

## 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	12/08/2020 15:54
Date Of Accident	11/08/2020 18:30
Exact Location Of Accident	BKE TOWARDS WOODLANDS BEF MANDAI EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGR2476U
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SARAH AMAN
NRIC No	SXXXX038Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98798211
Alternative Phone No	OFFICE-98798211

### Vehicle Particulars

Manufacturer	TOYOTA
Model	AXIO
Exact Purpose for which vehicle was being used at time of accident	
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	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPPHQ20-000731
Cover Note Number	

### Driver

Name of Driver	AHMAD FADLY BIN SHAMSUL KAHAR
NRIC No	SXXXX920C
Date Of Birth	20/10/1990
Occupation	INDOOR
Date Of Driving Pass	10/06/2016
Driving Experience	4 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93692585
Fax Number	
Contact Number	
Email Address	AHMAD-FADLY@OUTLOOK.COM

Address	BLK 682A WOODLANDS DRIVE 62 #01-85
Postcode	731682
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	RELATIVE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	CHAIN COLLISION
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	3
Was any body injured in the Accident?	YES
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)	2
Passenger 1	NAME: : NURUL AFIQAH BINTE SEHAB GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ
Police Station Address	<b>ROAD:</b> 10 UBI AVENUE 3 , <b>POSTCODE:</b> 408865 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 65470000 - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE SEE POLICE REPORT.

#### 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	SLB5116P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	UNKNOWN
NRIC/Passport Number	
Contact Number	NA

Address	NA
	NA
Postcode	NA
Insurance Company Name	
Nature Of Damage	NA
No. Of Passenger (Including Driver)	

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	GBA8322P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	UNKNOWN
NRIC/Passport Number	
Contact Number	NA
Address	NA
	NA
Postcode	NA
Insurance Company Name	
Nature Of Damage	NA
No. Of Passenger (Including Driver)	

#### DETAILS OF INJURED PERSON 1

Name	AHMAD FADLY BIN SHAMSU KAHAR
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SGR2476U
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	BLK 682A WOODLANDS DRIVE 62 #01-85
Postcode	

#### DETAILS OF INJURED PERSON 2

Name	•NURUL AFIQAH BINTE SEHAB
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SGR2476U
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	BLK 682A WOODLANDS DRIVE 62 #01-85
Postcode	

**SKETCH PLAN**

**IMPORTANT NOTICE**

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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:

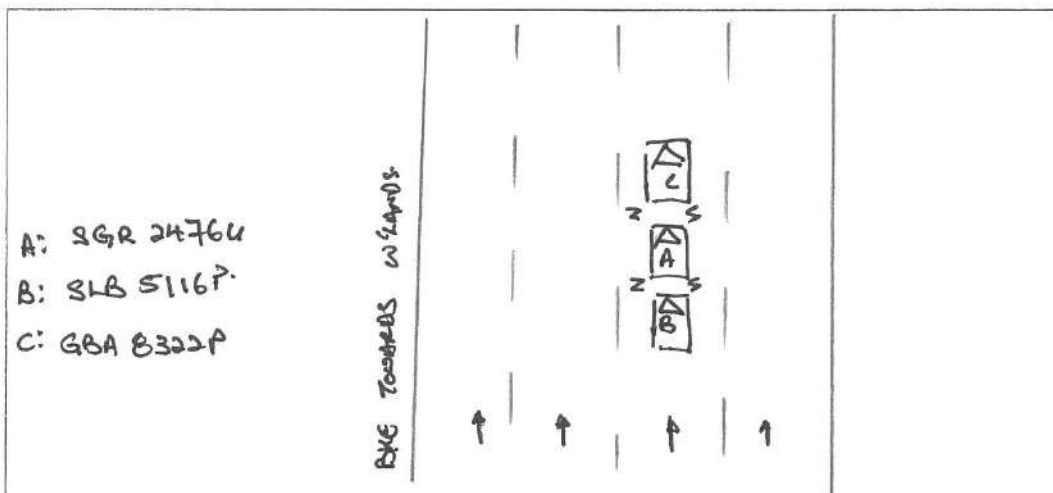
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "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
- (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.:

SKETCH PLAN




DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

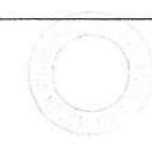
I WAS TRAVELLING ALONG BIKE TOWARDS W. LANE ON THE SECOND RIGHT LANE OF A LANE, AS I WAS TRAVELLING STRAIGHT VEHICLE IN FRONT BRAKE AND STOP, I ALSO STOPPED WHEN SUDDENLY ONE M/CAR SLB 5116P CAME FROM MY REAR AND COLLIDED ONTO THE REAR PORTION OF MY VEHICLE. DUE TO THE STRONG IMPACT CAUSED MY VEHICLE TO BURST FORWARD AND COLLIDED ONTO M/VAN GBA 8322P IN FRONT OF ME.

