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 witholding 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.

- 4. The issue and acceptance of this is form by instrained 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 15/01/2021 13:02 (SGT) Date of Accident 14/01/2021 07:40 (SGT) Exact Location of Accident Jurong Town Hall, Singapore Additional Location Information Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJH3045R

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner **FAZLY BIN MOHAMED** NRIC No. SXXXX134B Email Address fazlymohd80@gmail.com Mobile Phone No (Phone) +65-98260400 Alternative Phone No +65-98260400

VEHICLE PARTICULARS

Manufacturer Toyota Model Axio 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 - Reporting only Vehicle Category Private hire

INSURANCE COMPANY

Name of Insurance Company NTUC Type of Coverage Comprehensive Fleet Policy Policy Number 5114299138 Cover Note Number

DRIVER

Name of Driver **FAZLY BIN MOHAMED** NRIC No SXXXX134B Date Of Birth 01/11/1980 Occupation Outdoor

Date Of Driving Pass 14/12/2006 Driving experience 14 YEARS AND 1 MONTH Gender Mobile Number (Phone) +65-98260400 Alt. Phone Number +65-98260400 Email Address fazlymohd80@gmail.com Address BLK 781 YISHUN RING ROAD #10-3548 Address complement Postcode 760781 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 Clear Road Surface Dry OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident 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) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? No PASSENGER 1 Name WIFF Gender Female **DETAILS OF POLICE ACTION** Was the accident reported to the police? Yes Police Station Name Telok Blangah Neighbourhood Police Post Police Station Phone No (Phone) +65-18002729999 Alt. Police Station Phone No (Fax) +65-63776526 Police Station Address Blk 51 Telok Blangah Drive #01-116/ 118 Singapore 100051 Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO POLICE REPORT T/20210114/2041 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 NumberSLL4054MVehicle ManufacturerToyotaVehicle ModelSientaVehicle Variant-

Vehicle Colour	-
Vehicle Category	Private hire
Name of Driver	JOHNSON
Contact Number	(Phone) +65-94269846
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report <u>correctly</u> the details of the accident to speed up the claims process.
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 8. Consent under the Personal Data Protection Act (PDPA)

report being mass avaisation arressant.

8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, acknowledge, agree and consent that:

(a) My Insurer, we wished have the General Insurance Association of Singapore ("GIA") may/aire 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 shall be collectively referred to as the "Insurers"), the hisurer is wyersflaw firms, the Nohearly Authority of Singapore and any relevant government agencylauthority (such as the police), for the purpose(s) of:

(i) processing, handing and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;

(iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;

(iv) definitioning my claims (including the maling 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 process my Personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or process my Personal Information may/can be disclosed by any of the haurers' law yers/law firms, may/are permitted to collect, use, disclose and process my Personal Information may/can be disclosed by any of the haurers and/or GAI 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.

Polgoholder's Signature / Date & Driver's Signature (if driver is not the policyholder) / Date | Wilfriessed by Reporting Centre | Sketch Plan | Jupon | June | Jun M JUROLLY TONIN HALL ROAD

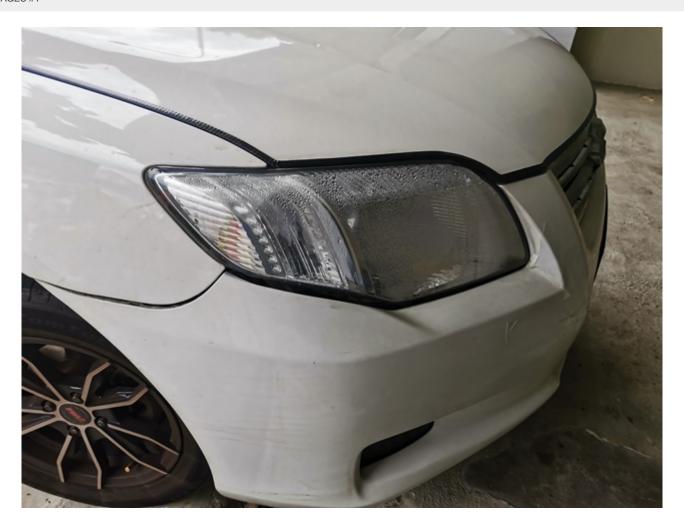
(av C suddon move off not enough time (AB) saw care, immediately jammed brake to break when - ABO aldy given light (av B sudden) to turn right A) SJH 3045R.

