### 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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	30/11/2019 15:27
Date Of Accident	29/11/2019 18:40
Exact Location Of Accident	MAXWELL RD TWDS SHENTON WAY
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLK9708H
Insured/Policyholder	
Name Of Registered Owner	AURORA CAR RENTAL & LEASING SINGAPORE PTE LTD
Co Reg No	201914185K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-92312226
Vehicle Particulars	
Manufacturer	MAZDA
Model	MAZDA 3
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	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5109971212
Cover Note Number	
Driver	
Name of Driver	MOHAMAD FAUZI BIN NOOR HALIPAH

NRIC No S8335760F
Date Of Birth 08/11/1983
Occupation OUTDOOR
Date Of Driving Pass 04/11/2009

Driving Experience 10 YEARS AND 0 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-92312226

Fax Number
Contact Number

EMail Address NOEMAIL

Address BLK 433A SENGKANG WEST WAY #14-513

Postcode 79143

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 - CHANGE/CROSS LANE

Weather Conditions DRIZZLING
Road Surface WET

**Other Information** 

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

2 NO

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO 1

Number of Passengers (Including Driver)

**Details of Police Action** 

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name MARINA BAY N.P.C

Police Station Address ROAD: 1 PRINCE EDWARD LINK, POSTCODE: 078872, COUNTRY:

**SINGAPORE** 

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

NO

### **Circumstances of Accident**

REFER TO POLICE REPORT T/20191129/2186.

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 Witness 1** 

Name PAUL APOSTOLIS

Phone Number 92366314

**Email Address** 

### **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number SGA8428J

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

## IMPORTANT NOTICE

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- 6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurence Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application by
- By the fodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of
- E Consent under the Personal Data Protection Act (PDPA)

Lunderstand, 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 aut in this [form] and any other personal information provided by me or possessed by my insurar (collectively the "Personal Information") and disclose and transfer auch Personal information to all insurer(s) who have insured vehicle(s) involved in this accident (s) 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:
  - [1] processing, handling and/or dealing with my claims including the settlement of the claims and any necessary
  - (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, involces, 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
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims (collectively the
- (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
- my Personal information may/can be disclosed by any of the inturers end/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
- my Personal Information will also be collected and used to compile claims history for the purpose of freud detection.
- (e) the information so collected under (d) above may be shared / disclosed:

1414185K

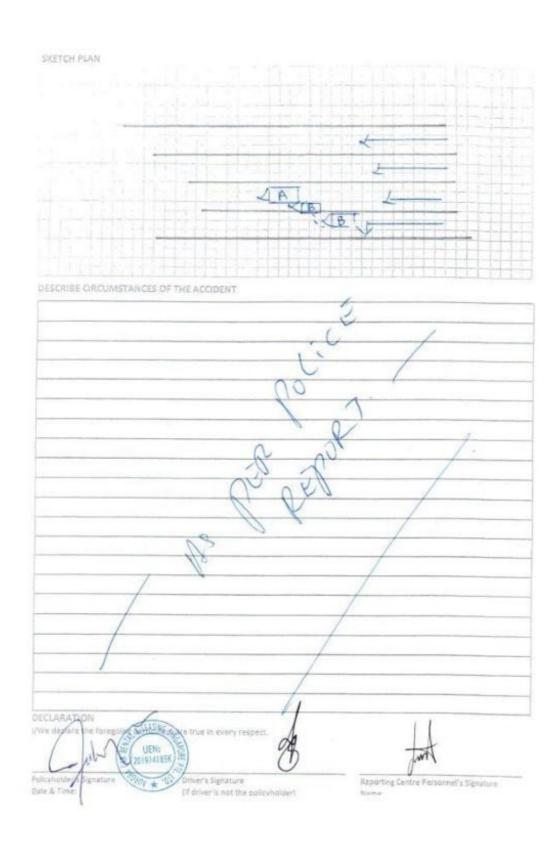
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(/) to all incurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

(ii) for complying with requirements under any regulations, laws or court orders.

