

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	02/09/2020 15:03
Date Of Accident	21/07/2020 19:00
Exact Location Of Accident	BEDOK NORTH AVE 4
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJT8915J
Insured/Policyholder	
Name Of Registered Owner	NEW AUTODRIVE CREDIT (S) PTE LTD
Co Reg No	2XXXXX137E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90991331
Alternative Phone No	OFFICE-90991331

Vehicle Particulars

Manufacturer	MAZDA
Model	MAZDA3 1.6L SDN LUX
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5113127491
Cover Note Number	

Driver

Name of Driver	HERAZAD BIN SAMAT
NRIC No	SXXXX452D
Date Of Birth	01/08/1973
Occupation	OUTDOOR
Date Of Driving Pass	20/11/2018
Driving Experience	1 YEAR AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84080277
Fax Number	
Contact Number	OFFICE-84080277
Email Address	NOEMAIL

Address	BLK 187 BOON LAY AVENUE #22-84
Postcode	640187
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	-
	-
	-

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)	1

Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - G/20200901/2149.

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	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


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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.: _____

Accident Sketch Plan

SKETCH PLAN

unaware of accident happen.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report - 9/20/2009 01/2/149

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**



G/20200901/2149

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POLICE REPORT (NP299)

Report No. G/20200901/2149

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

Date/Time Report Made 01/09/2020 20:56	Vide Report No. G/20200721/0185	Station Diary No. 111
Name Of Informant LIM TOW THENG	Address 28 LORONG 30 GEYLANG #04-07 SINGAPORE 398361	
ID Type / ID No. NRIC NO / S1662734H	Contact No. Home/Office	Mobile 90991231
Nationality SINGAPORE CITIZEN	Email Address	
Occupation Company director	Sex Male	Age 56
Institution/School Name	Date of Birth 15/04/1964	Race Chinese
Date/Time Of Incident 21/07/2020 00:00	Location Of Incident BEDOK NORTH ROAD SINGAPORE	

Brief details.

I am the company director of New Autodrive Credit Pte Ltd located at 210 Turf Club Road Lot B40, Singapore 287995.

On 20/06/2020 at 1400hrs, our car SJT8915J, a silver coloured Mazda 3, was leased out to:

Ahzaha Bin Sulong, S7938143H
Blk 21 Teban Gardens Road #13-145

Signature Of Officer Recording The Report: G / Sgt 3 MOHAMAD AKMAL BIN MOHD ROSLAN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 01/09/2020 20:56
Officer In-Charge Of Case: G / Bedok Police Divisional Investigation Branch / Insp LAU YUN FANG Contact No.: 62447200	Classification Of Case:

Authentication Stamp



Police Report



SINGAPORE
POLICE FORCE



G/20200901/2149

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20200901/2149

and another authorized driver:
Herazad Bin Samat, S7327452D
Blk 187 Boon Lay Ave #22-84

The end of their lease was agreed to be on 19/09/2020.

On the night of 21/07/2020, I was contacted by one Traffic Police officer, IO Syariffudin, who informed me that the said vehicle was involved in an accident and that the driver has fled. He then asked if I had spare keys for the vehicle. I went down to Traffic Police compound the following day and passed him the keys.

I was then allowed to collect the vehicle on 25/08/2020 and subsequently sent it to a workshop for repairs. My insurance provider has requested for me to lodge a police report to state that the vehicle was leased out and was not under the care of my company and our staffs. I was also informed that the person who was driving the said vehicle has already been apprehended and that he was not the hirer or the authorized driver. I had also found a large knife at the underside of the driver seat. That is all.

Signature Of Officer Recording The Report:

G / Sgt 3 MOHAMAD AKMAL BIN MOHD ROSLAN

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
01/09/2020 20:56

Officer In-Charge Of Case:
G / Bedok Police Divisional Investigation Branch /
Insp LAU YUN FANG
Contact No.: 62447200

Classification Of Case:

Authentication Stamp



SINGAPORE
POLICE FORCE

SIGNATURE

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

