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

- Please report <u>correctly</u> the details of the accident to speed up the claims process.
- 2. This Formmust be completed by the Policyholder and/or the Authorised Driver.
- 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.
- 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.
- The 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.
- 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)

l 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.

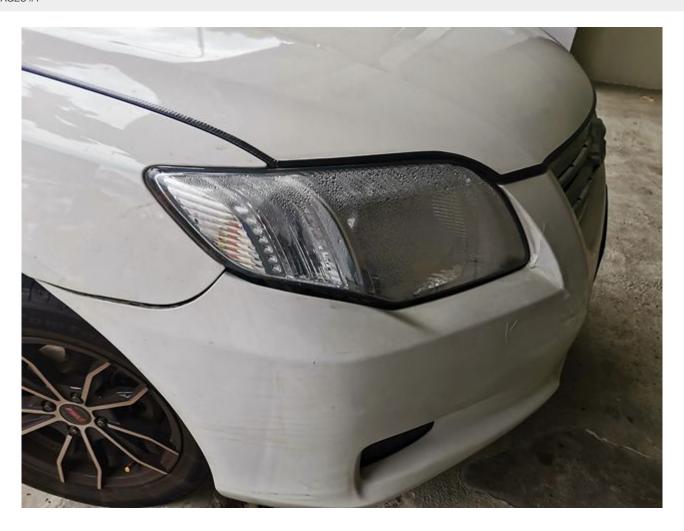
| Policyholder's Sign Time 4.17 pw Sketch Plan | 1 & Time | older) / Date Witnessed by Reporting Centre |
|--|---|---|
| | Car C suddon move off | |
| | rot enough time (1) - saw car C, ir to break when - 1 00 aldy given light car B sudden jam break | nmediately jammed brake A) SJH 3045R. B) Stl 4054m, |

| | REGUR | 70 | Po) 1CH | RHPORT | - 1/20210 | 1111/2011 | |
|------|----------------|----------|-----------------|-------------------|-----------------------|-----------|-------------------------------|
| | POLITY | 10 | Parior | MACI | _ 1/202/0 | 19/104/ | \wedge |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | 1 |
| | | | | | | 24 | |
| | | | | | | | |
| | | | | | | | |
| _ | | | | | | | |
| | | | | | <u> </u> | | |
| | | | | | | | |
| | | | | | | | |
| _ | | | | | | | |
| _ | | | | | | | |
| _ | | | | | | | |
| | | | | | | | |
| _ | | | | | | | |
| | | | | | | / | |
| | | | | | | | |
| | | | | | | | 80 |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| _ | | | | / | 11 | | |
| | | | | /_ | | | |
| | | | | _/ | | | |
| | | | | _ | | | |
| | | | | _ | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| lar | ation | | | | | | |
| don | lare the force | oina nar | ticulare are t | rue in every resp | ant . | | |
| udu | nare are roreg | and hai | uouidi a di e t | ac in every rest | | | 1 |
| | | | | | | | |
| | 1 | , | | | | | / // |
| 4 | 0 14 | dilo | พฟ | | | | W 15/01/202/ |
| dia. | Ider's Signatu | | | | driver is not the pol | | Witnessed by Reporting Centre |









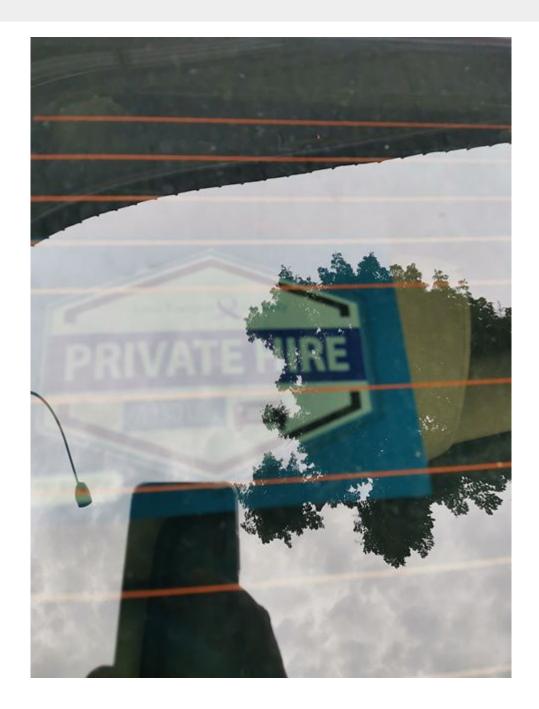










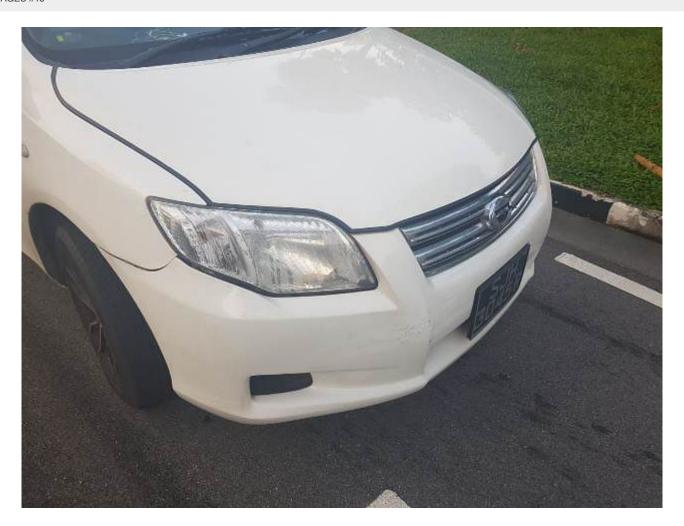




















Police Station Of Origin: Telok Blangah NPP 51 Telok Blangah Drive #01-116 SINGAPORE 100055 Tel No: 1800-2729999



1 of 3 Report No. T/20210114/2041

REPORT OF A TRAFFIC ACCIDENT

| 14/01/2021 12:35 | | | Vide Report No.: | Station Diary No.: | | |
|---|-----------------------------------|-------|---|----------------------------|--|--|
| Informa | nt's Partic | ulars | THE RESERVE | | | |
| Name of Informant: FAZLY BIN MOHAMED | | | Address: APT BLK 781 YISHUN RING ROAD #10-3548 SINGAPORE 760781 | | | |
| ID Type / ID No.: NRIC NO / S8034134B | | | Contact No.: Home/Office: Mobile: 98260400 | | | |
| | Nationality: SINGAPORE CITIZEN | | Email: | | | |
| Sex: Age: Date of Birth: Male 40 01/11/1980 | | | Type of Informant: Driver | | | |
| Race: Malay | | | Language: | Institution / School Name: | | |
| Occupation: GRAB DRIVER | | | Driving Licence Information Class: 2B,2A,3 | n: Date of Expiry: | | |

| Type of Accident: | Non-Injury Others | Drink Drive: No | Date/Time of Accident: 14/01/2021 07:40 | Type of Location Bend | |
|--------------------------------|----------------------|------------------------------------|---|--------------------------|--|
| Location: JURONG TO Weather: | WN HALL ROAD | Road Surface: | Ro | oad Speed Limit: | |
| | | Drv | 70 | 70 Km/h | |
| Clear | | Diy | 1.7 | IXIIIIII | |
| | - 10 | Traffic Control: Not Controlled | Tr | affic Volume | |

| Details of V | ehicle Invo | lved | HEIGHTEN ME | 120 | Sign States | 1986 |
|--------------|-------------|--------|------------------------|-------|---------------------|-----------------|
| Vehicle No. | Туре | Make | Model | Color | Condition | No of Passenger |
| SJH3045R | Car | ТОУОТА | COROLLA AXIO 1.5X A | White | Slightly Damaged | 1 |
| SLL4054M | Car | TOYOTA | SIENTA | Blue | Slightly Damaged | 0 |

| Details of V | ehicle Insurance | A Section Section | | 1500 |
|--------------|---|-------------------|------------|-------------|
| Vehicle No. | Insurance Company | Insurance No | Effective | Expiry Date |
| SJH3045R | NTUC Income Insurance Co-Operative Limited | 5114299138 | 02/12/2019 | 30/01/2021 |



T/20210114/2041

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

2 of 3 Report No. T/20210114/2041

CONTINUATION OF REPORT

| Any Pedestrian I | pyolyod: No | | | | English Co | 自一定党里社会 网络科 |
|------------------|-------------------|-------------|-----------------|-----------------------------------|------------|---------------------------------------|
| No. of Pedestria | | | Use of Pe | destria | n Cross | sing: NA |
| Driver | | 450 nat 581 | 成 種是 [] | 1 - 43 | 6,000,000 | |
| Name | FAZLY BIN MOHAN | MED | | ID No |). | S8034134B |
| Related Vehicle | SJH3045R (Car) | | | Conta | act No. | 98260400 |
| Hospital/Clinic | NIL | | | Class Drivin Licen Expin | g | Class: 2B,2A,3 Date of Expiry: NIL |
| Date Treatment | NIL | | Date Disc | | NIL | |
| No. of Days gran | ted Medical Leave | NIL | Degree of | | NIL | |

Brief Details.

On 14/01/2021 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 me SLL4054M (Toyota Sienta, 94269846) went ahead. As we both proceeded to Jurong East St 12, there was a red vehicle that had beat 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.





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

3 of 3 Report No. T/2/02 10114/2041

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 <u>report number</u> as reference.

| Signature Of Informant: |
|--------------------------------|
| Date/Time: 14/01/2021 12:35 |
| Classification Of Case: |
| |





GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT

6 Raffles Quay #18-00 Singapore 048580 Tel (65) 6224 0010 Fax (65) 6224 0030 Operating Hours : Monday to Friday, 09:00 – 17:00 UEN: \$66550020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

| | ADDENDUM |
|----------------------------------|---|
| A) PARTICULARS | |
| Name(as shown) (*Vehicle Driv | /Vehicle Owner) (*) Please delete as appropriate Singapore() |
| Address | Mobile No.: 92760400 |
| Contact (Tel) Email Addres | 074 |
| Date of Accid | JULIAN GOUNT HOME KOUD |
| u made | INFORMATION / AMENDMENTS: a report on the above mentioned accident and would like to include additional information of lowing amendments: |
| Police | RAPORT MUMBER TO 1/202/01/4/2041 80 SCHOOL |
| | |
| | |
| | |
| | |
| | |
| | |
| | m 01/02/80 |
| 14 14 | Reporting Centre Personnel's Signature |
| Policyl Date: | lder / Driver's Signature Name: |