

## 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	10/03/2020 17:25
Date Of Accident	07/03/2020 09:10
Exact Location Of Accident	BEFORE COMPLEX CIQ (JOHOR CUSTOM)
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJJ3255R
<b>Insured/Policyholder</b>	
Name Of Registered Owner	YEW CHEE KUM
NRIC No	SXXXX734C
Email Address	CHEEKUMYEW@YMAIL.COM
Mobile Phone No	(LOCAL) +65-98526120
Alternative Phone No	OTHERS-90666272

### Vehicle Particulars

Manufacturer	TOYOTA
Model	WISH
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?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 300187035 QMX
Cover Note Number	

### Driver

Name of Driver	TAN WAN
NRIC No	SXXXX285I
Date Of Birth	03/05/1982
Occupation	INDOOR
Date Of Driving Pass	25/05/2005
Driving Experience	14 YEARS AND 9 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98526120
Fax Number	
Contact Number	OTHERS-90666272
EEmail Address	CHEEKUMYEW@YMAIL.COM

Address	27 JALAN HIJAUAN 5/2 HORIZON HILLS ISKANDAR PUTERI JOHOR, MALAYSIA
Postcode	79100
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
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?	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	TRAFIK ISKANDAR PUTERI
Police Station Address	<b>ROAD:</b> TRAFIK ISKANDAR PUTERI , <b>POSTCODE:</b> 00000 , <b>COUNTRY:</b> MALAYSIA
Police Station Contact	<b>TEL NO:</b> - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO SKETCH AND TRAFIK IPUTERI/002874/20

#### 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	SGT8308Y
Vehicle Make/Model/Colour	HYUNDAI VERNA
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ABDUL RASHID
NRIC/Passport Number	SXXXX810F
Contact Number	96935883
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

## Accident 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:

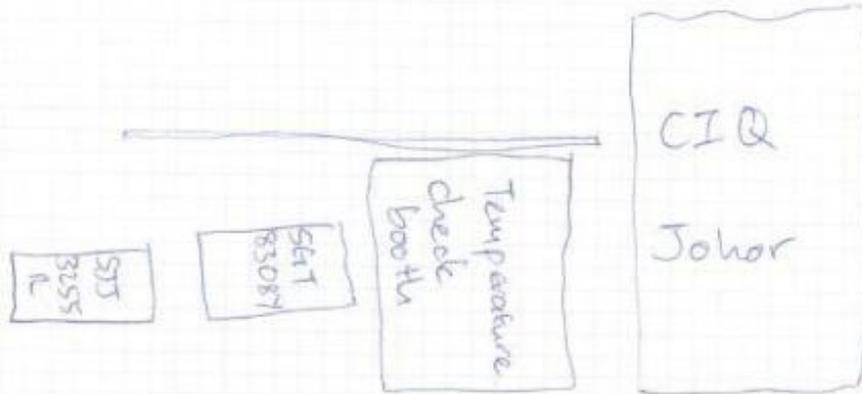
10. 3. 2020

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

10/03/2020  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 07/03/2020 AT ABOUT 0910HRS I WAS DRIVING MY MPX  
SJT 3255 R FROM SINGAPORE TO MALAYSIA TRAFFIC WAS HEAVY  
SUDDENLY I ACCIDENTALLY HIT THE CAR INFRONT OF ME SGT 83087.  
MY CAR HAD A SOME DAMAGE ON MY BUMPER & NOBODY INJURED

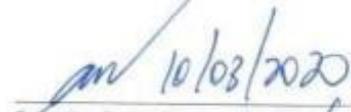
TRAFIK PUTERI / 002814 / 20

DECLARATION

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

  
Policyholder's Signature  
Date & Time:  
10.3.20

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

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



POLICE REPORT

POL.316



CAWANGAN TRAFIK  
IBU PEJABAT POLIS DAERAH  
POLIS DIRAJA MALAYSIA

Resit Akuan Penerimaan Repot Polis :

Nama Pengadu : TAN WAN  
No Kad Pengenalan / Paspot : 820503105554  
No Repot Polis : TRAFIK IPUTERI/002874/20  
Tarikh @ Masa Repot Polis : 09/03/2020 @ 08:43  
Pengesahan Penerimaan Repot :

Tandatangan Ketua Pejabat Pertanyaan

Pegawai Penyiasat :

Nama Pegawai Penyiasat : (R175641) S.JN MOHD AL-HAFIZ BIN ISMAIL  
Tempat Tugas : JOHOR , ISKANDAR PUTERI  
No Telefon Pejabat : No Telefon Bimbit : 012-3883605

Tarikh @ masa Perjumpaan : 9/3/20  
Pengesahan Penerimaan Repot : 1630H.

Tandatangan Pegawai Penyiasat

Juru Gambar :

Nama : No Badan : Pangkat :

Tarikh @ Masa Gambar Diambil :  
Pengesahan Gambar Diambil :

Tandatangan Juru Gambar

Unit Pembekalan Dokumen Siasatan :

No Telefon Unit Pembekalan Dokumen :

Waktu Pejabat :

Isnin - Khamis :  
08:00 Pagi - 01:00 Tengah Hari  
02:00 Petang - 03:30 Petang  
Jumaat :  
08:00 Pagi - 12:30 Tengah Hari  
Cuti Umum / Khas : Tutup

Jenis Dokumen Dibekal Kepada Pengadu :

- 1. Salinan Repot Polis
- 2. Gambar Kenderaan
- 3. Rajah Kasar Kemalangan
- 4. Keputusan Siasatan
- 5. Lain-lain Dokumen

Tarikh @ Masa Dokumen Diserah :

Pengesahan Kaunter Pembekalan  
Dokumen :

Tandatangan Pegawai Kaunter  
Pembekalan Dokumen

**POLICE REPORT**

(Form 2570/1-03)  
P.A.J. 10/2003

JADUAL  
SCHEDULE

CARS200050710  
02199900287420

PENDUA

Borang 1  
Form 1

[prenggan 2 (a)]  
[paragraph 2 (a)]

AKTA PENGANGKUTAN JALAN 1987  
ROAD TRANSPORT ACT 1987

AGALYTRANSPORT (NOTICE) UNDER SUBSECTION 10(1) (b) (i) (ii)

ARL4 CODE			
0	2	2	6

Kepada / To **TAN WAN**

No. Kad Pengenalan / NRIC No. **8 2 0 5 0 3 1 0 5 5 5 4**

Alamat / Address **NO 27 JLN HIJAUAN 5/2H 110  
RIZON HILLS  
79100**

No. Pendaftaran Kenderaan / Motor Vehicle Registration No. **S J 1 3 2 5 5 R**

Jenis Kenderaan / Vehicle Type **MPV**

**BAHAWASANYA** saya mempunyai sebab-sebab yang munafik untuk mengemukakan bahawa kenderaan telah melakukan kesalahan yang berikut di bawah:  
**WHEREAS** I have reasonable ground to believe that you have committed an offence as follows:

Sekiranya / If **Akta Pengangkutan Jalan 1987**

Kesalahan / Offence **LEBUHRAYA LINK KEDUA**

di tempat / at **07/03/2020** jam / pada waktu / time **09:10 PAGI**

Kesalahan / Offence **11/EN166/59 010 - T/PAPAT KAWAL SEMASA PANDU**

KAMPU ADALAH DENGAN INI DIPERINTAHKAN supaya hadir sendiri atau melalui peguam  
YOU ARE HEREBY ORDERED to appear in person or by a lawyer  
di hadapan Mahkamah Majistret di **MALINGGAH MARSHRET JOHORE BAHRU**  
before Magistrate Court at

Pada / On **12/05/2020** pukul / time **9:00** (p.m.)  
Dibuatkan pada / Issued on **09/03/2020** pukul / time **04:21** (p.m.)

  
Penerima / Receiver

  
Penerima Polis / Police Officer  
**REK75641**  
**MORID A. HAFIZ BIN ISMAIL**

NOTA: Kesalahan ini boleh tidak boleh disampukan  
NOTE: This Offence is compoundable and compoundable  
"Jika kesalahan ini boleh disampukan, kamu dimarahkan untuk mengemukakan permohonan  
"If the offence is compoundable, you are advised to file the appropriate application  
Kesalahan ini di terima-tama komputer 7/11/2020  
2020  
of this PDAM system generated on 7/11/2020 10:05:20 AM

Accident Photo



Accident Photo



Accident Photo



Accident Photo