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

Reporting Centre Personnel's Signature NRIC/FIN No.-



### POLICE REPORT





Police Station Of Origin: Marina Bay N.P.C

REPORT OF A TRAFFIC ACCIDENT

70 Marina View SINGAPORE 018962

Tel No: 1800-2229999

Report No. T/20191129/2186

Date/Time Report Made: Vide Report No.: Station Diary No.: 29/11/2019 21:44 A/20191129/0110 Informant's Particulars Name of Informant Address: MOHAMAD FAUZI BIN NOOR APT BLK 433A SENGKANG WEST WAY #14-513 HALIPAH SINGAPORE 791433 ID Type / ID No .:

Contact No.: NRIC NO / S8335760F Home/Office: Mobile: 92312226 Nationality: Email:

SINGAPORE CITIZEN

Sex: Age: Date of Birth: Type of Informant: Male 36 08/11/1983 Vehicle Owner Race: Language: Institution / School Name: Malay

Occupation: Driving Licence Information: WAREHOUSE ASSISTANCE Class:

Date of Expiry:

General Information of the Accident Non-Injury Date/Time of Drink Type of Location: Type of Hit and Run Drive: Accident: Straight Road Accident: No 29/11/2019 18:40 Location: Along Road 1 Traveling Toward Road 2 MAXWELL ROAD SHENTON WAY

Driving along Maxwell rd with 3 lanes and open up to 4 lanes road.

Weather: Road Surface: Road Speed Limit: Drizzling Wet 50 Km/h Traffic Flow: Traffic Control: Traffic Volume: One Way Traffic Light - Working Heavy

Type of Collision:

Between Moving Vehicles - Head To Rear

Anyone conveyed by ambulance: No

Details of Vehicle Involved Vehicle No. Type Make Model Color Condition No of Passenger SGA8428J Car NISSAN SUNNY Gold Slightly Damaged **SLK9708H** Car MAZDA MAZDA3 Black Slightly 0 Damaged

Details of Vehicle Insurance					
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date	
SLK9708H	NTUC Income Insurance Co-Operative Limited				

### POLICE REPORT



T201911292186

Police Station Of Origin: Marina Bay N.P.C 70 Marina View SINGAPO

Report No. T/20191129/2186

2 of 3

70 Marina View SINGAPORE 018962

Tel No: 1800-2229999

### CONTINUATION OF REPORT

Details of Perso	n Involved		40201-2011			
Any Pedestrian Ir	volved: No					
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA				
Driver						
Name	MOHAMAD FAUZI BIN NOOR HALIPAH		ID No		S8335760F	
Related Vehicle	SLK9708H (Car)		Contact No.		92312226	
Hospital/Clinic	NIL		Class Drivin Licent Expire	g	Class: 3 Date of Expiry: NIL	
Date Treatment	NIL		Date Dis	Date Discharge NIL		
		No. of Days granted Medical Leave NIL		of Injury   Slight		t

### Brief Details.

On 29/11/2019 at about 1810hrs, I dropped off my girlfriend at tras st for work and left. I was heading towards lavender to meet my friend and was driving along Maxwell rd towards Shenton way and came across a vehicle (SGA8428J) that collided into my vehicle (SLK9708H).

I alighted the vehicle and proceeded to talk to the driver. My intention was to exchange particulars with him. However he tried to drive off and I stopped him. He tried to private settlement with me by handing over SGD\$150/- to me but I refused to accept. The driver then drove off and hit my leg. I called for the police assistance. While waiting for the police, I moved my vehicle aside to prevent congesting the road.

My vehicle (SLK9708H) rear passenger door to the end of the car was scratch and dented due to the accident. The other car (SGA8428J) collided his car from the driver side.

The accident was a head to rear accident, SGA8428J driver front collided with SLK9708H passenger rear

I have yet to assess my car but was advised to lodge a police report first and then send my car to the workshop to assess the damage.

I would like to indicate that after the accident, I came straight to the police station to lodge a report. I have yet to see the doc to examine my injuries. I do not feel any pain right now.

I would like to state that I saw the driver and had spoken to him. He refused to stop his vehicle and drove off the vehicle.

There is a witness for my accident where he saw me stopping the car and the car hit my leg. The witness left me his name car and left. I do not have his full particulars.

Name: Paul Apostolis Mobile: 92366314

That is all.

## **POLICE REPORT**





Police Station Of Origin; Marina Bay N.P.C 70 Marina View SINGAPORE 018962 Tel No: 1800-2229999

3 of 3 Report No. T/20191129/2186

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 Informant:			
Date/Time: 29/11/2019 21:44			
Classification Of Case:			







