

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 05/01/2021 17:05 (SGT)
Date of Accident 31/12/2020 15:20 (SGT)
Exact Location of Accident Near 134 Balestier Rd, Singapore
Additional Location Information Balestier Road
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number PC8523A

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner UNIVERSAL LIMO
Company Reg No 5XXXX506W
Email Address universallimosingapore@gmail.com
Mobile Phone No (Phone) +65-91500200
Alternative Phone No +65-91500200

VEHICLE PARTICULARS

Manufacturer Mercedes
Model Vito
Variant -
Exact purpose for which vehicle was being used at time of accident Employment
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Commercial vehicle

INSURANCE COMPANY

Name of Insurance Company NTUC
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 5113302574-01
Cover Note Number -

DRIVER

Name of Driver Ahmad Zamani Bin Dahlan
NRIC No SXXXX882E
Date Of Birth 12/09/1977
Occupation Outdoor

Date Of Driving Pass	15/02/2011
Driving experience	9 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91500200
Alt. Phone Number	-
Email Address	az6120zz@gmail.com
Address	Blk 123 Rivervale Drive
Address complement	#03-115
Postcode	540123
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	Collision - Change/cross lane
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	Grab passenger
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Yishun North Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18008529999
Alt. Police Station Phone No	(Fax) +65-68522299
Police Station Address	31 Yishun Central Singapore 768827
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

As per police report:- L/20210101/2023

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

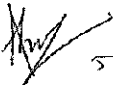
Vehicle Registration Number	SFY886H
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-


Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	4

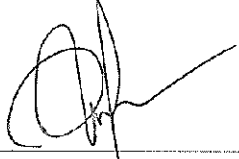
SKETCH PLAN**IMPORTANT NOTICE**

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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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

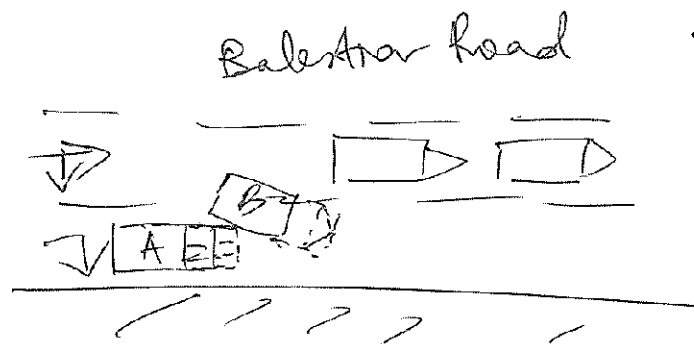
UNIVERSAL LIMO


 Policyholder's Signature / Date & Time
 5/1/2021
 1238


 Driver's Signature (If driver is not the policyholder) / Date & Time
 5/1/2021
 1238


 Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

As per Police report.

Declaration

We declare the foregoing particulars are true in every respect.

UNIVERSAL LIND

Policyholder's Signature / Date &
Time

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

Witnessed by Reporting Centre
Personnel



















**SINGAPORE
POLICE FORCE**

POLICE REPORT (NP299)

Police Station Of Origin
Yishun North N.P.C.
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999



L/20210101/2023

1 of 2

Report No. L/20210101/2023

Date/Time Report Made 01/01/2021 11:59		Vide Report No.		Station Diary No. 44	
Name Of Informant AHMAD ZAMANI BIN DAHLAN		Address APT BLK 123 RIVERVALE DRIVE #03-115 SINGAPORE 540123			
ID Type / ID No. NRIC NO / S7725882E		Contact No. Home/Office		Mobile 91500200	
Nationality SINGAPORE CITIZEN		Email Address			
Occupation GRABCAR DRIVER		Sex Male	Age 43	Date of Birth 12/09/1977	Race Malay
Institution/School Name		Language English			
Date/Time Of Incident 31/12/2020 15:20		Location Of Incident BALESTIER ROAD SINGAPORE BALESTIER ROAD TOWARDS CNTRAL EXPRESSWAY			

Brief details.

On 31/12/2020 at about 1520hrs, I was driving my bus PC8523A along Balestier Road lane 1 towards Lavender. At that juncture, the road was dry and there were not much vehicles. There was a passenger inside my bus. As I was going to turn right into CTE, there was a car SFY886H that wanted to turn right into CTE as well. However, it was driving along my left and she entered into my lane without signaling and travelled in a high speed. As such, the car side swiped against my vehicle. Due to the impact, my vehicle had some scratches on the front left bumper of my vehicle. No one was injured. I am lodging this

Signature Of Officer Recording The Report: L / Sgt 2 BENJAMIN TAN CHAO FENG	
Signature Of Interpreter: Not applicable	
Officer In-Charge Of Case: L / Woodlands Police Divisional Investigation Branch / Insp CHU SHI QI, CHLOE Contact No.: 63647559	

Signature Of Informant:
Date/Time: 01/01/2021 11:59
Classification Of Case:

Authentication Stamp





SINGAPORE
POLICE FORCE



L/20210101/2023

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. L/20210101/2023

Police Report for my insurance.

Signature Of Officer Recording The Report:

L / Sgt 2 BENJAMIN TAN CHAO FENG

Signature Of Interpreter:
Not applicableOfficer In-Charge Of Case:
L / Woodlands Police Divisional Investigation Branch /
Insp CHU SHI QI, CHLOE
Contact No.: 63647559

Authentication Stamp

Signature Of Informant:

Date/Time:
01/01/2021 11:59

Classification Of Case: