

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 07/01/2021 13:58 (SGT)
Date of Accident 06/01/2021 11:50 (SGT)
Exact Location of Accident Choa Chu Kang Rd, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLU7523J

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner TRAIN HUB FACILITIES PTE LTD
Company Reg No 2XXXXX008C
Email Address one_nizam@yahoo.com.sg
Mobile Phone No (Phone) +65-84286663
Alternative Phone No +--

VEHICLE PARTICULARS

Manufacturer Toyota
Model Wish
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 - Claiming third party
Vehicle Category Private hire

INSURANCE COMPANY

Name of Insurance Company NTUC
Type of Coverage ThirdParty
Fleet Policy No
Policy Number 5115478400
Cover Note Number -

DRIVER

Name of Driver MOHAMMAD NIZAM BIN JAFFAR
NRIC No SXXXX131I
Date Of Birth 25/02/1972
Occupation Outdoor

Date Of Driving Pass	30/09/2010
Driving experience	10 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94284679
Alt. Phone Number	-
Email Address	one_nizam@yahoo.com.sg
Address	BLK 188B BEDOK NORTH STREET 4
Address complement	#03-84
Postcode	462188
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
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	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT - T/20210106/7047.

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	GBC688B
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	SIM WEE CHUNG
NRIC No	SXXXX384B

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

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	YN4422U
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	MUHAMMAD SYAKIR FIRDHAUS BIN ASNI
NRIC No	SXXXXX930A
Contact Number	(Phone) +65-96727474
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	MOHAMMAD NIZAM BIN JAFFAR
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	NECK & BACK
Injured person in which vehicle?	SLU7523J
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

Refer to police report

We declare the foregoing particulars are true in every respect.



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

Witnessed by Reporting Centre
Personnel



















**SINGAPORE
POLICE FORCE**



T/20210106/7047

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20210106/7047

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 06/01/2021 13:46		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: MOHAMMAD NIZAM BIN JAFFAR			Address: 188B BEDOK NORTH STREET 4 #03-84 SINGAPORE 462188		
ID Type / ID No.: NRIC NO / S72051311			Contact No.: Home/Office: Mobile: 88266710		
Nationality: SINGAPORE CITIZEN			Email: ONE_NIZAM@YAHOO.COM.SG		
Sex: Male	Age: 48	Date of Birth: 25/02/1972	Type of Informant: Driver		
Race: Malay			Language: English		Institution / School Name:
Occupation: PHV Driver			Driving Licence Information: Class:		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 06/01/2021 11:50	Type of Location: Straight Road
Location: CHOA CHU KANG ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
GBC688B	Lorry				Slightly Damaged	0
SLU7523J	Car				Slightly Damaged	0



**SINGAPORE
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T/20210106/7047

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20210106/7047

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of
YN4422U	Lorry				Slightly Damaged	0

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	MOHAMMAD NIZAM BIN JAFFAR		ID No. S7205131I
Related Vehicle	SLU7523J (Car)		Contact No. 88266710
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Class: NIL Date of Expiry: NIL
Date	06/01/2021		Date 06/01/2021
No. of Days granted Medical Leave		03	Degree of Slight

Brief Details.

I was traveling along Chua Chu Kang road towards Upper Bukit Timah Road after Jalan Teck Whye Avenue. The traffic light is red and the vehicle in front and myself all stop stationary, suddenly I feel an big impact from the rear, I come down from my car and found a lorry (GBC688B) collided onto my vehicle. I'm involve in a 3 car chain collision accident, the last vehicle was a lorry (YN4422U) which pushed the lorry (GBC688B) towards my Vehicle which is on the front.

I feel pain at my neck and body area, i consult a doctor at Royal Care Medical Family Clinic and was given 3 days MC.



**SINGAPORE
POLICE FORCE**



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Police Station Of Origin:
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10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20210106/7047

CONTINUATION OF REPORTSketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
BOON YEN KIAN
Contact No.: 65476172

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
06/01/2021 13:46

Classification Of Case:

