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.

aloresalu.	
	ACCIDENT STATEMENT
Date Of Report	08/02/2020 09:35
Date Of Accident	06/02/2020 07:30
Exact Location Of Accident	AMK AVE 1 JUNC
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMM7213J
Insured/Policyholder	
Name Of Registered Owner	MAMDUH BIN ABDUL MUTALIB
NRIC No	SXXXX641C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91178923
Alternative Phone No	OFFICE-91178923
Vehicle Particulars	
Manufacturer	TOYOTA
Model	PRIUS HYBRID 1.8E CVT
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1900118491
Cover Note Number	
Dulivan	

Driver

Name of Driver MAMDUH BIN ABDUL MUTALIB

NRIC No SXXXX641C

Date Of Birth 05/09/1973

Occupation INDOOR

Date Of Driving Pass 01/01/1998

Driving Experience 22 YEARS AND 1 MONTH

Gender MALE

Mobile Number (LOCAL) +65-91178923

Fax Number

Contact Number OFFICE-91178923

EMail Address NOEMAIL

BLK 238 BISHAN ST 22 #02-210 Address

Postcode 570238

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 - CHANGE/CROSS LANE**

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?

YES

NO

2

Was any other material or property damaged? I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME: : ZAMZAIMAH

GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police? YES

If Yes.Please state which Police Station

Police Station Name ANG MO KIO POLICE DIVISIONAL HQ (F DIVISION)

NO

ROAD: 51 ANG MO KIO AVENUE 9, POSTCODE: 569929, COUNTRY:

Police Station Address **SINGAPORE**

TEL NO: 1800-2180000 - FAX NO: 64814246 Police Station Contact

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT F/20200206/7040

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES

Remarks/ Reasons: ONLY FRONT CAMERA

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SMQ6478

Vehicle Make/Model/Colour **NOT ACCURATE**

Details Of Properties

PRIVATE CAR Vehicle Category

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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- The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance
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 interested parties.
- 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:
 - 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:
 - 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.

M

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				
			A = SMM 7	213丁
			8 = SMQ 6	478
	A			
	1 1 1 1			
		AMK Ave 1	June with	Bishan R
DESCRIBE CIRCUMSTANC	ES OF THE ACCIDENT			
Refer +	o Police	Report E	# F/20200206	17040
		1		
		/		
	/			
DECLARATION				
/We declare the foregoing pa	articulars are true in every	y respect.	11	
			#	
/se			had	

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.:

GIARMC Sketch/lacForm_V3

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1 of 3

POLICE REPORT (NP299)

Police Station Of Origin Ang Mo Kio Division HQ 51 Ang Mo Kio Avenue 9 SINGAPORE 569784 Tel No:1800-2180000 Report No. F/20200206/7040

Station Diary No.

-			
Date/Tir	ma D.	amount !	

06/02/2020 18:08

Name Of Informant Address

MAMDUH BIN ABDUL MUTALIB APT BLK 238 BISHAN STREET 22 #02-210

SINGAPORE 570238

ID Type / ID No. Contact No. NRIC NO / S7331641C Home/Office:

Mobile: 91178923

Nationality Email Address
SINGAPORE CITIZEN mamduh5959@gmail.com
Occupation Sex Age Dat

Male 46 Language

Vide Report No.

Date of Birth Ra 05/09/1973 Ma

Race Malay

Institution/School Name

Language
English

Date/Time Of Incident
06/02/2020 07:30

Location Of Incident
Along Ang Mo Kio A

Along Ang Mo Kio Ave 1 approaching junction

Brief details.

PROJECT MANAGER

Our car, SMM7213J had stopped for the red light infront of several cars, a few minutes later a car SMQ6478 whom filtered to the next lane had sideswiped our left side passenger door, due to shock, we heard the sound and expect the driver of SMQ6478 to stop, but he didn't stop, but continue to drive all the way. My wife who is seated next to me, then told me to follow the car and stopped right behind him, she went over to his car and told him that he hit our car. He said he only hit our left side mirror so that is why he refuse to stop. At this moment, my wife told him to alight and take a look at the damage on our car, then his passenger whom is his wife told him to take photo and we exchange hp number (his wife

Signature Of Officer Recording The Report:	Signature Of Informant:
Not applicable	The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 06/02/2020 18:08
Officer In-Charge Of Case:	Classification Of Case;
A. the authorities Otomo	

Authentication Stamp

POLICE REPORT





2 of

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20200206/7040

hp # 92778161 Her name is Kalyn) as we want to know how to settle the outcome, is it by private settlement or insurance. Then we move off. There is no particular details taken and due to trauma, we only remember the car is white color, number plate was SMQ6478, front passenger was their child and behind passenger was his wife. We exchange wassap about asking them to provide their workshop contact so that we can access the evaluation of the damage. Kalyn confirm her car have camera which since her husband drive from behind us, they should be able to provide their in cam camera footage. During lunchtime, Kalyn wassap me:-

Hi, can we have your car plate no? We are at the workshop now? After i wassap her my car number, an hour later, she wassap this message "We have filed our incident report. Please liaise with insurer" We now file our police report with regards to the incident in case investigation is required.

Victim	THE REAL PROPERTY OF THE PARTY	THE REAL PROPERTY AND ADDRESS.	KARANGA SANIMAN DENGA SAN
Person Name	MAMDUH BIN ABDUL MUTALIE		070010110
ID Type	NRIC NO	ID No	S7331641C
Gender	Male	Age	46
Race	Malay	Language	English
Occupation	PROJECT MANAGER	Address Type	
Address	APT BLK 238 BISHAN STREET 22 #02-210 SINGAPORE 570238	Mobile No	91178923
Is Informant A Victim?	Yes		

Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Date/Time: 06/02/2020 18:08
Classification Of Case:

Authentication Stamp

POLICE REPORT





POLICE REPORT (NP299)

Authentication Stamp

CONTINUATION OF REPORT

Report No. F/20200206/7040

Person Name	MAMDUH BIN ABDUL MUTALIB (Informant)

Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required. Signature Of Officer Recording The Report: Not applicable Signature Of Interpreter: Not applicable Date/Time: 06/02/2020 18:08 Classification Of Case: Officer In-Charge Of Case:

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