

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 06/01/2021 13:47 (SGT)
Date of Accident 02/01/2021 08:55 (SGT)
Exact Location of Accident Farrer Rd, Singapore
Additional Location Information FARRER RD
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SHC8812K

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner COMFORT TRANSPORTATION PTE LTD
Company Reg No 199303821R
Email Address FLEETSAFETY@CDGETAXI.COM.SG
Mobile Phone No (Phone) +65-65508768
Alternative Phone No (Office) +65-65508768

VEHICLE PARTICULARS

Manufacturer Hyundai
Model I40
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 Taxi

INSURANCE COMPANY

Name of Insurance Company Axa
Type of Coverage ThirdPartyFireTheft
Fleet Policy Yes
Policy Number VFX/P2419138
Cover Note Number -

DRIVER

Name of Driver HASHIM BIN ABDUL RAHMAN
NRIC No S1375642B
Date Of Birth 12/03/1959
Occupation Outdoor

Date Of Driving Pass	29/08/1988
Driving experience	32 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97555394
Alt. Phone Number	-
Email Address	HASHIMRAHMAN@MSN.COM
Address	BLK 681B WOODLANDS DRIVE 62
Address complement	#11-19
Postcode	732681
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Other
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	Woodlands East Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18007679999
Police Station Address	3 Woodlands Drive 63 Singapore 737890
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER POLICE REPORT NO: T/20210102/2031

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKQ7666M
Vehicle Manufacturer	Hyundai
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-

Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	MODERATE
Details of property damaged in accident	RH FRONT
No. Of Passenger (Including Driver)	1

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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.
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)
 - (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, investigation, 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.

COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199303821R

[Handwritten Signature]

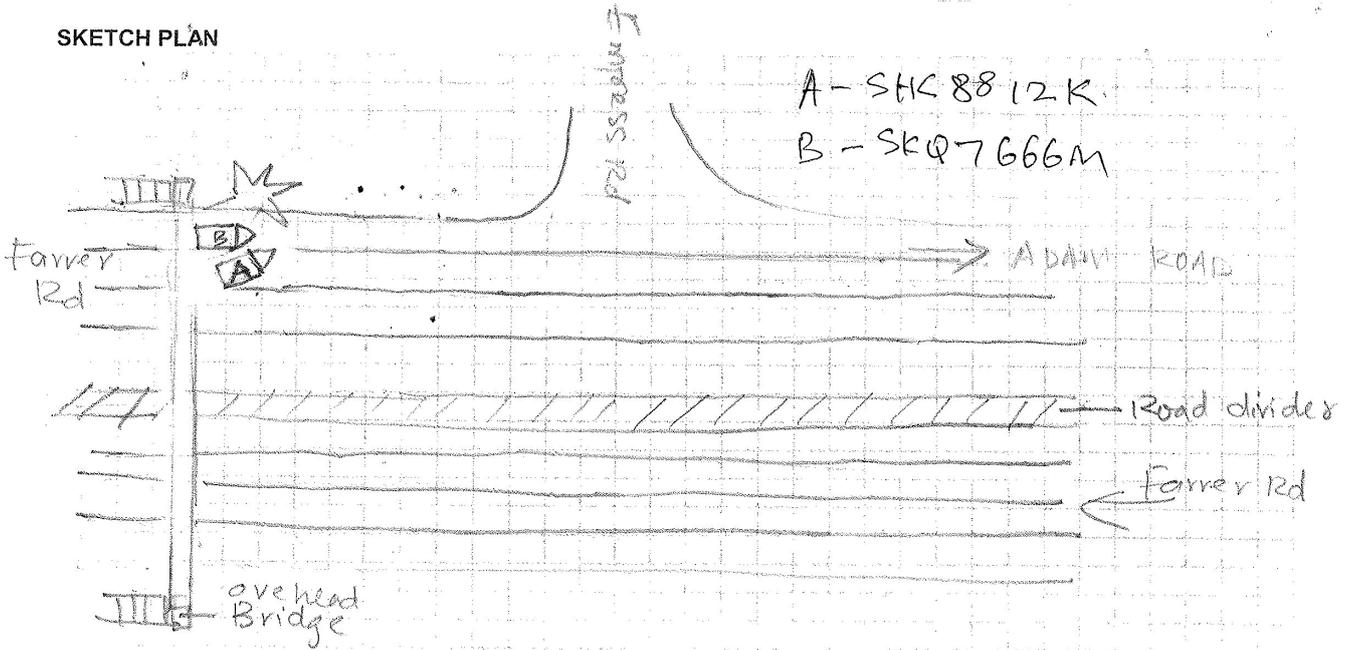
Policyholder's Signature
Date & Time:

Driver's Signature
(if driver is not the policyholder)
Date & Time: 04.01.2021

Reporting Centre Personnel's Signature
Name: Larry Ng
NRIC/Fin No.:

0905m

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I WAS DRIVING ALONG FARRER RD TOWARDS ADAM ROAD ON 3 RD LANE AND WAS SWITCHING TO 2ND LANE AND LATER TO 1ST LANE WHEN SUDDENLY I HEARD A BANG ON MY FRONT LEFT TYRE.
ANOTHER VEHICLE HAD COLLIDED INTO MY FRONT LEFT TYRE. THE TYRE WAS PUNTMED AND THE SIDE OF THE CAR AND DOOR WERE DENTED.
* T/20210102 / 2031 *

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199303821R

Policyholder's Signature
Date & Time:

[Signature]

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

04.01.2021
0902.

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

[Signature]

Larry Ng



**SINGAPORE
POLICE FORCE**



T/20210102/2031

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Police Station Of Origin:
Woodlands East N.P.C.
3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

Report No. T/20210102/2031

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 02/01/2021 12:36		Vide Report No.:		Station Diary No.: 39	
Informant's Particulars					
Name of Informant: HASHIM BIN ABDUL RAHMAN			Address: APT BLK 681B WOODLANDS DRIVE 62 #11-19 SINGAPORE 732681		
ID Type / ID No.: NRIC NO / S1375642B			Contact No.: Home/Office: ~ Mobile: 97555394		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 61	Date of Birth: 12/03/1959	Type of Informant: Driver		
Race: Malay		Language: English		Institution / School Name:	
Occupation: Taxi driver		Driving Licence Information: Class: 3		Date of Expiry:	

General Information of the Accident

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 02/01/2021 08:55	Type of Location: Straight Road
Location: FARRER ROAD				
Weather: Heavy rain		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control:		Traffic Volume: Moderate
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
SHC8812K	Car	HYUNDAI	I40	Blue	Seriously Damaged	0
SKQ7666M	Car	HYUNDAI		Grey	Slightly Damaged	1

Details of Person Involved

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



**SINGAPORE
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T/20210102/2031

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3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

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Report No. T/20210102/2031

CONTINUATION OF REPORT

Driver			
Name	HASHIM BIN ABDUL RAHMAN		ID No. S1375642B
Related Vehicle	SHC8812K (Car)		Contact No. 97555394
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
Driver			
Name	LARRY LIM CHYE HOCK		ID No. S6933214E
Related Vehicle	SKQ7666M (Car)		Contact No. 82014424
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

Brief Details.

On 02/01/2021 at about 0855hrs, I was driving my vehicle bearing registration number SHC8812K along Farrer Road towards Adam Road. I was travelling on the lane 2 of the 4 lane road at a speed of about 50km/h. At the time, there was moderate traffic however heavy rain. I had signaled my intention to make a left turn towards the slip road of Empress road and had checked that it was clear on my left mirror.

I then proceeded to make a lane change towards the left however felt a collision onto my vehicle. Another vehicle, bearing registration number SKQ7666M that was travelling on the left most lane had its front right bumper collide into my front left tyre.

The collision happened close to the bus stop number B11101 and we had managed to exchange particulars. We had managed to move our vehicles aside and the driver of the said vehicle did not express any pain or discomfort or inform for any injuries. At the time, he also had a female passenger on board however she remained in the vehicle and did not seem injured.

I had agreed to private settle the matter with him and we both left the scene after having our vehicles towed. Subsequently, I was quoted a sum of S\$4,000/- for his repair hence I did not want to privately settle the matter and intends for him to claim via insurance. I am lodging for record purpose as there was no reported injuries at the time of the incident.



**SINGAPORE
POLICE FORCE**



T/20210102/2031

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3 Woodlands Drive 63 SINGAPORE 737890
Tel No: 1800-7679999

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Report No. T/20210102/2031

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: L / Sgt 3 TAN SWEE WEE AARON	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 02/01/2021 12:36
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI SN 130 Contact No.: 65476151	Classification Of Case:
Authentication Stamp NP168 	











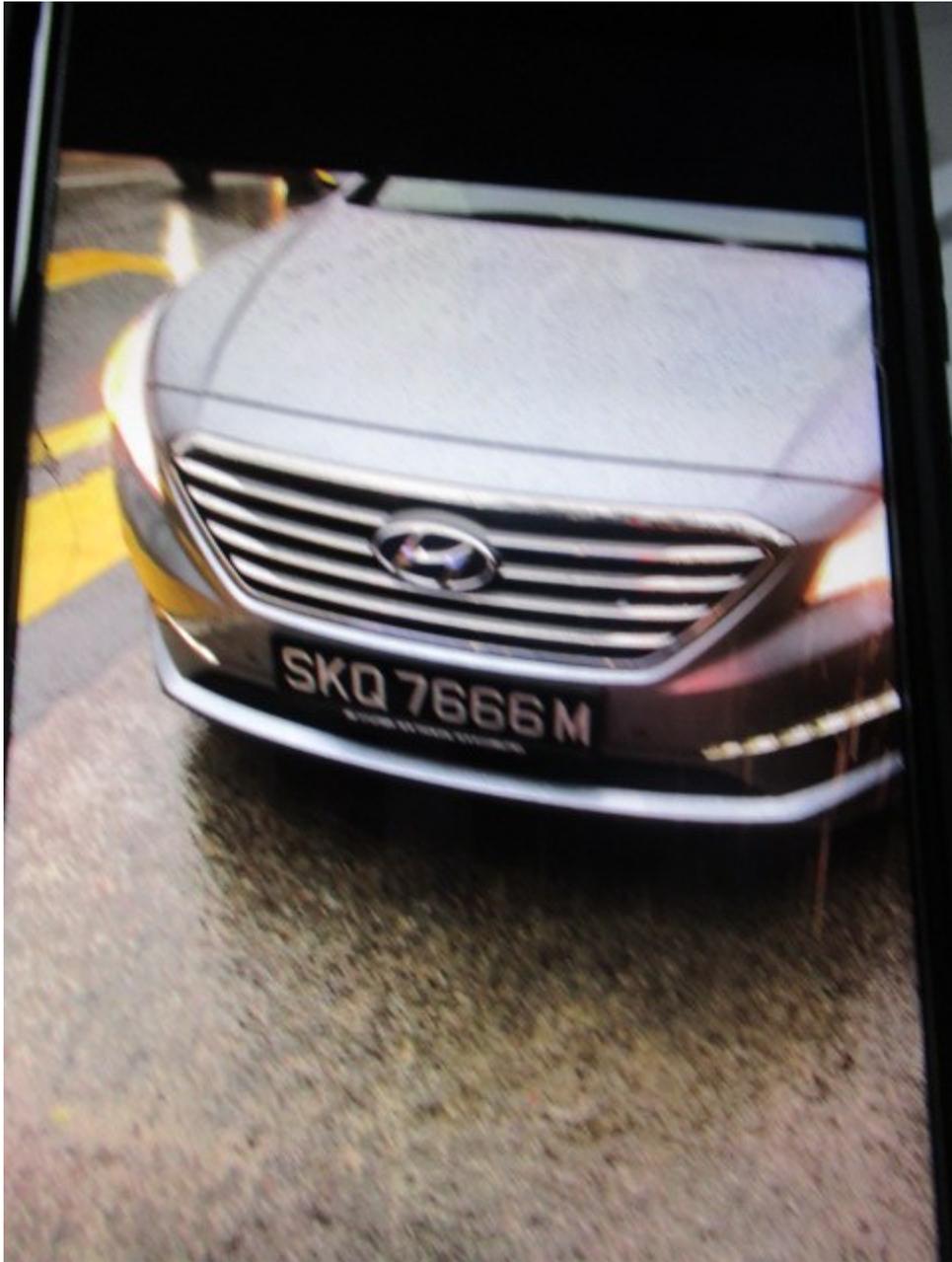






















JOB REQUISITION FOR BR

Date: 2/1/24 Time Received: 0945

SPARK Kakis

Name of Customer : Hashim

Contact No. : 97555394

Vehicle No. : S4C8812K

Make / Model / Colour : T40

ail :

tion: 71