

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 | 08/11/2019 10:17 |
| Date Of Accident | 07/11/2019 07:40 |
| Exact Location Of Accident | ALONG KJE TOWARDS BKE (WOODLANDS) AT LANE 3 |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|-----------------------------|
| Vehicle Registration Number | GBC4416T |
| Insured/Policyholder | |
| Name Of Registered Owner | GOLDBELL CAR RENTAL PTE LTD |
| Co Reg No | 200710651D |
| Email Address | NOEMAIL |
| Mobile Phone No | (LOCAL) +65-96976008 |
| Alternative Phone No | Office-96976008 |

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 | THIRD PARTY |
| 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 FAHMI BIN MASHWARI |
| NRIC No | S9030909I |
| Date Of Birth | 28/08/1990 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 14/04/2015 |
| Driving Experience | 4 YEARS AND 6 MONTHS |

| | |
|---|--|
| Gender | MALE |
| Mobile Number | (LOCAL) +65-96976008 |
| Fax Number | |
| Contact Number | OTHERS-96976008 |
| EMail Address | NOEMAIL |
| Address | BLK 261 JURONG EAST STREET 24 #02-467 |
| Postcode | 600261 |
| 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 | CHAIN 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 | 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 | JURONG EAST NEIGHBOURHOOD POLICE CENTRE |
| Police Station Address | ROAD: NO. 92 BOON LAY WAY , POSTCODE: 609962 , COUNTRY: SINGAPORE |
| Police Station Contact | TEL NO: 1800-8999999 - FAX NO: 66655791 |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20191107/2146

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 | SHC459A |
| Vehicle Make/Model/Colour | HYUNDAI IONIQ |
| Details Of Properties | |

| | |
|-------------------------------------|----------------------|
| Vehicle Category | TAXI |
| Name of Driver | POH CHER KIM |
| NRIC/Passport Number | S0095573F |
| Contact Number | 93691245 |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |
| No. Of Passenger (Including Driver) | 2 |
| Passenger 1 | Name: : Gender: : |

DETAILS OF OTHER VEHICLE PROPERTY 2

| | |
|-------------------------------------|--------------------|
| Vehicle Registration Number | GBG8502E |
| Vehicle Make/Model/Colour | TOYOTA DYNA |
| Details Of Properties | |
| Vehicle Category | COMMERCIAL VEHICLE |
| Name of Driver | KWEK TECK HWA |
| NRIC/Passport Number | S1425988J |
| Contact Number | |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |
| No. Of Passenger (Including Driver) | 1 |

DETAILS OF OTHER VEHICLE PROPERTY 3

| | |
|-------------------------------------|-------------|
| Vehicle Registration Number | SLJ3328R |
| Vehicle Make/Model/Colour | TOYOTA WISH |
| Details Of Properties | |
| Vehicle Category | PRIVATE CAR |
| Name of Driver | NG HUA KUAN |
| NRIC/Passport Number | S7785338C |
| Contact Number | 91088546 |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |
| No. Of Passenger (Including Driver) | 1 |

DETAILS OF INJURED PERSON 1

| | |
|---|-----------------------------|
| Name | MUHAMMAD FAHMI BIN MASHWARI |
| Approximate Age | |
| Injuries Sustain | SLIGHT INJURY |
| Injured person in which vehicle? | GBC4416T |
| Were seat belts worn? | YES |
| Was this injured conveyed to hospital by ambulance? | NO |
| Address | |
| Postcode | |

Accident Sketch Plan

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, dispose 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.

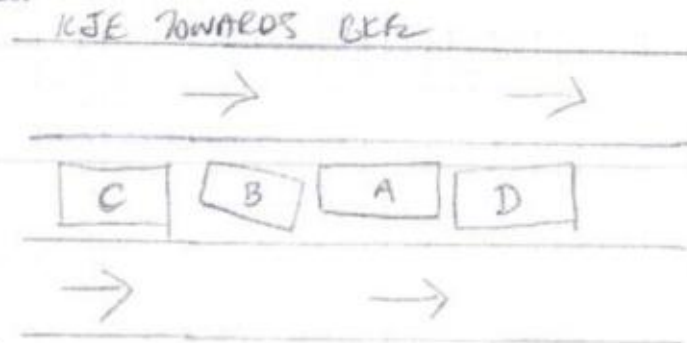

Policyholder's Signature
Date & Time:




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


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

SKETCH PLAN



A) GAC 4416T

C) GAG 8502E

B) SHC 459A

D) SLJ 3328R

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Handwritten text in the description area:

PLS REFER TO POLICE REPORT
7/20/19 107/2146

DECLARATION

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

Policyholder's Signature
Date & Time:

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

Reporting Centre Person's Signature
Name
NRIC/PIN No:

POLICE REPORT

ment face
an window.



**SINGAPORE
POLICE FORCE**



T/20191107/2146

Police Station Of Origin:
Jurong East N.P.C
92 Boon Lay Way SINGAPORE 609962
Tel No: 1800-8999999

1 of 4
Report No: T/20191107/2146

REPORT OF A TRAFFIC ACCIDENT

| | | |
|--|-------------------------------------|---------------------------|
| Date/Time Report Made: 07/11/2019 18:07 | Vide Report No.: J/20191107/0059 | Station Diary No.: 114 |
|--|-------------------------------------|---------------------------|

Informant's Particulars

| | | | |
|--|------------|---|------------------------------|
| Name of Informant: MUHAMMAD FAHMI BIN MASHWARI | | Address: APT BLK 261 JURONG EAST STREET 24 #02-467 SINGAPORE 600261 | |
| ID Type / ID No.: NRIC NO / S90309091 | | Contact No.: Home/Office: Mobile: 96976008 | |
| Nationality: SINGAPORE CITIZEN | | Email: | |
| Sex: Male | Age: 29 | Date of Birth: 28/08/1990 | Type of Informant: Driver |
| Race: Boyanesse | | Language: English | Institution / School Name: |
| Occupation: DELIVERY DRIVER | | Driving Licence Information: Class: 2B.3 Date of Expiry: | |

General Information of the Accident

| | | | | |
|---|------------------------------|------------------------------------|---|---|
| Type of Accident: | Injury Attended by Police | Drink Drive: No | Date/Time of Accident: 07/11/2019 07:40 | Type of Location: Straight Road |
| Location: Along Road 1 Traveling Toward Road 2 KRANJI EXPRESSWAY BUKIT TIMAH EXPRESSWAY along KJE towards BKE (Woodlands), in between Woodlands Road exit and BKE exit, at lane 3 | | | | |
| Weather: Clear | | Road Surface: Dry | | Road Speed Limit: 90 Km/h |
| Traffic Flow: One Way | | Traffic Control: Not Controlled | | Traffic Volume: Heavy |
| Type of Collision: Between Moving Vehicles - Head To Rear | | | | Anyone conveyed by ambulance: Yes |

Details of Vehicle Involved

| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
|-------------|-------|---------|-------|--------|---------------------|-----------------|
| GBC4416T | Van | NISSAN | NV200 | White | Slightly Damaged | 0 A |
| GBG8502E | Lorry | TOYOTA | DYNA | White | Slightly Damaged | 0 C |
| SHC459A | Car | HYUNDAI | IONIC | Yellow | Totally Damaged | 1 B |
| SLJ3328R | Car | TOYOTA | WISH | White | Slightly Damaged | 0 D |

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20191107/2146

Police Station Of Origin:
Jurong East N.P.C
92 Boon Lay Way SINGAPORE 609962
Tel No: 1800-8999999

2 of 4
Report No. T/20191107/2146

CONTINUATION OF REPORT

| Details of Person Involved | | | |
|-----------------------------------|-----------------------------|--|------------------------------------|
| Any Pedestrian Involved: No | | | |
| No. of Pedestrians Injured: NIL | | Use of Pedestrian Crossing: NA | |
| Driver | | | |
| Name | MUHAMMAD FAHMI BIN MASHWARI | ID No. | S9030909I |
| Related Vehicle | GBC4416T (Van) | Contact No. | 96976008 |
| Hospital/Clinic | ICON MEDICAL CLINIC | Class of Driving Licence & Expiry Date | Class: 2B,3 Date of Expiry: NIL |
| Date Treatment | 07/11/2019 | Date Discharge | 07/11/2019 |
| No. of Days granted Medical Leave | 03 | Degree of Injury | Slight |
| Driver | | | |
| Name | KWEK TECK HWA | ID No. | S1425988J |
| Related Vehicle | GBG8502E (Lorry) | 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 | POH CHER KIM | ID No. | S0095573F |
| Related Vehicle | SHC459A (Car) | Contact No. | 93691245 |
| 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 |

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20191107/2146

Police Station Of Origin:
Jurong East N.P.C
92 Boon Lay Way SINGAPORE 609962
Tel No: 1800-8999999

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Report No. T/20191107/2146

CONTINUATION OF REPORT

| | | | |
|-----------------------------------|----------------|--|-----------------------------------|
| Driver | | | |
| Name | NG HUA KUAN | ID No. | S7785338C |
| Related Vehicle | SLJ3328R (Car) | Contact No. | 91088546 |
| 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 07/11/2019 at about 0740hrs, I was driving my van along Kranji Expressway going towards Bukit Timah Expressway (Woodlands Exit). The traffic was slow moving at the said exit.

As I was driving, the front vehicle came to a stop as it was jam. I also managed to stop. From the rear mirror, I noticed the yellow taxi also managed to brake in time. Subsequently, the next thing I know, I felt an impact from the back of my vehicle. At the same time I was still stepping my brake pedal. My van then hit the front vehicle.

I was lost at the same time. I then looked around before I alighted from my vehicle. That is when I realized I was involved in a chain accident.

There was a lorry hit the taxi from the back, the taxi subsequently hit onto me rear of the van, which my vehicle then hit the front car.

The front car had only slight scratched and dent at the back of the vehicle.
My van front side had scratches and slight dent. The rear of my vehicle was dented.
The taxi behind me both front and rear plate number was broken. Front bumper was dented and front bonnet was dented. The rear windscreen was broken, rear boot and rear bumper damage. The passenger was conveyed to hospital.
The lorry which hit the taxi had its front left bumper dented and left side headlamp cover broken.

Traffic Police and ambulance came to scene.

Subsequently, I seeked treatment for my neck pain and was given 3 days of MC. There is no in-car camera installed in my van. There is in-car camera inside the front car of mine and the taxi behind me.



**SINGAPORE
POLICE FORCE**



T/20191107/2145

Police Station Of Origin:
Jurong East N.P.C
92 Boon Lay Way SINGAPORE 609962
Tel No: 1800-8999999

4 of 4

Report No: T/20191107/2145

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 /

Sgt 2 MUHAMMAD SYAZWAN BIN ROSELI-
PANE

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

07/11/2019 18:07

Officer In Charge Of Case:

TP / GIT /

Sr Staff Sgt RAZIZ BIN TAHAR

Contact No.: 65476200

Classification Of Case:

Authentication Stamp

NP102

SN 34

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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