up the passengers, he reversed his car and his rear collided into the front portion of my car. He then continued to do a three point turn and just drove away. I tried to sound my horn multiple times to signal him to stop but to no avail.

I wish to state that I have in car camera installed in my car and it captured the entire incident.

As a result of the accident, my car has scratches and dent on the front bumper.

Police Report



**SINGAPORE
POLICE FORCE**



T/20191025/2128

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

3 of 3

Report No. T/20191025/2128

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 3 MUHAMMAD DANIYAL BIN
BAHARUDDIN

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / HRT /

Insp GOH GEOK LYE

Contact No.: 65476148

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

25/10/2019 17:09

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

