

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 16/02/2021 16:46 (SGT)
Date of Accident 10/02/2021 08:00 (SGT)
Exact Location of Accident Gul Rd, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJY4036X

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner SHL MOTOR PTE. LTD.
Company Reg No 2XXXXX814M
Email Address sinhocklee@yahoo.com.sg
Mobile Phone No (Phone) +65-62826184
Alternative Phone No (Office) +65-62826184

VEHICLE PARTICULARS

Manufacturer Toyota
Model Vios
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 Yes
Policy Number 5109792828-01
Cover Note Number -

DRIVER

Name of Driver MOHAMED QASSIM BIN ABDULLAH
NRIC No SXXXX200F
Date Of Birth 25/09/1954
Occupation Outdoor

Date Of Driving Pass	04/05/1996
Driving experience	24 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91404757
Alt. Phone Number	-
Email Address	mohamedqassim259@gmail.com
Address	BLK 690 JURONG WEST CENTRAL 1
Address complement	#08-195
Postcode	640690
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	Side Swipe
Weather Conditions	Clear
Road Surface	Dry

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	UNKNOWN
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Jurong West Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002689999
Alt. Police Station Phone No	(Fax) +65-62672438
Police Station Address	700 Corporation Road Singapore 649818
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE POLICE REPORT:T/20210210/2020

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	FBE3101Y
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Motorcycle
Name of Driver	SU
Contact Number	(Phone) +65-93655546
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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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.

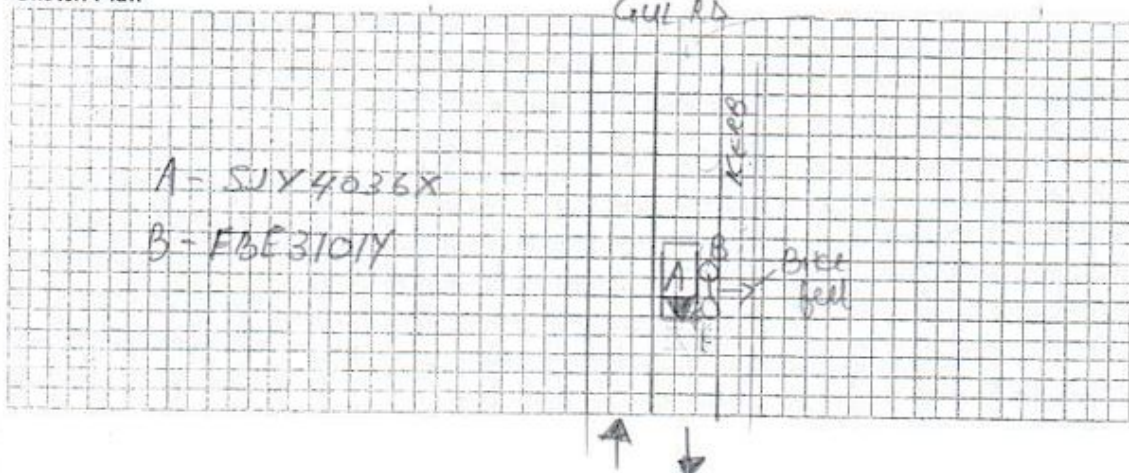


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

P/s refer to the police report: T/20210210/2020

Declaration

I/We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel



**SINGAPORE
POLICE FORCE**



T/20210210/2020

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

2 of 4

Report No. T/20210210/2020

CONTINUATION OF REPORT

Name	SU	ID No.	NIL
Related Vehicle	FBE3101Y (Motorcycle)	Contact No.	93655546
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight
Driver			
Name	MOHAMED QASSIM BIN ABDULLAH	ID No.	S0223200F
Related Vehicle	SJY4036X (Car)	Contact No.	91404757
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 10/02/2021, at around 0800hrs, I was driving my saloon car, V1) SJY4036X along Gul Rd, as I was fetching my Gojek passenger from B/191 Boon Lay Ave. I was planning to turn right into Panasonic Refrigeration, 6 Gul Rd to alight my passenger. Gul Rd is a 2-way road. The traffic was moderate.

Then, I saw a motorbike, V2) FBE3101Y riding behind me, along Gul Rd. The motorbike was wobbling and riding at a high speed. I was driving slowly, maximally at 40km/h, and was deciding whether should I move slightly to my right to give way to the motorbike, which is on my left. However, there is non-stop oncoming traffic, thus I was unable to get into the lane which is driving in opposite direction, or else I will collide with the oncoming traffic.

The motorbike then tried to squeeze through the gap between my car and the left side kerb. Then, it collided onto the part right beside my left headlight. I wish to state that I did not sway my vehicle nor change lane at all. The said part sustained some minor scratches. One of foot pedals of the motorbike was broken. I was not injured and did not have any MC. My passenger was not injured as well. The motorcyclist has sustained some bruises on her knee. The motorcyclist fell down after a collision. After exchanging contact numbers with her, she quickly got back up and ride away, thus I did not manage to get her particulars. I wish to state that I suspect she could possibly talking on her phone as I observed her to be talking to herself, which is possibly talking on her phone using earpiece.

No pedestrian, cyclist, PMD rider nor foreign vehicle was involved. No government property was damaged. No Traffic Police nor Ambulance has attended to scene. My in-car camera facing forward was working during the time of collision.

















**SINGAPORE
POLICE FORCE**



T/20210210/2020

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

1 of 4

Report No. T/20210210/2020

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/02/2021 09:52	Vide Report No.:	Station Diary No.: 37
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Informant's Particulars

Name of Informant: MOHAMED QASSIM BIN ABDULLAH			Address: APT BLK 690 JURONG WEST CENTRAL 1 #08-195 SINGAPORE 640690		
ID Type / ID No.: NRIC NO / S0223200F			Contact No.: Home/Office: Mobile: 91404757		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 66	Date of Birth: 25/09/1954	Type of Informant: Driver		
Race: Indian			Language:		Institution / School Name:
Occupation: PRIVATE HIRED VEHICLE DRIVER			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 10/02/2021 08:00	Type of Location: T-Junction
Location: GUL ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBE3101Y	Motorcycle				Slightly Damaged	0
SJY4036X	Car				Slightly Damaged	1

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20210210/2020

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

2 of 4

Report No. T/20210210/2020

CONTINUATION OF REPORT

Name	SU	ID No.	NIL
Related Vehicle	FBE3101Y (Motorcycle)	Contact No.	93655546
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight
Driver			
Name	MOHAMED QASSIM BIN ABDULLAH	ID No.	S0223200F
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T/20210210/2020

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3 of 4

Report No. T/20210210/2020

CONTINUATION OF REPORT



**SINGAPORE
POLICE FORCE**



T/20210210/2020

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

4 of 4

Report No. T/20210210/2020

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 report number as reference.

Signature Of Officer Recording The Report: J/ SC2 CHENG DEREN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 10/02/2021 09:52
Officer In Charge Of Case: TP / AEIT / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:
Authentication Stamp NP168	SN 126
Signature:	
Singapore Police Force	

