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 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 consaforesaid.	sent to the archiving of this report at the centre and to copies of the report being made available						
	ACCIDENT STATEMENT						
Date Of Report	07/08/2020 14:48						
Date Of Accident	06/08/2020 14:00						
Exact Location Of Accident	PIE LANE TOWARDS EXIT 9 TO JALAN EUNOS						
Country/State of Loss	SINGAPORE						
	DETAILS OF OWN VEHICLE						
Vehicle Registration Number	SMH7086K						
Insured/Policyholder							
Name Of Registered Owner	BLUECAR EAST ASIA PTE LTD						
Co Reg No	2XXXXX259H						
Email Address	CLAIMS@BLUESG.COM.SG						
Mobile Phone No							
Alternative Phone No	OFFICE-31637900						
Vehicle Particulars							
Manufacturer	BLUECAR						
Model	BLUECAR-(A)						
Exact Purpose for which vehicle was being used at time of accident	CAR RENTAL BY OWNER						
Are you claiming under your own insurance policy for repair to your vehicle?	NO						

If No, Please state action to be taken THIRD PARTY PRIVATE CAR Vehicle Category

Insurance Company

Name of Insurance Company LIBERTY INSURANCE PTE LTD

Type Of Coverage **COMPREHENSIVE**

Fleet Policy YES

Policy Number SD19V15488/VPZ/R00

Cover Note Number

Driver

Name of Driver NURHANIS BINTE ABDUL MURAD

NRIC No SXXXX938A Date Of Birth 07/09/1989 Occupation **INDOOR Date Of Driving Pass** 26/09/2013

Driving Experience 6 YEARS AND 10 MONTHS

Gender **FEMALE**

Mobile Number (LOCAL) +65-82680458

Fax Number

OTHERS-68429793 Contact Number

EMail Address HANESMRD@GMAIL.COM

BLK 647 JALAN TENAGA Address

#06-129 SINGAPORE

Postcode 410647

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured OTHER - HIRER

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

3

NO

YES

2

NO

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? NO

Number of vehicles (including own vehicle)

involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

YES 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: : MUHAMMAD HADI BIN ABDUL MURAD

GENDER: : MALE

Details of Police Action

Was the accident reported to the police?

If Yes.Please state which Police Station

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

On 6 August 2020 around 2pm, as I (SMH7086K) was heading towards Exit 9 to exit PIE to Jalan Eunos, 3 vehicles infront were put to stop, thus I slow down and stop the vehicle. The white truck behind (GBG1067R) managed to stop his vehicle as well, until a few seconds later, a gray van (GBC2323U) collided behind the white truck. The driver of the said white truck managed to make a sharp left turn in attempt to avoid the car I was driving, however resulting his front right bumper / headlight colliding against the back left bumper and backlight of the bluesg car, resulted with a dent to the bluesg car left rear bumper which touches the left back wheel and the left rear light panel to be chipped off. The white truck's front right bumper were dented at the edge alongside the front edge of the driver's door and the front right headlight.

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 Witness 1

LESLIE LIM Name Phone Number 83665000

Email Address

DETAILS OF OTHER VEHICLE PROPERTY 1

GBG1067R Vehicle Registration Number

NISSAN CABSTAR (WHITE TRUCK) Vehicle Make/Model/Colour

EDGE OF FRONT RIGHT BUMPER, HEADLIGHT & DRVIER DOOR **Details Of Properties**

DENTED

Vehicle Category COMMERCIAL VEHICLE

Name of Driver LIM CHE KIAN SXXXX236C NRIC/Passport Number **Contact Number** 90261876

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver) 1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number GBG2323U

NISSAN NV350 (GRAY VAN) Vehicle Make/Model/Colour

Details Of Properties FRONT BUMPER, FACE, HEADLIGHT DENTED/CRACKED

Vehicle Category COMMERCIAL VEHICLE

Name of Driver MUHAMMAD HIDAYAH BIN MOHAMED ENDRA

NRIC/Passport Number SXXXX735H 83833747 Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver) 1

Sketch Plan

SKETCH PLAN

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- 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
- 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)

20

17:126

Date & Time: 1 /8

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

INA

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		H	*	*					
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the redge	of the d	river's d	wor a	nd d	Ne f	ther	Pea	die	ht.

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: 7 Au 620 12:15 P

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.:

Identification Card



REPUBLIC OF SINGAPORE IDENTITY CARD NO. \$8929938A





NURHANIS BINTE ABDUL MURAD

M 0:

MALAY Date of bloth 07-09-1989 Country/Flace of birth SINGAPORE

509299384

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES)

EFFECTIVE DATE

Class 3 Motor Cars < 2006kg with <7 passengers, exclusive 26 Sep 20 of the driver; and other motor vehicles < 2500kg

6337609



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27-11-2019

Address

APT BLK 647 JALAN TENAGA #06-129 SINGAPORE 410647

NP 428A

Unence No: Saggestea











































