

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	05/11/2020 17:47
Date Of Accident	05/11/2020 03:15
Exact Location Of Accident	ALONG MACPERSON ROAD (NO 538)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PC8778G
Insured/Policyholder	
Name Of Registered Owner	PURPLE COACH TOUR PTE.LTD.
Co Reg No	2XXXXX300H
Email Address	SALES@PCTOUR.COM.SG
Mobile Phone No	(LOCAL) +65-81234650
Alternative Phone No	OFFICE-84688482

Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE-3.0 D HIGH-ROOF 14 SEATER (A)
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D18MCV0000907_02
Cover Note Number	

Driver

Name of Driver	HASRIL NIZAM BIN BORHAN
NRIC No	SXXXX980E
Date Of Birth	17/01/1976
Occupation	OUTDOOR
Date Of Driving Pass	30/01/2001
Driving Experience	19 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81234650
Fax Number	
Contact Number	OTHERS-84688482
EEmail Address	SALES@PCTOUR.COM.SG

Address	BLK 224 SIMEI STREET 4 #03-110
Postcode	520224
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	CHANGI NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 9 SIMEI STREET 2 , POSTCODE: 529914 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5872999 - FAX NO: 65872900
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20201105/2015

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	GBE8677U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	ISLAM MUMINUL
NRIC/Passport Number	OXXXX8845
Contact Number	89291572
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver) 2

Accident Sketch Plan

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.



Policyholder's Signature
Date & Time:

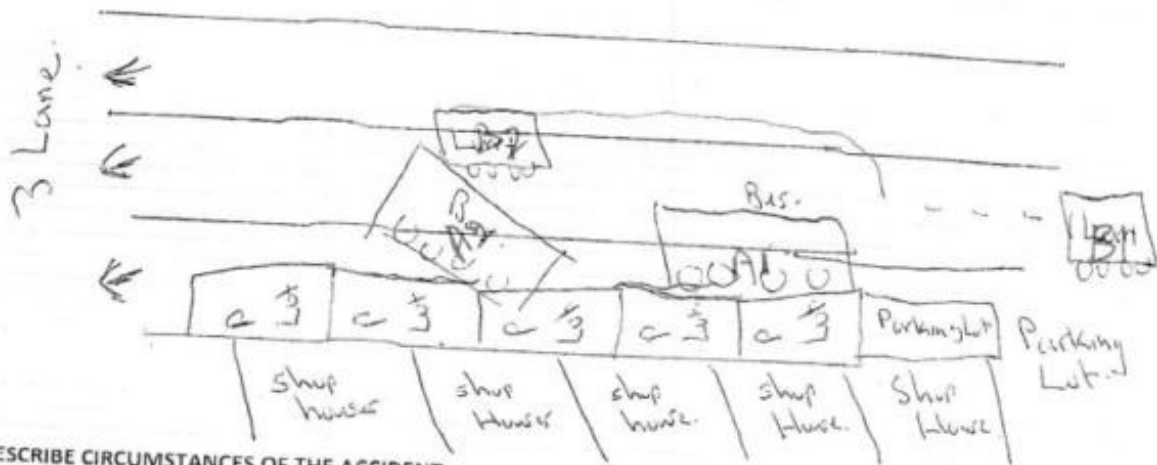
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

Accident Sketch Plan

SKETCH PLAN

535 Mepharson Rd.



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

5th nov 2020 at 0315hrs. I Husni Mizum has just finish my supper at 535 Mepharson Rd. My bus PC 87786 was park along parallel Mepharson Rd. parallel parking lot in lane 3. Once I start my engine on the vehicle. I notice from my side mirror there is incoming vehicle lorry in lane 2 going towards me about 30mtrs. Then five i slowly reversed my bus little bit to get the angle from front before i start turning my steering wheel full to right in order to move out. Once i manage to move out from parking lot from lane 3 to lane 2 suddenly the lorry from behind start to change to lane 1 without showing the vehicle in rushing manner and hit my right side bus bumper and front bulb. During the incident weather was good road was dry.

POLICE REPORT 7/2020/1105/2015

DECLARATION

I/We declare that the 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**



T/20201105/2015

Police Station Of Origin:
Changi N.P.C
9 Simei Street 2 SINGAPORE 529914
Tel No: 1800-5872999

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Report No. T/20201105/2015

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/11/2020 04:02		Vide Report No.:		Station Diary No.: 14	
Informant's Particulars					
Name of Informant: HASRIL NIZAM BIN BORHAN			Address: APT BLK 224 SIMEI STREET 4 #03-110 SINGAPORE 520224		
ID Type / ID No.: NRIC NO / S7600980E			Contact No.: Home/Office: Mobile: 84688482		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 44	Date of Birth: 17/01/1976	Type of Informant: Driver		
Race: Malay			Language:		Institution / School Name:
Occupation: Bus driver			Driving Licence Information: Class: 3,4 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 05/11/2020 03:15	Type of Location: Straight Road
Location: MACPHERSON ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: No Traffic	
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
GBE8677U	Lorry				Slightly Damaged	1
PC8778G	Bus/Coach/Minibus				Slightly Damaged	0

Details of Person Involved

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

POLICE REPORT



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Changi N.P.C
9 Simei Street 2 SINGAPORE 529914
Tel No: 1800-5872999



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Report No. T/20201105/2015

CONTINUATION OF REPORT

Driver			
Name	HASRIL NIZAM BIN BORHAN	ID No.	S7600980E
Related Vehicle	PC8778G (Bus/Coach/Minibus)	Contact No.	84688482
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 05/11/2020 at about 0315hrs, I was moving my bus(PC8778G) out of the parking lot outside of Julaiha Muslim Restaurant along Macpherson Road. As it was a tight space, I had to maneuver my bus several times in order to move it out of the parking lot. When I was moving out of the lot, a lorry (GBE8677U) then sped past me suddenly without slowing down. When he passed my vehicle, the left side of his vehicle hit the front right side of my bus, leaving it with a dent and some scratches. His vehicle sustained some scratches as well. We then exchanged particulars. There was no injury sustained by either of us. I am lodging this report for insurance purposes.

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20201105/2015

Police Station Of Origin:
Changi N.P.C
9 Simei Street 2 SINGAPORE 529914
Tel No: 1800-5872999

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Report No. T/20201105/2015


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 / ASP NABEEL AZHAR BIN MOHD MASHREN	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 05/11/2020 04:02
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:
Authentication Stamp NP168	



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

