

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	02/10/2019 01:29
Date Of Accident	28/09/2019 21:15
Exact Location Of Accident	BUKIT PANJANG RING RD BJ49 CARPARK ENTRANCE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBH5129P
Insured/Policyholder	
Name Of Registered Owner	BAN HOCK HIN (LEASING)
Co Reg No	197000288K
Email Address	RAYMOND@BHH.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-62816520

Vehicle Particulars

Manufacturer	YAMAHA
Model	YBR 125 MANUAL
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
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	MOTORCYCLE

Insurance Company

Name of Insurance Company	ALLIED WORLD ASSURANCE COMPANY, LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	AVFMSB0000591702
Cover Note Number	

Driver

Name of Driver	ARMAN BIN AHMAD
NRIC No	S8125453B
Date Of Birth	10/04/1981
Occupation	OUTDOOR
Date Of Driving Pass	27/12/2000
Driving Experience	18 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87821941
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	NIL
Postcode	
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 - HEAD ON COLLISION
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 [OTHER]	JURONG DIVISION HQ
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT NO. J/20190929/7015 LODGE AT JURONG DIVISION HQ I WAS QUEUING AT THE CARPARK GANTRY, I AM RIDING A COMPANY'S MOTORCYCLE DOING MY ENFORCEMENT DUTIES. THERE WAS A MALAYSIAN AT THE CARPARK GANTRY AND FEW 2 OR 3 VEHICLES IN FRONT OF ME. THE CAR IN FRONT OF ME WAS A BIT IMPATIENT AND WANTED TO REVERSE AND DROVE OFF TO OTHER LOCATION BECAUSE OF THE QUEUE. THE DRIVER REVERSE AND NOT KNOWING I WAS BEHIND HIM AND HIT MY FRONT AND ALSO BROKE MY MUDGUARD. I ALREADY TOOK A PICTURES OF HIS VEHICLE AND NRIC SKX1983A LEONG SHI JUN

Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKX1983A
Vehicle Make/Model/Colour	NISSAN / QASHQAI 1.2 DIG-T CVT ABS 2WD 5DR / RED
Details Of Properties	NA
Vehicle Category	PRIVATE CAR
Name of Driver	LEONG SHI JUN
NRIC/Passport Number	S8301592F
Contact Number	93681983
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

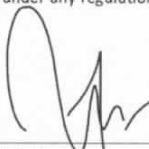
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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

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
Date & Time:

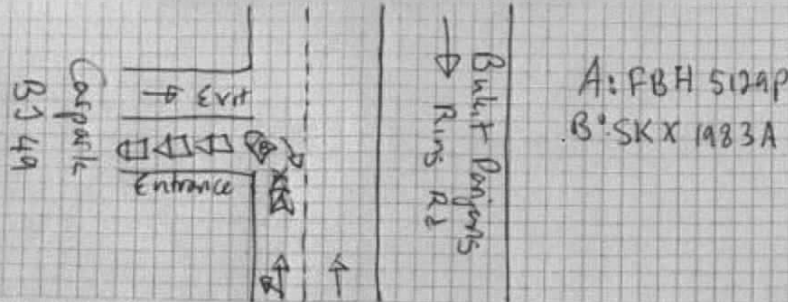

Driver's Signature
(If driver is not the policyholder)
Date & Time:

VERIFY BY AJAX MARS (ARC)
REPORTING OFFICER
AIZAM BIN ATAN

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

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO ATTACHED STATEMENT.

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:

VERIFY BY AJAX MARS (ARC)
REPORTING OFFICER
AIZAM BIN ATAN

Reporting Centre Personnel's Signature
Name:
AIRM/IDM No.:



**SINGAPORE
POLICE FORCE**



J20190929/7015

1 of 3

POLICE REPORT (NP299)

Police Station Of Origin
Jurong Division HQ
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No: 1800-7910000

Report No. J20190929/7015

Date/Time Report Made 29/09/2019 17:40	Video Report No.	Station Diary No.
Name Of Informant ARMAN BIN AHMAD	Address 224A SUMANG LANE #03-135 SINGAPORE 821224	
ID Type / ID No. NRIC NO / S8125453B	Contact No.	Mobile: 87821941
Nationality SINGAPORE CITIZEN	Email Address ARMAN_AHMAD29@YAHOO.COM.SG	
Occupation CARPARK ENFORCEMENT OFFICER	Sex Male	Age 38
Institution/School Name	Date of Birth 10/08/1981	Race Malay
Date/Time Of Incident 28/09/2019 21:08 - 28/09/2019 21:15	Location Of Incident BUKIT PANJANG RING ROAD	

Brief details.

I WAS QUEUEING AT THE CARPARK GANTRY. I AM RIDING A COMPANY'S MOTORCYCLE DOING MY ENFORCEMENT DUTIES. THERE WAS A MALAYSIAN AT THE CARPARK GANTRY AND FEW 2 OR 3 VEHICLES IN FRONT OF ME. THE CAR IN FRONT OF ME WAS A BIT IMPATIENT AND WANTED TO REVERSE AND DROVE OFF TO OTHER LOCATION BECAUSE OF THE QUEUE. THE DRIVER REVERSE AND NOT KNOWING I WAS BEHIND HIM AND HIT MY FRONT AND ALSO BROKE MY MUDGUARD. I AREADY TOOK A PICTURE OF HIS VEHICLE AND NRIC.

SKX1883A

LEONG SHI JUN

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 29/09/2019 17:40
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp



**SINGAPORE
POLICE FORCE**



2 of 3

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20190929/7015

S8301592F
HP: 93681963

MY PARTICULARS
ARMAN BIN AHMAD
S8125453B
87821941
COMPANY'S VEHICLE NUMBER:
FBH5192P

THAT'S ALL.

Subjects Involved			
Victim			
Person Name	ARMAN BIN AHMAD		
ID Type	NRIC NO	ID No	S8125453B
Gender	Male	Age	38
Race	Malay	Language	English
Occupation	CARPARK ENFORCEMENT	Address	224A SUMANG LANE #03-135
	OFFICER		SINGAPORE 821224
Mobile No	87821941	Is Informant A	Yes
		Victim?	

Person Name ARMAN BIN AHMAD (Informant)

Signature Of Officer Recording The Report:

Not applicable

Signature Of Interpreter:

Not applicable

Officer In-Charge Of Case:



Signature Of Informant:

The identity of the person making this report has been authenticated by SingPass. No signature is required.

Date/Time:
29/09/2019 17:40

Classification Of Case:

Authentication Stamp

 SINGAPORE POLICE FORCE POLICE REPORT (NP298)		 J/20190929/7015	3 of 3
CONTINUATION OF REPORT		Report No. J/20190929/7015	
<div style="border: 1px solid black; height: 100px; width: 100%;"></div>			
Signature Of Officer Recording The Report: Not applicable		Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.	
Signature Of Interpreter: Not applicable		Date/Time: 29/09/2019 17:40	
Officer In-Charge Of Case:		Classification Of Case:	
Authentication Stamp			