DECLARATION

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

  
Policyholder's Signature  
Date & Time:

 12/08/20  
1550 hours  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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

POLICE REPORT Pg. 1



**SINGAPORE  
POLICE FORCE**



T/20200812/7003

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

1 of 3  
Report No. T/20200812/7003

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 12/08/2020 15:27		Vide Report No.:	Station Diary No.:
<b>Informant's Particulars</b>			
Name of Informant: AHMAD FADLY BIN SHAMSUL KAHAR		Address: 682A WOODLANDS DRIVE 62 #01-85 SINGAPORE 731682	
ID Type / ID No.: NRIC NO / S9038920C		Contact No.: Home/Office: Mobile: 93692585	
Nationality: SINGAPORE CITIZEN		Email: ahmad-fadly@outlook.com	
Sex: Male	Age: 29	Date of Birth: 20/10/1990	Type of Informant: Driver
Race: Malay		Language: English	Institution / School Name:
Occupation: Other civil engineering and related technicians		Driving Licence Information: Class: 3A Date of Expiry:	

<b>General Information of the Accident</b>				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 11/08/2020 18:30	Type of Location: Straight Road
Location:  BUKIT TIMAH EXPRESSWAY+ BUKIT TIMAH EXPRESSWAY Location(s) found BU				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 90 Km/h	
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of
GBA8332P	Van					0
SGR2476U	Car	TOYOTA		Blue	Seriously Damaged	1
SLB5116P	Car		HONDA			0

POLICE REPORT Pg. 1



SINGAPORE  
POLICE FORCE



T/20200812/7003

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

2 of 3

Report No. T/20200812/7003

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SGR2476U	EQ INSURANCE COMPANY LTD.	DMPPHQ20-000731		

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Passenger				
Name	NURUL AFIQAH BINTE SEHAB		ID No.	S9212463J
Related Vehicle	SGR2476U (Car)		Contact No.	94302733
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: 3A Date of Expiry: NIL
Date	11/08/2020		Date	11/08/2020
No. of Days granted Medical Leave	03	Degree of	Slight	
Driver				
Name	AHMAD FADLY BIN SHAMSUL KAHAR		ID No.	S9038920C
Related Vehicle	SGR2476U (Car)		Contact No.	93692585
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: 3A Date of Expiry: NIL
Date	11/08/2020		Date	11/08/2020
No. of Days granted Medical Leave	03	Degree of	Slight	

Brief Details.

I WAS TRAVELLING ON THE SECOND RIGHT LANE OF 4 LANES ALONG BKE TOWARDS WOODLANDS, AS I WAS TRAVELLING STRIAGHT VEHICLE IN FRONT BRAKE AND STOP, I ALSO APPLIED MY BRAKE TO STOP WHEN SUDDENLY ONE M/CAR SLB5116P CAME FROM MY REAR AND COLLIDED ONTO THE REAR PORTION OF MY VEHICLE, DUE TO THE STRONG IMPACT CAUSED MY VEHICLE TO SURGE FORWARDS AND COLLIDED ONTO M/VAN GBA8322P INFRONT OF ME. AS THE RESULT OF THE ACCIDENT, I SUSTAIN PAIN ON MY RIGHT LEG AND MY PASSENGER NURUL AFIQAH BINTE SEHAB SUSTAIN PAIN ON HER BACK AND NECK.

POLICE REPORT Pg. 1



SINGAPORE  
POLICE FORCE



T/20200812/7003

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

3 of 3

Report No. T/20200812/7003

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TPHQ /  
SHARIFAH NOR FARIZAN BINTE SYED MOHD  
SAID  
Contact No.: 65476172

Authentication Stamp

NP168

Signature Of Informant:

The identity of the person making this report has  
been authenticated by SingPass. No signature is  
required.

Date/Time:  
12/08/2020 15:27

Classification Of Case:



REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S9038920C**



Name

**AHMAD FADLY BIN SHAMSUL  
KAHAR**

Race

**MALAY**

Date of birth

**20-10-1990**

Sex

**M**

**S9038920C**



Country/Place of birth

**SINGAPORE**

FOR KFS  
ACCIDENT CLAIM  
USE ONLY

5204522



NRIC No. **S9038920C**



FOR KFS  
ACCIDENT CLAIM  
USE ONLY

Date of issue

**25-07-2013**

**APT BLK 682A WOODLANDS DRIVE 62 #01-85  
SINGAPORE 731682**

NRIC No: **S9038920C**

Date: **27/12/2018**


**REPUBLIC OF SINGAPORE** **DRIVING LICENCE**

Licence Number: **S9038920C**  
Name: **AHMAD FADLY BIN SHAMSUL KAHAR**

Birth Date: **20 Oct 1990**  
Issue Date: **12 Nov 2009**

**FOR KFS  
ACCIDENT CLAIM  
USE ONLY**

001803322K



**YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)**

Class 2B	MOTORCYCLES NOT EXCEEDING 200 CC	12 Nov 2009
Class 2A	MOTORCYCLES BETWEEN 201 CC AND 400 CC	17 Feb 2011
Class 2	MOTORCYCLES EXCEEDING 400 CC	13 Aug 2012
Class 3A	MOTOR CARS AND MOTOR TRACTORS WITHOUT CLUTCH PEDALS THE WEIGHT OF WHICH UNLADEN DOES NOT EXCEED 2500 KILOGRAMS	10 Jun 2016

**FOR KFS  
ACCIDENT CLAIM  
USE ONLY**

S9038920C

S / No. 9000248715

Licence No: S9038920C

NP 228A

**EQ Insurance Company Limited**

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110  
 tel 65 6223 9433 | fax 65 6224 3903 | www.eqinsurance.com.sg  
 reg no. 1978-00490-N



### PRIVATE CAR SCHEDULE

Page 1 of 9

Agency	A000258	Class of Policy	PRIVATE CAR	Policy Number	DMPPHQ20-000731
Account	A000258	Issued on	20/01/2020 in Singapore	Replacing Policy no.	DMPPHQ19-000818
Client	0122349	Acceptance Date	20/01/2020		

Period of Insurance from 02/02/2020 to 01/02/2021 , both dates inclusive

Insured's Name Sarah Aman  
 Address Blk 669B Edgefield Plains  
 #08-684  
 Singapore 822669

Business/Occupn Admin  
 Financial interest Hong Leong Finance Ltd

Premium	Basic Annual Premium	SGD864.64		
	Special Discount @ 5%	SGD43.23-		
	Safe Driver Discount	SGD41.07-		
	Total Annual Premium	SGD780.34	Premium Due	SGD780.34
			Premium GST	SGD54.62
			Total Due	SGD834.96

Risk No. 001	PRIVATE CAR			
1. Registration	SGR2476U	Make/Model	TOYOTA COROLLA AXIO 1.5	Saloon 1496cc
Type of Cover	Comprehensive	No. of seats	5	Body Type Saloon
Engine No.	1NZC449117	Capacity cc's	1496	Yr of Manuf/Regn 2006/2007
Chassis No.	NZE1416011126			NCB% 30.00
				Certificate Ref. MX2
Sum Insured: Market Value at the time of loss			SGD0.00	
Insured/Named Drivers			SGD500.00	
Unnamed Drivers			SGD1,000.00	
YEID		Additional	SGD3,000.00	
Named Drivers INSURED			AHMAD FADLY BIN SHAMSUL KAHAR	

#### PRIVATE CAR COMPREHENSIVE - CLASSIC PLAN (Ver. 8)

For information on Motor Claims Framework (MCF), please visit GIA websites  
 (www.gia.brg.sg /pdfs /Industry /MCF2010\_Brochure.pdf)

The Policy is subject to the following Clauses, Warranties, Memo, Endorsement,  
 Exclusions as printed herein and/or attached hereto:-

#### EXCESS - OWN DAMAGE CLAIMS

We will not pay for the Excess specified in the Policy Schedule or the  
 Certificate of Insurance. You will have to pay the Excess for every claim made  
 against us for own damage claims to your vehicle under Section 1.

Continued on page 2



A Member of Citystate



PM1702-Ver2.0

Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo

