

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 18/12/2020 16:20 (SGT)
Date of Accident 17/12/2020 15:00 (SGT)
Exact Location of Accident Loyang, Singapore
Additional Location Information Loyang Flyover Junction
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLZ5155A

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner Zulkarnain Bin Muhammad
NRIC No S8331196G
Email Address zulmuhd1983@gmail.com
Mobile Phone No (Phone) +65-97822222
Alternative Phone No +65-97822222

VEHICLE PARTICULARS

Manufacturer Hyundai
Model Avante
Variant -
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 - Reporting only
Vehicle Category Private car

INSURANCE COMPANY

Name of Insurance Company Axa
Type of Coverage Comprehensive
Fleet Policy No
Policy Number GA535937
Cover Note Number -

DRIVER

Name of Driver Zulkarnain Bin Muhammad
NRIC No S8331196G
Date Of Birth 01/10/1983
Occupation Outdoor

Date Of Driving Pass	02/03/2019
Driving experience	1 YEAR AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97822222
Alt. Phone Number	+65-97822222
Email Address	zulmuhd1983@gmail.com
Address	Blk 18 Marsiling Lane #03-271
Address complement	-
Postcode	730018
Is the driver the policyholder?	Yes
If No, Relationship of the Driver with the Insured	-
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	Collision - Head to Rear
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	Bukit Merah West Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18003779999
Alt. Police Station Phone No	(Fax) +65-63773923
Police Station Address	500 Bukit Merah View #01-01 Singapore 159682
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

Refer to attached

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	SMD3033K
Vehicle Manufacturer	Mercedes
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	White
Vehicle Category	Private car
Name of Driver	Unknown
Contact Number	(Phone) +65-90083083

Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	Refer to photos
No. Of Passenger (Including Driver)	2

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 insurers who have insured vehicle(s) involved in this accident (all insurers 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 purposes) 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 making of correspondence, statements, invoices, reports or notes 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/are 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 used 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, regulation, 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: 18/12/2020 14:06	 Driver's Signature (If driver is not the policyholder) Date & Time:	 Reporting Centre Personnel's Signature Name: A. A. A. MREC/PIN No.:
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SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to page report / 10 T / 2020/12/17/2100


DECLARATION

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

Policyholder's Signature: [Signature] Date & Time: 16/12/2020 14:06h

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

Reporting Centre Personnel's Signature Name: [Signature] NSIC/FIR No.:

























Police Station Of Origin:
Bukit Merah West N.P.C.
500 Bukit Merah View #01-01 SINGAPORE
159582
Tel No: 1800-3779999



T202012170100

1 of 3

Report No: T202012170100

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 17/12/2020 18:13 Vide Report No.: Station Diary No.: 56

Informant's Particulars

Name of Informant: ZULKARNAIN BIN MUHAMMAD	Address: APT BLK 18 MARSILING LANE #03-271 SINGAPORE 730016		
ID Type / ID No: NRIC NO / S83311950	Contact No: Home/Office: Mobile: 97822222		
Nationality: SINGAPORE CITIZEN	Email:		
Sex: Male	Age: 37	Date of Birth: 01/10/1983	Type of Informant: Driver
Race: Banyanese	Language: English	Institution / School Name:	
Occupation: Operation Executive	Driving Licence Information: Class:	Date of Expiry:	

General Information of the Accident

Type of Accident: Non-Injury	Drink Drive: No	Date/Time of Accident: 17/12/2020 15:00	Type of Location: Under Lanyang Egmont
Location: TAMPINES AVENUE 7			
Weather: Raining	Road Surface: Wet	Road Speed Limit:	
Traffic Flow: One Way	Traffic Control: Traffic Light - Working	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Rear	Anyone conveyed by ambulance: No		

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLZ155A	Car	HYUNDAI	HD AVANTE	Red	Slightly Damaged	0
SMD3033K	Car	MERCEDES BENZ	GLC250 4MATIC AMG LINE AUTO		Slightly Damaged	1

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
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Police Station Of Origin:
Bukit Merah West N.P.C
500 Bukit Merah View #01-01 SINGAPORE
159552
Tel No: 1800-3779999



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Report No: T202012172100

CONTINUATION OF REPORT

Details of Vehicle Insurance			
Vehicle No	Insurance Company	Insurance No	Effective Expiry Date
SLZ5155A	AXA INSURANCE SINGAPORE PTE LTD	GA535937	27/03/2020 28/03/2021
Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	ZULKARNAIN BIN MUHAMMAD	ID No	S8331198G
Related Vehicle	SLZ5155A (Car)	Contact No	97822222
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 17/12/2020, at about 1509hrs, I was travelling in my vehicle bearing registration plate number SLZ5155A under the Loyang Flyover, Lane 3. It was raining and the ground was wet. The traffic light started to turn amber. There is a car in front of me, bearing registration plate number SMD3033K, did an emergency brake. I was one car length away but I still cannot brake in time due to the wet ground. I also skidded slightly while I did a brake. I collided onto the rear of the car in front of me. We did not want to obstruct the traffic so we moved to a carpark nearby. Afterwards, we did a check on each other's damage. On my car, my front grill and bumper was dented. On the other vehicle, his bumper is dented and the car plate is broken.
I wish to state that we will be having our private settlement. I also wish to state that there are no injuries on either parties.



Police Station Of Origin:
Bukit Merah West N.P.C
500 Bukit Merah View #01-01 SINGAPORE
150052
Tel No: 1500-3779999



Report No. T202012172100
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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 /
Sgt 3 DANIEL HO WEI CONG

Signature Of Interpreter:
Not applicable

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

Authentication Stamp
KP18

Signature Of Informant:

Date/Time:
17/12/2020 18:13

Classification Of Case: