

## 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	20/04/2020 10:58
Date Of Accident	20/04/2020 07:30
Exact Location Of Accident	BLK 44 SIMS DRIVE CARPARK
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	PA8536Z
<b>Insured/Policyholder</b>	
Name Of Registered Owner	JMJ TRANSPORT SERVICES
Co Reg No	5XXXX303C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90027353
Alternative Phone No	OFFICE-90027353

### Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE COMMUTER GL 3.0 A
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	BUS

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5102481028-01
Cover Note Number	

### Driver

Name of Driver	MUHAMMAD ARIFF BIN HAMIS
NRIC No	SXXXX634C
Date Of Birth	02/06/1986
Occupation	INDOOR
Date Of Driving Pass	29/05/2012
Driving Experience	7 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90061353
Fax Number	
Contact Number	OFFICE-90061353
EEmail Address	NOEMAIL

Address	BLK 44 SIMS DRIVE #03-169
Postcode	380044
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

#### General Information of the Accident

Type Of Accident	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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)	0

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	GEYLANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 132 PAYA LEBAR ROAD , <b>POSTCODE:</b> 409014 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-8486999 - <b>FAX NO:</b> 68486799
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT - T/20200420/2006.

#### 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	SLQ6087D
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)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number UNKNOWN  
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)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number UNKNOWN  
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

1. Please report correctly the details of the accident to speed up the claims process.
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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 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:
  - (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.



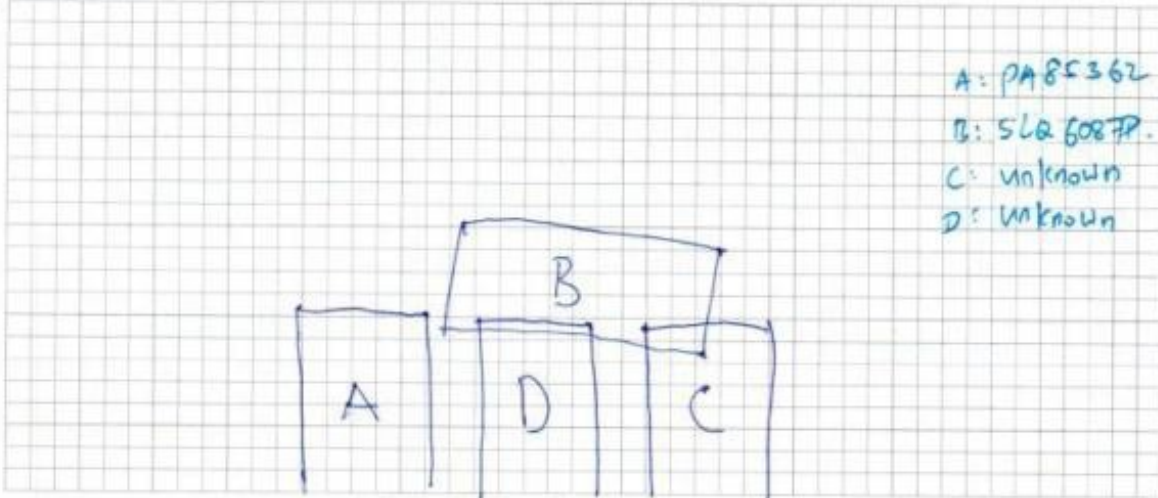
Policyholder's Signature  
Date & Time:

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

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

## Accident Sketch Plan

### SKETCH PLAN





### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report - 7/12/2012/2006.

### 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.:



# Police Report



**SINGAPORE  
POLICE FORCE**



T/20200420/2006

Police Station Of Origin:  
Geylang N.P.C  
1 Cassia Link SINGAPORE 397618  
Tel No: 1800-8486999

1 of 3

Report No. T/20200420/2006

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 20/04/2020 10:13	Vide Report No.: G/20200420/0079	Station Diary No.: 34
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Informant's Particulars				
Name of Informant: MUHAMMAD ARIFF BIN HAMIS		Address: APT BLK 44 SIMS DRIVE #03-169 SINGAPORE 380044		
ID Type / ID No.: NRIC NO / S8617634C		Contact No.: Home/Office: Mobile: 90061353		
Nationality: SINGAPORE CITIZEN		Email:		
Sex: Male	Age: 33	Date of Birth: 02/06/1986	Type of Informant: Vehicle Owner	
Race: Malay		Language:	Institution / School Name:	
Occupation: SELF EMPLOYED		Driving Licence Information: Class: 2B,2A,2,3,4 Date of Expiry:		

General Information of the Accident				
Type of Accident: Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 19/04/2020 19:45	Type of Location: Car Park	
Location: Along Road 1 SIMS DRIVE  BLK 44 SIMS DR OSCP				
Weather:	Road Surface:	Road Speed Limit:		
Traffic Flow:	Traffic Control:	Traffic Volume:		
Type of Collision: Moving Vehicle Against - Parked Vehicle			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
PA8536Z	Bus/Coach/Minibus					0
SLQ6087D						0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

## Police Report



**SINGAPORE  
POLICE FORCE**



T/20200420/2006

Police Station Of Origin:  
Geylang N.P.C  
1 Cassia Link SINGAPORE 397618  
Tel No: 1800-8486999

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Report No. T/20200420/2006

### CONTINUATION OF REPORT

Vehicle Owner			
Name	MUHAMMAD ARIFF BIN HAMIS	ID No.	S8617634C
Relation to Vehicle	PA8536Z (Bus/Coach/Minibus)	Contact No.	90061353
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

### Brief Details.

On 17/04/2020 at about 1930hrs I parked my vehicle at Blk 44 Sims Drive Open Space Carpark.  
On 20/04/2020 at about 0700hrs I went to retrieve my vehicle and discovered that my vehicle and 2 other cars parked beside me were damaged.  
A note was then left on the Blue Toyota informing that a witness had seen the incident happen that a SUV SLQ6087D had hit onto the vehicles and he can be contacted at , 97911653 Gao Han.

I am lodging this report for police to investigate.

# Police Report



SINGAPORE  
POLICE FORCE



T/20200420/2005

Police Station Of Origin:  
Geylang N.P.C  
1 Cassia Link SINGAPORE 397618  
Tel No: 1800-8486999

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Report No: T/20200420/2006

## 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 1 SHAUN CHUA YONG QUAN

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / HRT /  
Sr Staff Sgt IRMAN BIN MOHAMAD SAID  
Contact No.: 65476145



Authentication Stamp  
NP168

Signature Of Informant:

Date/Time:  
20/04/2020 10:13

Classification Of Case:

  
SIGNATURE



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo

