

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	05/09/2020 12:05
Date Of Accident	04/09/2020 14:10
Exact Location Of Accident	PIE (CHANGI) AFTER KIM KEAT LINK EXIT LANE 1
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLX9594A
Insured/Policyholder	
Name Of Registered Owner	ACHMAD NASRUN BIN ABDUL KALAM
NRIC No	S8939243H
Email Address	ACHMAD_NASRUN@LIVE.COM
Mobile Phone No	(LOCAL) +65-91127294
Alternative Phone No	OTHERS-91127294

Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS 1.6L CVT
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	FWD SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	PNPV2019-00001572-01
Cover Note Number	

Driver

Name of Driver	ACHMAD NASRUN BIN ABDUL KALAM
NRIC No	S8939243H
Date Of Birth	01/11/1989
Occupation	INDOOR
Date Of Driving Pass	10/07/2009
Driving Experience	11 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-91127294
Fax Number	
Contact Number	OTHERS-91127294
Email Address	ACHMAD_NASRUN@LIVE.COM

Address	BLK 446A BUKIT BATOK WEST AVE 8 #03-401
Postcode	651446
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
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?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	YES
Number of Passengers (Including Driver)	5
Passenger 1	NAME: : NURFARHANA MUSTAFA GENDER: : FEMALE
Passenger 2	NAME: : AZIZAH ANANG GENDER: : FEMALE
Passenger 3	NAME: : MUSTAFA DELI GENDER: : MALE
Passenger 4	NAME: : FARIZ IHSAN GENDER: : MALE

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

KINDLY REFER TO SKETCH PLAN.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC7393J
Vehicle Make/Model/Colour	HYUNDAI IONIQ
Details Of Properties	
Vehicle Category	TAXI

Name of Driver	CHONG NGIP KWEE
NRIC/Passport Number	S0034076F
Contact Number	98291681
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

SKETCH PLAN


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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.

 5/9/20

Policyholder's Signature
Date & Time:

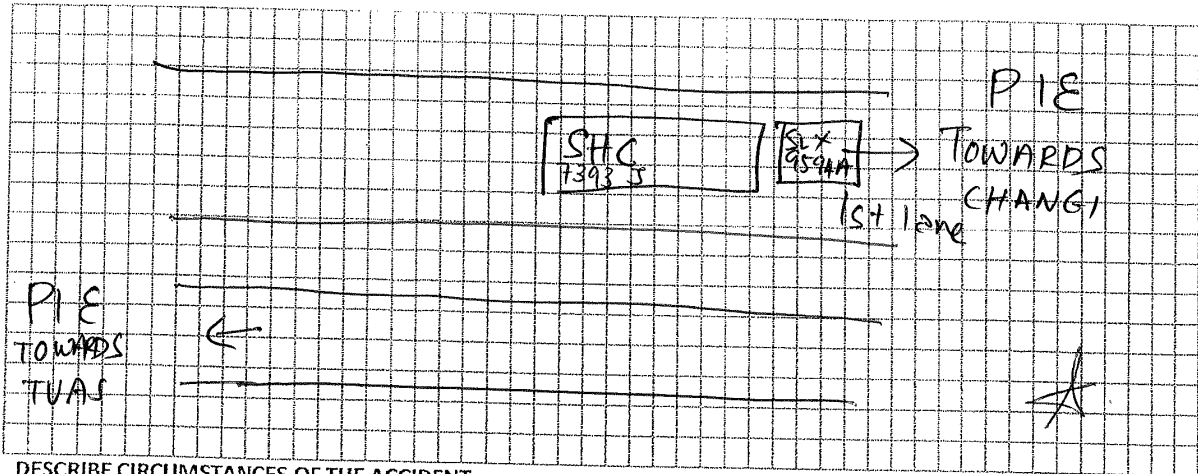
Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

CAR IN FRONT BRAKED. I MANAGED TO BRAKE.
TAXI BEHIND (SHC 7393 J) HIT MY CAR FROM BEHIND *

Important:

You have been advised by the workshop that in the event that you wish to claim against your own policy (OD CLAIM), There is a **FOURTEEN (14) DAYS CLAUSE WHEREBY MUST BE MADE** within the stipulated time frame from the day of the occurrence.

- | | |
|---|--|
| | - Reporting Only |
| | - Claim OD |
| | - Claim TP |
| ✓ | - Claim OD / TP at other workshop |

DECLARATION

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

A 5/9/20

Policyholder's signature
Date & Time

Driver's Signature
(if driver not the policyholder)
Date & Time

ef
Reporting Centre Personnel's Signature
Name:
Nric/Fin No.



CERTIFICATE OF INSURANCE

Please call +65-6322-2072 for FWD Emergency Assistance
if Your Car breaks down or is involved in an accident.

All accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

POLICY NUMBER: PNPV2019-00001572-01 (Comprehensive - Classic Plan)

Car plate number: SLX9594A

Your name (As the policyholder): Achmad Nasrun Bin Abdul Kalam

Coverage start date: 27/01/2020

Coverage end date: 26/01/2021

Covered geographical area: Singapore, West Malaysia and Southern Thailand

Who is insured to drive:

(a) You; and

(b) Anyone with a valid driving license who You give permission to drive Your Car.

Important things to know:

Your Policy comprises this Certificate of Insurance, the Contract, the Car Insurance Summary and any Endorsements attached by Us. These documents should be read together as one. You must make sure that any person You give permission to drive Your Car understands Your duties under this Policy and complies with its conditions.

Your Policy is only valid if Your Car is being used for non-commercial activities in accordance with Your contract.

Finance company: Hong Leong Finance Limited

We confirm that this Policy complies with the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189).

Issued on: 12/01/2020

Abhishek Bhatia
Chief Executive Officer
FWD Singapore Pte Ltd

Please immediately inform us at +65-6820-8888
or email us at contact.sg@fwd.com if any details
in this Certificate of Insurance need to be changed.

REPUBLIC OF SINGAPORE DRIVING LICENCE

Portrait photo of Achmad Nasrun Bin Abdul Kalam

Licence Number: **S8939243H**

Name: **ACHMAD NASRUN BIN ABDUL KALAM**

Birth Date: **01 Nov 1989**

Issue Date: **10 Jul 2009**

Barcode: 001761128H

FOR ACCIDENT CLAIM USE ONLY

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S8939243H**

Portrait photo of Achmad Nasrun Bin Abdul Kalam

Name: **ACHMAD NASRUN BIN ABDUL KALAM**
احمد نصر بن عبد الكلام

Race: **INDIAN**

Date of birth: **01-11-1989**

Country/Place of birth: **SINGAPORE**

Sex: **M**

NRIC No: **S8939243H**

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

Class 3 Motor Cars =< 3000kg with =<7 passengers, exclusive of the driver, and other motor vehicles =< 2500kg

PASS DATE: **10 Jul 2009**

FOR ACCIDENT CLAIM USE ONLY

Licence No: **S8939243H**

Barcode: 001761128H

NP 428A

6069199

Barcode: 001761128H

NRIC No: **S8939243H**

Portrait photo of Achmad Nasrun Bin Abdul Kalam

Date of issue: **21-11-2018**

Address: **APT BLK 446A BUKIT BATOK WEST AVENUE 8 #03-401 SINGAPORE 651446**

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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