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#### SINGAPORE ACCIDENT STATEMENT

#### IMPORTANT NOTICE

Mobile Number Fax Number

Contact Number

**EMail Address** 

- 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.
- 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.

17/03/2020 15:31 16/03/2020 18:10 BEDOK NORTH AVE 3 SLIP RD TO NEW UPP CHANGI RD SINGAPORE
BEDOK NORTH AVE 3 SLIP RD TO NEW UPP CHANGI RD
SINGAPORE
DETAILS OF OWN VEHICLE
SLT5711B
NORISHAM BIN HARON
SXXXX159B
NOEMAIL
(LOCAL) +65-90672747
OFFICE-90672747
HONDA
AIRWAVE
at PRIVATE USE
y NO
THIRD PARTY
PRIVATE CAR
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
THIRD PARTY FIRE AND/OR THEFT
NO
DMPCSNW00003761900
NORISHAM BIN HARON
SXXXX159B
12/03/1973
INDOOR
05/06/2007
12 YEARS AND 9 MONTHS
MALE

(LOCAL) +65-90672747

OFFICE-90672747

NOEMAIL

BLK 715 TAMPINES ST 71 #03-182 Address

520715 Postcode

Was driver an employee of the Insured's Company NO

OWNER 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

COLLISION - HEAD TO REAR Type Of Accident

Weather Conditions CLEAR Road Surface DRY

Other Information

Was any foreign vehicle involved in this accident?

Number of vehicles (including own vehicle)

involved in the accident

2 NO

NO

Was any body injured in the Accident?

Was any injured conveyed to hospital by

ambulance?

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)

YES

NO 1

YES

NO

CHANGI N.P.C

**Details of Police Action** 

Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name

ROAD: 9 SIMEI STREET 2 , POSTCODE: 529914 , COUNTRY:

SINGAPORE

TEL NO: - FAX NO: Police Station Contact

Was notice of intended Prosecution given?

If Yes, against whom?

Police Station Address

Circumstances of Accident

REFER TO POLICE REPORT T/20200316/2131

Attachment(s)

Are accident photos available for attachment? YES NO Was there any video captured by Car Camera? NO Was there any audio recorded?

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

SDW 1008D Vehicle Registration Number

Vehicle Make/Model/Colour

**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)

## SKETCH PLAN

### IMPORTANT NOTICE

- Please report correctly the details of the accident to speed up the claims process.
- 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. The 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 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 aforesald.
- 8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

- 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)
  - (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
- 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

Noris haw

(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.:

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

2 IL

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Norishen

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.:

/ehicle No.	SLT 5711B Model/Make Honda Airwave			
Date of Accident	(6/3/2020			
ime of Accident	1810 HRS			
ocation of Accident	Along Bedok North Avenue 3 Slip road to New Upper Changi			
xact purpose use during accid				
Name of Owner	Northam Bin Haron			
Telephone No.	H/P: 9067 2747 Home: Office:			
NRIC	S7349159B			
Address	BLE 715 Tampines Street 71 #03-182 S(520715)			
Claim type	OD THERD PARTY REPORTING ONLY			
nsurance Company	China Tarping			
Type of Coverage	Comprehensive Third Party Third Party / Fire /Theft			
Policy No.	DMPCSNW00003761900			
Name of Driver	As Above If No,			
NRIC	Any Passengers : -			
Date of birth	12/3/1973			
Occupation	Outdoor / Indoor			
Driving License Pass Date	5 6 2007			
Gender	Male / Female			
Contact No.	H/P: Home: Office:			
Address				
Driver have any own vehicle	(No) If yes, Reg No.			
Relationship	Employee, If no, state Owner			
Weather condition	Clear Raining Other			
Road Surface	Dry Wet Other			
Any Injuries	(No, If Yes, Who?			
Name And Contact No.				
Name And Contact No.				
Police Report	No, IFTER, Where? Changi N.P.C			
Vehicle B No.	SPW 1008D Any Passengers: 1			
Name of Driver	Contact No. :			
Vehicle C No.	Any Passengers :			
Vehicle D No.	Any Passengers :			
Vehicle E no.	Any Passengers :			
Vehicle F No.	Any Passengers :			
Vehicle G No.	Any Passengers :			
Witness Name	Witness Contact :			
Accident Portion	Rear portron			
Camera Recorder	Yes / No			
	nonisham sham & Yahod. com			
Accident Portion  Camera Recorder  Email Address				
PARTICULAR WORKSHOP CONTACT NO.	Twincar Automotive Pte Ltd 6842 0051 / 6744 0510			
CONTACT PERSON	Zi Ting			
	6741 0510			
WORKSHOP EMAIL APDRESS				





1 of 3

Report No. T/20200316/2131

Police Station Of Origin: Changi N.P.C

9 Simei Street 2 SINGAPORE 529914

Tel No: 1800-5872999

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/03/2020 18:42		Vide Report No.:	Station Diary No.: 83		
Informa	nt's Partic	ulars			
	f Informant: IAM BIN HA		Address: APT BLK 715 TAMPIN 520715	NES STREET 71 #03-182 SINGAPORE	
ID Type / ID No.: NRIC NO / S7349159B		Contact No.: Home/Office:	Mobile: 90672747		
National SINGAP	ity: ORE CITIZ	EN.	Email:		
Sex: Male	Age: Date of Birth: 12/03/1973		Type of Informant: Driver		
Race: Malay		Language:	Institution / School Name:		
Occupation: CHIEF SECURITY OFFICER		Driving Licence Information: Class: 3 Date of Expiry:			

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 16/03/2020 18:10	Type of Location T-Junction	
BEDOK CEN NEW UPPER	R CHANGI ROAD	of New Upper Changi F	Rd		
Weather: Road		Road Surface: Dry		Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Pedestrian Cross	ing	Traffic Volume: Heavy	
Type of Collis	sion: ving Vehicles - Head 1	o Rear		Anyone conveyed by ambulance:	

Details of V	ehicle Invo	lved				
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenge
SDW1008D	Car	ТОУОТА		Silver	Slightly Damaged	1
SLT5711B	Car	HONDA	AIRWAVE 1.5M A	Black	Slightly Damaged	0

Details of Vehicle Insurance					
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date	
SLT5711B	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSNW000037 61900	01/01/2020	31/12/2020	





2 of 3

Report No. T/20200316/2131

Police Station Of Origin: Changi N.P.C 9 Simei Street 2 SINGAPORE 529914 Tel No: 1800-5872999

### CONTINUATION OF REPORT

Details of Perso	n involved	To device				
Any Pedestrian II						
No. of Pedestrian	s Injured: NIL		Use of Ped	destriar	Cross	ing: NA
Name	Unknown			ID No.		NIL
Related Vehicle	SDW1008D (Car)		Contact No.		NIL	
Hospital/Clinic	NIL			Class Drivin Licent Expiry	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL Date Dis			harge	NIL	
No. of Days granted Medical Leave NIL			Degree of	Injury	NIL	
Driver					PER	THE RESERVE OF THE PERSON NAMED IN
Name	NORISHAM BIN HARON		ID No		S7349159B	
Related Vehicle	SLT5711B (Car)		Contact No.		90672747	
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Disc Degree of		NIL	
No. of Days gran	ted Medical Leave	s granted Medical Leave NIL			NIL	

# Brief Details.

On the above date, time and location, I was driving out of Bedok Central Road and was approaching New Upp Changi Rd by turning to the left. While I was waiting for the pedestrians to cross the pedestrian crossing linking the two roads, the other involved car then collided into my car from the back. Despite signaling for the other driver to stop at one corner so that we are able to assess the damage and share contact details, the other driver simply drove off without waiting. As such, I decided to lodge a police report. My car did not suffer any visible damages, although the gearbox did seem to suffer from certain malfunction. The other car had a visible dent on the left front bumper.

I did not suffer from any injuries and did not require any medical assistance. My car does not have an incar camera installed. I do not know the other driver's particulars.





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3 of 3 Report No. T/20200316/2131

Police Station Of Origin: Changi N.P.C 9 Simei Street 2 SINGAPORE 529914 Tel No: 1800-5872999

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: G / Sgt 2 SHOW XIN DA, DYLAN	Signature Of Informant:			
Signature Of Interpreter: Not applicable	Date/Time: 16/03/2020 18:42			
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:			



CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Private Car

MX1

SN

AN0679A

Cov. Type:F

#### CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960 Road Transport Act, 1987 (Malaysia) Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE No.

DMPCSNW00003761900

Engine No.: L15A5207291 Cha. No.:GJ11305978

1. Index Mark and Registration

SLT5711B

Number of Vehicle

Name of Policy Holder

NORISHAM BIN HARON

Effective date of the Commencement of Insurance for the purposes of the Regulations, Ordinance or Enactment

01/01/2020

4. Date of Expiry of Insurance

31/12/2020

5. Persons or Classes of Persons entitled to drive"

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his permission. Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to use:"

Use for social, domestic and pleasure purposes and for the Policyholder's business. The policy does not cover use for hire or reward tuition driving test racing pace-making, reliability trial, speed-testing, the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

HIRE PURCHASE CO.: ABWIN PTE LTD AS HP OWNER

\*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Malaysia), are not to be included under these headings.

I/We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By:

ABWIN PTE LTD Authorised Officer

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E) 3 Anson Road #16-00 Springleaf Tower Singapore 079909

C63896111

6222 1033

www.sg.cntaiping.com