

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 Submission	17/12/2020 18:52 (SGT)
Date of Accident	04/11/2020 11:10 (SGT)
Exact Location of Accident	Tampines Ave 5, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGY5741Y
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	M AUTO LEASING PTE LTD
Company Reg No	2XXXXX087Z
Email Address	MUHDFAUZAN@GMAIL.COM
Mobile Phone No	(Phone) +65-84999830
Alternative Phone No	+65-81450033

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Sunny
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Reporting only
Vehicle Category	Private hire

INSURANCE COMPANY

Name of Insurance Company	NTUC
Type of Coverage	ThirdPartyFireTheft
Fleet Policy	No
Policy Number	5117974478
Cover Note Number	-

DRIVER

Name of Driver	MUHAMMAD FAUZAN BIN RAMLAN
NRIC No	SXXXX839H
Date Of Birth	19/06/1992
Occupation	Outdoor

Date Of Driving Pass	24/06/2020
Driving experience	5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-84999830
Alt. Phone Number	-
Email Address	MUHDFAUZAN@GMAIL.COM
Address	BLK 427 BEDOK NORTH RD #03-645
Address complement	-
Postcode	460427
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Side Swipe
Weather Conditions	Raining
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Bedok North Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002449999
Alt. Police Station Phone No	(Fax) +65-62447258
Police Station Address	30 Bedok North Road Singapore 469676
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT T/20201126/2032

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	GBE7413X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-



Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

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.:

SKETCH PLAN



A - SGY5741X
B - GBE7413X

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was travelling at about 50 km/hr and due to the wet weather condition, the vehicle skidded and collided on the right side of the other vehicle bearing car plate (GBE7413X).

DECLARATION

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

Policyholder's Signature
Date & Time:

Driver's Signature

Reporting Centre Personnel's Signature



SINGAPORE POLICE FORCE



T/20201126/2032

Police Station Of Origin:
Bedok North N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

1 of 3

Report No. T/20201126/2032

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/11/2020 12:56	Vide Report No.:	Station Diary No.: 49
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Informant's Particulars

Name of Informant: MUHAMMAD FAUZAN BIN RAMLAN			Address: APT BLK 427 BEDOK NORTH ROAD #03-645 SINGAPORE 460427		
ID Type / ID No.: NRIC NO / S9222839H			Contact No.: Home/Office: Mobile: 84999830		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 28	Date of Birth: 19/06/1992	Type of Informant: Driver		
Race: Malay			Language: English		Institution / School Name:
Occupation: FIELD ENGINEER			Driving Licence Information: Class: 3A Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 04/11/2020 11:10	Type of Location: Bend
Location: TAMPINES AVENUE 5				
Weather: Drizzling		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBE7413X	Van	TOYOTA	HIACE 3.0 M	White	Slightly Damaged	0
SGY5741Y	Car	NISSAN	SYLPHY 1.5 4AT	Grey	Seriously Damaged	0



**SINGAPORE
POLICE FORCE**



T/20201126/2032

Police Station Of Origin:

Bedok North N.P.C

30 Bedok North Road SINGAPORE 469676

Tel No: 1800-2449999

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Report No. T/20201126/2032

CONTINUATION OF REPORT

Brief Details.

On the 04/11/2020 at about 1110hrs, I was driving my rental vehicle (SGY5741Y) along Tampines Avenue 5 turning onto PIE (TUAS). I was driving at the bend and there were 2 lanes. I was driving on the right lane and there was a van (GBE7413X) driving right beside me on the left.

I was driving at about 50km/h and due to the wet road conditions, the car skidded and my car skidded onto the left side crashing into the right side of the van. I immediately got off and checked on the driver. Both of us are not injured and we exchanged particulars. I observed that my rental vehicle is badly damaged and the front bumper almost came off, as for the van, the van sustained slight damages to the left side slide door and also rear left wheel damaged.

I wish to state that there is no paramedics at scene, no traffic police and no government property damaged.



**SINGAPORE
POLICE FORCE**



T/20201126/2032

Police Station Of Origin:
Bedok North N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

3 of 3

Report No. T/20201126/2032

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 /
Sgt 2 TAN ZHI XIANG

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
26/11/2020 12:56

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



Classification Of Case:

Authentication Stamp

Hello, NAC_PAYA_UBI_800601

• Change Language

• Change Password

• Log Out

My Desktop

Notice of Loss

Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="04/11/2020 18:44"/>
Vehicle No.(For Motor)	<input type="text" value="SGY5741Y"/>	Certificate Number	<input type="text"/>
<input type="button" value="Search"/>			

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5117974478	5117974478-000016	M AUTO LEASING PTE LTD	202017087Z	GFM	Third Party, Fire & Theft	SGY5741Y	SGY5741Y	24/08/2020	22/06/2021

ACCIDENT STATEMENT

ACCIDENT DATE: 04.11.2020 (DD/MM/YYYY), TIME: 11:10 (HH:MM)

LOCATION: TAMPINES AVE 5 turning to PIE (TUAS).

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SGY5741Y
 b) INSURANCE COMPANY: _____
 c) POLICY NUMBER: _____
 d) POLICY TYPE: (COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT)
 e) MAKE & MODEL: NISSAN SLIPHY
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: PERSONAL USAGE
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- A) NAME: M AUTO LEASING PTE LTD (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: _____ CONTACT: 8145 0033
 c) ADDRESS: 87 DEFU LANE 10 #03-13

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: MUHAMMAD FAUZAN BIN RAMLAN (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: 992228394 CONTACT: 84999830
 c) ADDRESS: BLK 427 BEDOK NORTH ROAD #03-645
S'pore 460427

* d) DATE OF BIRTH: 19/06/1992 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) YEARS OF DRIVING EXPERIENCE: 0 YRS.

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: CUSTOMER

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: BEDOK NORTH STATION.

8. THIRD PARTY VEHICLE

a) VEHICLE NUMBER: _____ MODEL: _____

b) DRIVER'S NAME: _____

c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

9. THIRD PARTY VEHICLE

d) VEHICLE NUMBER: _____ MODEL: _____

e) DRIVER'S NAME: _____

f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

Email =

fax =

VIDEO =