

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	04/02/2020 14:28
Date Of Accident	04/02/2020 09:15
Exact Location Of Accident	UPPER CHANGI ROAD EAST
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC5765M
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Insured/Policyholder

Name Of Registered Owner	HOCK LIAN SENG INFRASTRUCTURE-SEMBACORP DESIGN & CO
Co Reg No	0
Email Address	IVYPEH@HLSSDCJV.COM.SG
Mobile Phone No	(LOCAL) +65-90087480
Alternative Phone No	OFFICE-64223363

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE-3.0 D HIGH ROOF COMMUTER TURBO (A)
Exact Purpose for which vehicle was being used at time of accident	
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	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMBPHQ19-000010
Cover Note Number	

Driver

Name of Driver	MOHAMMAD HAFIZ BIN OSMAN
NRIC No	S8409387D
Date Of Birth	12/04/1984
Occupation	OUTDOOR
Date Of Driving Pass	12/09/2003
Driving Experience	16 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91883744
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 149 TAMPINES ST 12 #01-104
Postcode	521149
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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?	
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?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO THE ATTACHED REPORT.

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	SHC2408J
Vehicle Make/Model/Colour	TOYOTA COMFORT TAXI
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	ENG PENG LIM
NRIC/Passport Number	S7327326I
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

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:

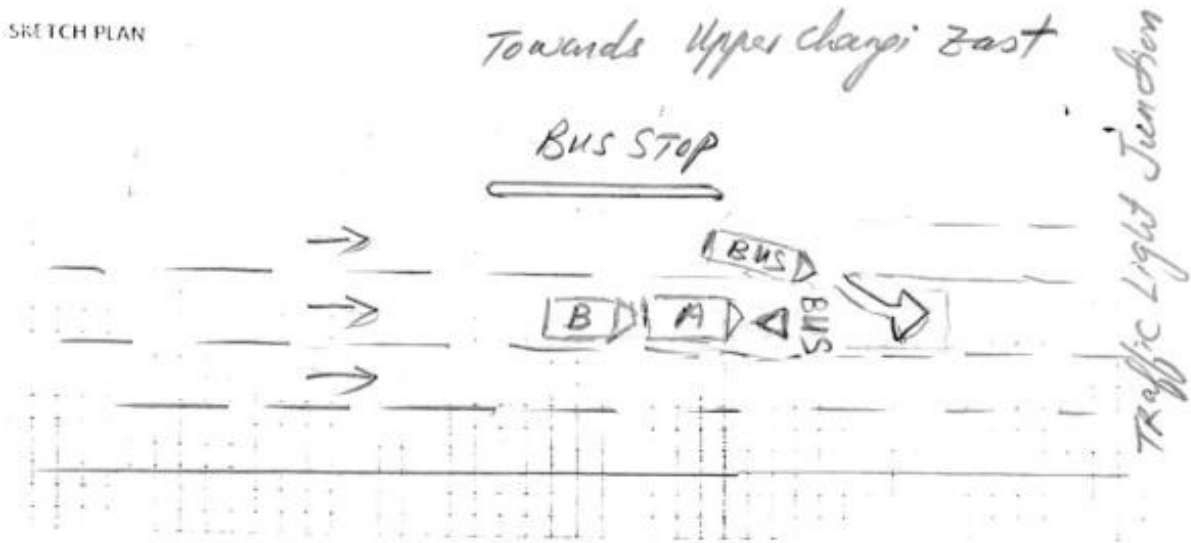
Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I realised bus moving out from the bus-stop. I stopped my vehicle to give-way to him. All of a sudden, I felt a bang from behind. taxi SHC 2408T hit into my rear.

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.:

Driving License

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S8409387D**



Name
MOHAMMAD HAFIZ BIN OSMAN

محمد حفيز بن عثمان

Race
INDIAN


Date of birth
12-04-1984

Sex
M

Country/Place of birth
SINGAPORE



REPUBLIC OF SINGAPORE **DRIVING LICENCE**




License Number **S8409387D**

Name
MOHAMMAD HAFIZ BIN OSMAN

Birth Date **12 Apr 1984**

Issue Date **03 Sep 2009**

D01750654G



785/14



NRIC No. **S8409387D**



Date of issue
09-01-2015

APT BLK 149 TAMPINES STREET 12 #01-104
SINGAPORE 521149

NRIC No. **S8409387D** Date: **31/07/2018**

5407909

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES:

	PASS DATE
Class 2B Motorcycles <= 200 cc	03 Sep 2009
Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver, and other motor vehicles <= 2500kg	12 Sep 2003

NP 428A

License No. **S8409387D**



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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CHASSIS NO.	:	JTFST22P10-0030718
UNLADEN WT.	:	2200 KG
MAX. LADEN WT.	:	3250 KG
PASSENGER CAP.	:	1 DRIVER 13 OTHER
TYRE SIZE	:	(F) 195R15C 105/100S
	:	(R) 195R15C 105/100S