

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	08/10/2020 17:03
Date Of Accident	07/10/2020 15:40
Exact Location Of Accident	JOO CHIAT ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBE3962D
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Insured/Policyholder

Name Of Registered Owner	ACE KEGAN PTE LTD
Co Reg No	201225982D
Email Address	ADMIN@ACEKG.COM
Mobile Phone No	
Alternative Phone No	Office-66356619

Vehicle Particulars

Manufacturer	TOYOTA
Model	DYNA
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	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1800134009-01
Cover Note Number	

Driver

Name of Driver	UDDIN JASIM
NRIC No	G7242592N
Date Of Birth	16/07/1975
Occupation	OUTDOOR
Date Of Driving Pass	15/03/2013
Driving Experience	7 YEARS AND 6 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-98969374
Fax Number	
Contact Number	
EMail Address	NOEMAIL
Address	-
Postcode	
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
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.	NO
Number of Passengers (Including Driver)	3
Passenger 1	Name: : ANOWER Gender: : Male
Passenger 2	Name: : BIDDUT Gender: : Male

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	ROAD: 1 CASSIA LINK , POSTCODE: 397618 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT: T/20201008/2026.

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	SMU6499R
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE
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)	

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.

Tasim

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.:

Refer to police report

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

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

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



**SINGAPORE
POLICE FORCE**



T/20201008/2026

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

1 of 3

Report No. T/20201008/2026

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/10/2020 11:05		Vide Report No.:		Station Diary No.: 47	
Informant's Particulars					
Name of Informant: UDDIN JASIM			Address: C/O 2 GAMBAS CRESCENT #04-10 SINGAPORE 757044		
ID Type / ID No.: FIN NO / G7242592N			Contact No.: Home/Office: 66356619 Mobile: 98969374		
Nationality: BANGLADESHI			Email: AMIN.ISLAM@ACEKG.COM		
Sex: Male	Age: 45	Date of Birth: 16/07/1975	Type of Informant: Driver		
Race: Bangladeshi			Language:		Institution / School Name:
Occupation: Lorry driver			Driving Licence Information: Class: 3 Date of Expiry: 17/09/2024		

General Information of the Accident				
Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 07/10/2020 15:40	Type of Location: Straight Road
Location: JOO CHIAT ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBE3962D	Lorry				Slightly Damaged	2
SMU6499R						0

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

Sketch Plan #4



**SINGAPORE
POLICE FORCE**



T/20201008/2026

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

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Report No. T/20201008/2026

CONTINUATION OF REPORT

Driver			
Name	UDDIN JASIM		ID No. G7242592N
Related Vehicle	GBE3962D (Lorry)		Contact No. 66356619
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: 17/09/2024
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	KOO KIN LEONG		ID No. S7700214F
Related Vehicle	SMU6499R		Contact No. 96940506
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 07/10/2020 at around 1540hrs, I was driving my vehicle, GBE3962D along Joo Chiat Road on the left side of a two-way road. While I was driving, there was one vehicle in front of me, SMU6499R which turned on his hazard light and had came to a slow stop. I had thought that he had wanted to stop so I had intended to overtake the vehicle. I had driven to the other lane and had wanted to move in front of the vehicle.

While I was moving, the other vehicle had suddenly moved and turned right. This caused a collision between our vehicles. We came outside and exchanged particulars. The other driver had called Traffic Police who informed that there is no need to lodge a police report since no persons was injured. We both then went our separate ways. There is an in-vehicle camera in the lorry. When I had wanted to review the footage in my office, I discovered that there was some issues. My office then informed me to lodge a police report regarding the accident.

The damage to my vehicle are as follows:

- 1.) Scratches on the front left side of my vehicle
- 2.) Dents on the left front side of my vehicle

Sketch Plan #5



**SINGAPORE
POLICE FORCE**



T/20201008/2026

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

3 of 3

Report No. T/20201008/2026

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 /
Staff Sgt MUHAMMAD HAZWAN BIN ADNAN

Signature Of Informant:

Jasim

Signature Of Interpreter:
Not applicable

Date/Time:
08/10/2020 11:05

Officer In Charge Of Case:
TP / GIA /
Staff Sgt WONG SIEU LUI
Contact No.: 65476151

Classification Of Case:

Authentication Stamp
NP168
Geylang N.P.C
1 Cassia Link
Singapore 397618
Tel: 1800-8486999

Driving License



REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **G7242592N**

Name: **UDDIN JASIM**

Birth Date: **16 Jul 1975**
Issue Date: **18 Sep 2019**
Valid Till: **17/09/2024**

002978578KJ



WORK PERMIT
Employment of Foreign Manpower Act (Chapter 91A)
Republic of Singapore

Employer: **ACE KEGAN PTE. LTD.**

Name: **UDDIN JASIM**
Work Permit No: **6 61951589**
Sector: **CONSTRUCTION**

26.03.2028

K2183448

Page for Insurance Motor Accident Reporting
and Claims Purposes Only

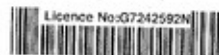
Vehicle no: **GEE 3963D**
Date of Accident: **07/10/20**

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

EFFECTIVE DATE

Class 3 Motor cars with unladen weight <= 3000kg with <= 7 passengers, exclusive of driver; and other motor vehicles with unladen weight <= 2500kg 15 Mar 2013

NP 428A



VISIT PASS
Immigration Regulations

Name: **UDDIN JASIM**

FIN: **G7242592N**
Date of Birth: **16-07-1975** Sex: **M**
Nationality: **BANGLADESHI**
MULTIPLE JOURNEY VISA ISSUED

Download SGWorkPass App to check status





Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

