

# 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 .....	08/02/2021 14:01 (SGT)
Date of Accident .....	06/02/2021 17:30 (SGT)
Exact Location of Accident .....	PIE, Singapore
Additional Location Information .....	TOWARDS TUAS
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SKR6627C
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### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	SUHAIMI BIN MOKTAR
NRIC No .....	SXXXX393D
Email Address .....	moktarhaimi@gmail.com
Mobile Phone No .....	(Phone) +65-96411607
Alternative Phone No .....	+65-96411607

### VEHICLE PARTICULARS

Manufacturer .....	Mazda
Model .....	Biante
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 .....	Comprehensive
Fleet Policy .....	No
Policy Number .....	5115551011
Cover Note Number .....	-

### DRIVER

Name of Driver .....	SUHAIMI BIN MOKTAR
NRIC No .....	SXXXX393D
Date Of Birth .....	06/09/1996
Occupation .....	Outdoor

Date Of Driving Pass .....	05/06/2000
Driving experience .....	20 YEARS AND 8 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-96411607
Alt. Phone Number .....	+65-96411607
Email Address .....	moktarhaimi@gmail.com
Address .....	BLK 173A PUNGGOL FIELD #01-597
Address complement .....	-
Postcode .....	821173
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 .....	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 .....	5
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) .....	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### PASSENGER 1

Name .....	TAN TIAN BOON
Gender .....	Male

#### PASSENGER 2

Name .....	TAN AH JIN
Gender .....	Female

#### 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

PLEASE REFER TO SKETCH AND POLICE REPORT T/20210206/7026

#### 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 .....	SLV8909T
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) .....	-

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number .....	SKE9457A
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) .....	-

#### DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number .....	SMF8086P
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) .....	-

#### DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number .....	SMX57G
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) ..... -

## INJURED PERSONS DETAILS

### INJURED 1

Name of injured person ..... SUHAIMI BIN MOKTAR  
 Address ..... -  
 Address Complement ..... -  
 Post Code ..... -  
 Approximate Age Years Old ..... -  
 Injuries Sustained ..... SLIGHT INJURY  
 Injured person in which vehicle? ..... SKR6627C  
 Were seat belts worn? ..... Yes  
 Was this injured conveyed to hospital by ambulance? ..... No

### INJURED 2

Name of injured person ..... TAN TIAN BOON  
 Address ..... -  
 Address Complement ..... -  
 Post Code ..... -  
 Approximate Age Years Old ..... -  
 Injuries Sustained ..... SLIGHT INJURY  
 Injured person in which vehicle? ..... SKR6627C  
 Were seat belts worn? ..... Yes  
 Was this injured conveyed to hospital by ambulance? ..... No

### INJURED 3

Name of injured person ..... TAN AH JIN  
 Address ..... -  
 Address Complement ..... -  
 Post Code ..... -  
 Approximate Age Years Old ..... -  
 Injuries Sustained ..... SLIGHT INJURY  
 Injured person in which vehicle? ..... SKR6627C  
 Were seat belts worn? ..... Yes  
 Was this injured conveyed to hospital by ambulance? ..... No

**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' lawyers/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' 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.

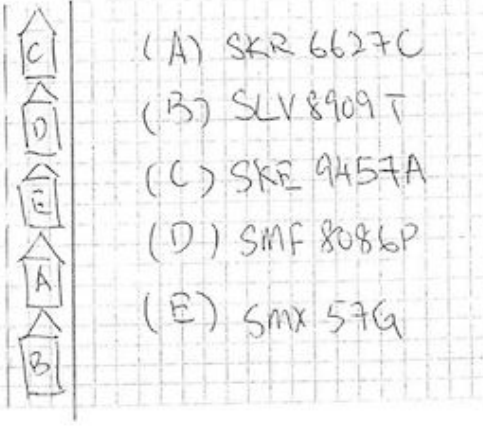


Policyholder's Signature / Date &amp; Time



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

 28/01/2021  
 Witnessed by Reporting Centre Personnel
**Sketch Plan**

PIE TOWARDS TUBAS AFTER PAYA LEBAR EXIT	
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As per police report T/20210204/7026

We declare the foregoing particulars are true in every respect.

Witnessed by Reporting Centre  
Personnel













































**SINGAPORE  
POLICE FORCE**



T/20210206/7026

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

1 of 3

Report No. T/20210206/7026

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 06/02/2021 21:07		Vide Report No.: G/20210206/0193		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: SUHAIMI BIN MOKTAR			Address: 173A PUNGGOL FIELD #01-597 SINGAPORE 821173		
ID Type / ID No.: NRIC NO / S1746393D			Contact No.: Home/Office: Mobile: 96411607		
Nationality: SINGAPORE CITIZEN			Email: moktarhaimi@gmail.com		
Sex: Male	Age: 54	Date of Birth: 06/09/1966	Type of Informant: Driver		
Race: Malay			Language: English		Institution / School Name:
Occupation: private hirer			Driving Licence Information: Class:		Date of Expiry:

<b>General Information of the Accident</b>				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 06/02/2021 17:30	Type of Location: Straight Road
Location:  PAN ISLAND EXPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SKE9457A	Car C					0
SKR6627C	Car A	MAZDA	BIANTE 5-DOOR WAGON 2.0L	Silver	Seriously Damaged	2
SLV8909T	Car B					0



**SINGAPORE  
POLICE FORCE**



T/20210206/7026

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

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Report No. T/20210206/7026

## CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SMF8086P	Car D					0
SMX57G	Car E					0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKR6627C	NTUC Income Insurance Co-Operative Limited	5115551011	16/01/2020	26/02/2021

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	SUHAIMI BIN MOKTAR	ID No.	S1746393D
Related Vehicle	SKR6627C (Car)	Contact No.	96411607
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	Slight

## Brief Details.

I was travelling along PIE towards TUAS on lane 1 of 3 lanes. Weather was clear, traffic was moderate. the vehicle in front of me slowed down and and stopped. Noticing that, i also slowed down can came to a halt. After a few seconds, I felt an great impact from the rear. The impact was so huge that it pushed me forward and collided onto the vehicle in front. I alighted and realized it was a chain collision involving 5 vehicles. I was the forth vehicle from the front.

1st SKE9457A  
2nd SMF8086P  
3rd SMX57G  
4th SKR6627C  
5th SLV8909T



**SINGAPORE  
POLICE FORCE**

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



T/20210206/7026

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Report No. T/20210206/7026

**CONTINUATION OF REPORT**

Sketch 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 / TPHQ /  
NUR ADELINA BINTE MOHAMMAD FUAT  
Contact No.: 65476066

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:  
06/02/2021 21:07

Classification Of Case:



