

## 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	26/10/2020 17:43
Date Of Accident	19/07/2020 10:15
Exact Location Of Accident	ALONG BOON LAY AVENUE TOWARDS BOON LAY INTERCHANGE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJV5927J
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MOHAMAD NOOR BIN NOMAN
NRIC No	SXXXX906C
Email Address	73MOHDNORNOMAN@GMAIL.COM
Mobile Phone No	(LOCAL) +65-88926579
Alternative Phone No	OTHERS-88926579

### Vehicle Particulars

Manufacturer	PROTON
Model	EXORA-1.6 AT (M-LINE) ABS D/AB 2WD 5DR (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SI19V14479/VPE/R00
Cover Note Number	

### Driver

Name of Driver	MOHAMAD NOOR BIN NOMAN
NRIC No	SXXXX906C
Date Of Birth	01/03/1973
Occupation	OUTDOOR
Date Of Driving Pass	19/08/2011
Driving Experience	8 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-88926579
Fax Number	
Contact Number	OTHERS-88926579
EEmail Address	73MOHDNORNOMAN@GMAIL.COM

Address	BLK 16 GHIM MOH ROAD #07-67
Postcode	270016
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	COLLIDED INTO PEDESTRIAN
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: : HAMDAN BIN YUSOF GENDER: : MALE
Passenger 2	NAME: : MAN GENDER: : MALE

### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	JURONG EAST N.P.C
Police Station Address	<b>ROAD:</b> 92 BOON LAY WAY , <b>POSTCODE:</b> 609962 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

### Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20200719/2026

### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	NOT CAPTURED
Was there any audio recorded?	NO

### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	NA/UNKNOWN

Name of Driver	NG YE KAI
NRIC/Passport Number	TXXXX889F
Contact Number	98969439
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## Accident Sketch Plan

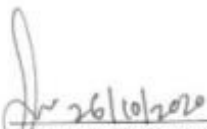
### SKETCH PLAN

#### 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.

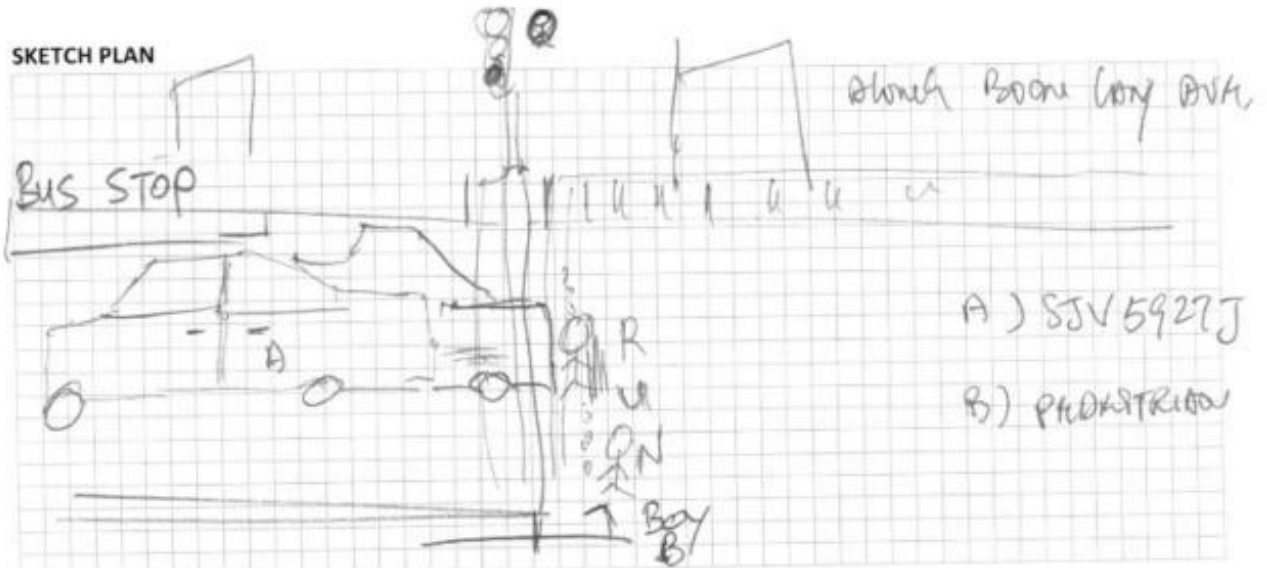
  
Policyholder's Signature  
Date & Time: 26/10/2020 15:05pm

\_\_\_\_\_  
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



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO POLICE REPORT 7/20200719/2026

The rest of the form is a large rectangular area with horizontal lines, which has been completely crossed out with a large diagonal line from the top right to the bottom left.

DECLARATION

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

*[Signature]*  
26/10/2020 15:05pm  
Policyholder's Signature  
Date & Time:

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

*[Signature]*  
26/10/2020  
Reporting Centre Personnel's Signature  
Name: *[Signature]*  
NRIC/FIN No.:

POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20200719/2026

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Police Station Of Origin:  
Jurong East N.P.C  
92 Boon Lay Way SINGAPORE 609962  
Tel No: 1800-8999999

Report No. T/20200719/2026

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 19/07/2020 13:20	Vide Report No.:	Station Diary No.: 23
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Informant's Particulars			
Name of Informant: MOHAMAD NOR BIN NOMAN		Address: APT BLK 16 GHIM MOH ROAD #07-67 SINGAPORE 270016	
ID Type / ID No.: NRIC NO / S7307906C		Contact No.: Home/Office:                      Mobile: 88926579	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 47	Date of Birth: 01/03/1973	Type of Informant: Driver
Race: Malay		Language: English	Institution / School Name:
Occupation: Other car and light goods vehicle drivers nec		Driving Licence Information: Class: 3	Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Pedestrian / Cyclist	Drink Drive: No	Date/Time of Accident: 19/07/2020 10:15	Type of Location: Straight Road
Location: Along Road 1 BOON LAY AVENUE  Towards Boon Lay Interchange, Pedestrian Crossing near to Bustop no. 21429				
Weather: Sunny		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Pedestrian Crossing	Traffic Volume: Light	
Type of Collision: Moving Vehicle Against - Pedestrian			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJV5927J	Car	PROTON	EXORA 1.6L AT (M-LINE) ABS D/AB 2WD 5DR	White	Slightly Damaged	2

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

POLICE REPORT



SINGAPORE  
POLICE FORCE



T/20200719/2026

Police Station Of Origin:  
Jurong East N.P.C  
92 Boon Lay Way SINGAPORE 609962  
Tel No: 1800-8999999

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Report No. T/20200719/2026

CONTINUATION OF REPORT

<b>Driver</b>			
Name	MOHAMAD NOR BIN NOMAN	ID No.	S7307906C
Related Vehicle	SJV5927J (Car)	Contact No.	88926579
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
<b>Pedestrian</b>			
Name	NG YE KAI	ID No.	T0323889F
Related Vehicle	NIL	Contact No.	98969439
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	19/07/2020	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight

**Brief Details.**

On 19/07/2020 at 1015hrs, I was driving my family car, one white Proton Exora, bearing registration plate number: SJV5927J along Boon Lay Avenue towards Boon Lay Interchange direction. I was with another 2 friends of mine namely Hamdan Bin Yusof, Hp: 96606463 and Man, Hp: 84084827. We were actually on our way to the Muslim Cemetery. I was driving pass bustop no. 21429, ahead of me was a pedestrian crossing. The traffic light were in working order (green) and was in my favour. I was driving in the left lane when suddenly a pedestrian ran across the opposite traffic light pedestrian crossing and in front of my vehicle. I immediately hit my brakes however could not stop in time. As a result, the front left side of my vehicle hit onto the pedestrian. The pedestrian, one male Chinese in his teens, fell down onto the grass patch.

The 3 of us immediately alighted out from my vehicle to check on the boy, who kept apologizing on his act. I told him not to worry as I am more concerned on his well being. He stated that he was late for his tuition lesson and had ran across the pedestrian crossing, knowingly that the "red man" were still on and not in his favour. I then made a check on him; he had minor abrasions on his right temple and also on his outer right fingers. I then asked him if he could stand up which he stated yes. I then told him that I would send him to the nearest hospital for further medical assistance which he agreed. While on the way to the hospital, I then told him to inform his family members. He then called both his mother and brother to update on the accident. I then sent the boy to Ng Teng Fong General Hospital A&E and waited for his family members to arrive. They then arrived and asked what happened; I told them about the incident and they acknowledged. Casualty's brother then asked if I got an in-built camera in my vehicle which I stated yes however I told him that I do not know how to operate the system. His brother asked if he could retrieve it to view earlier today and returned the memory card to me within an hour; to which I agreed. However his brother had mentioned that there was no video recording thus there was nothing else for us

POLICE REPORT



SINGAPORE  
POLICE FORCE



T/20200719/2026

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Report No. T/20200719/2026

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92 Boon Lay Way SINGAPORE 609962  
Tel No: 1800-8999999

CONTINUATION OF REPORT

to do at the moment. I then told him that I will make my move and will lodge a Traffic Accident Report and he acknowledged. I also advised his brother to lodge a report on their part to which he said ok.

His brother mentioned that he will update on his brother condition, to which I acknowledged. My car had some minor damaged: A slight dent with minor scratches on the front left part of the bonnet. That is all.



POLICE REPORT



SINGAPORE  
POLICE FORCE



T/20200719/2026

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Report No. T/20200719/2026

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: D / Staff Sgt SAZALI BIN SAFIE	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 19/07/2020 13:20
Officer In Charge Of Case: TP / AEIT / Sgt 2 SHARIFAH NOR FARIZAN BINTE SYED MOHD SAID Contact No.: 65476172	Classification Of Case:
Authentication Stamp NP168	

Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo