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lare the foregoing particulars	are true in every respect.		
1			/ / /
14/1/2×			16/01/2021
ler's Signature / Date &			19/14/2021
	Driver's Signature (# drive	r is not the policyholder) / Date	Witnessed by Reporting Centre









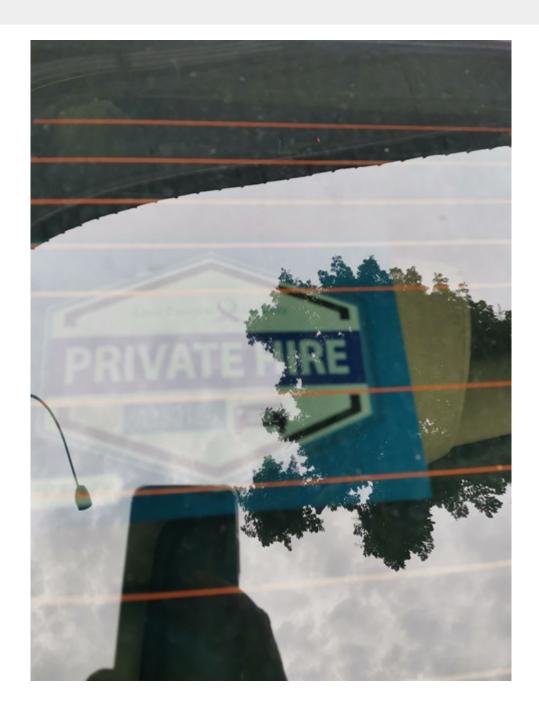










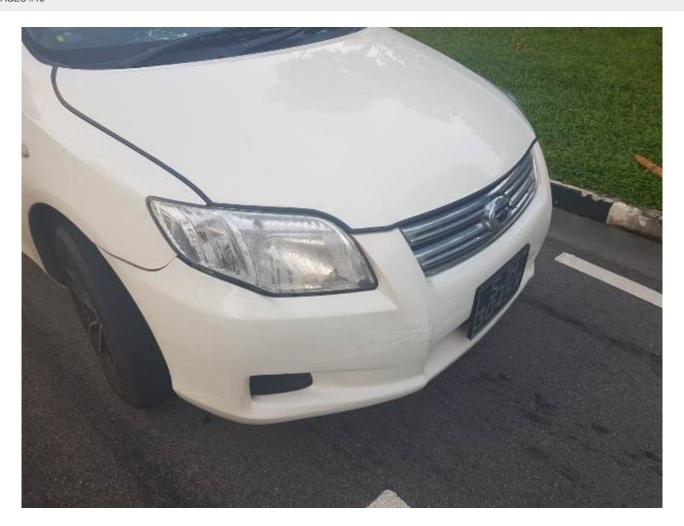








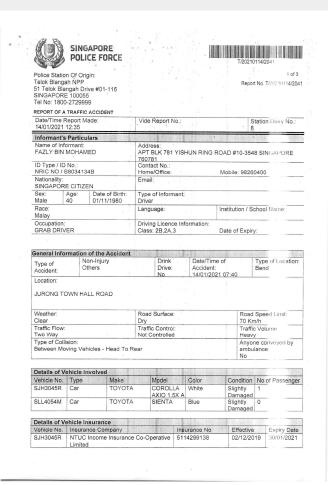
















Police Station Of Origin: Telok Blangah NPP 51 Telok Blangah Drive #01-116 SINGAPORE 100055 Tel No: 1800-2729999

Report No. T/20210114/2041

CONTINUATION OF REPORT

Any Pedestrian I	erreliands Mil		CONTRACTOR OF SERVICE	130-17-000		
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA			
Driver	The latest the second of the s	A STANKE	Dec 102-114		0.000	Milg. 1471
Name	FAZLY BIN MOHAMED		ID No		S8034134B	
Related Vehicle	SJH3045R (Car)		Conta	ct No.	98260400	
Hospital/Clinic	NIL		Class Drivin Licen Expin	g ce &	Class: 2B,2A,3 Date of Expiry: NIL	
Date Treatment	NIL		Date Disch		NIL	
	ed Medical Leave NII		Degree of		NIL	

Brief Details.

On 14o/17021 at 0740hrs, I was traveling along Jurong Town Hall Road at the junction of Jurong East St 12. The green arrow lights had turned green and the car infront of ms ELL4054M (Toyota Sienta. 94269946) went shead. As we both proceeded to Jurong East St 12, there was a red vehicle that had beet a red light. The car infront of me then had jammed his brakes in attempt to avoid the red vehicle, I had braked as well but had collided with the vehicle infront of me. There was no one injured, no police were at scene and I am lodging this report for insurance claims.



SINGAPORE POLICE FORCE

Police Station Of Origin: Telok Blangah NPP 51 Telok Blangah NPP 51 Telok Blangah Orive #01-116 SINGAPORE 100055
Tel No: 1800-2729999 CONTINUATION OF REPORT



3 of 3 Report No. T/20210114/2041

Sketch Plan Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:	Signature Of Informant:
Sgt 1 THADDAEUS KOAY TIAN WEI	fr.
Signature Of Interpreter:	Date/Time:
Not applicable	14/01/2021 12:35
Officer In Charge Of Case:	Classification Of Case:
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No: 65476151	Classification Of Case:

