

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	09/03/2021 12:31 (SGT)
Date of Accident	08/03/2021 16:20 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJR7843A
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	OTHMAN BIN OMAR
NRIC No	SXXXX859D
Email Address	erwan_ehsan@hotmail.com
Mobile Phone No	(Phone) +65-98765834
Alternative Phone No	(Office) +65-67568151

VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Lancer
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car

INSURANCE COMPANY

Name of Insurance Company	NTUC
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5101287099-02
Cover Note Number	-

DRIVER

Name of Driver	ERWAN BIN OMAR
NRIC No	SXXXX007I

Date Of Driving Pass	04/02/2014
Driving experience	7 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-96895079
Alt. Phone Number	-
Email Address	erwan_ehsan@hotmail.com
Address	BLK 821 YISHUN STREET 81 #02-636
Address complement	-
Postcode	760821
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Other
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	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)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	LYDIANAH BTE OTHMAN
Gender	Female

PASSENGER 2

Name	MISNAH
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO SKETCH PLAN

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	SJJ9764Z
Vehicle Manufacturer	Honda

Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	CHEONG LOO LING
NRIC No	SXXXX759I
Contact Number	(Phone) +65-84186656
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

Veh A: SJR 7843A

Veh B: SJJ 92642

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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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

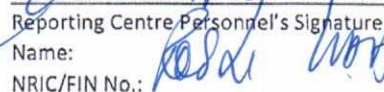
** I AM AWARE THAT MY INSURER MAY HAVE A 14 DAYS TIMEFRAME FOR ME TO SUBMIT AN OWN DAMAGE CLAIM UNDER MY OWN POLICY. I WILL CHECK MY POLICY FOR MORE DETAILS.



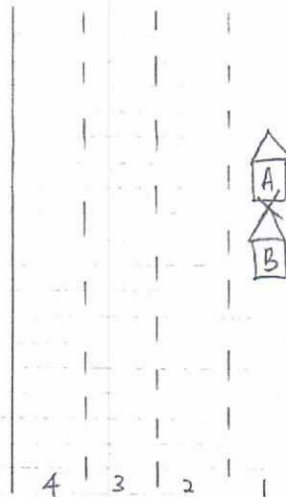
Policyholder's Signature
Date & Time:



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


Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Veh B: SJJ9764Z



PIE

While i travelling along PIE Vehicle in front of me slow down to complete stop. i followed. However Vehicle B behind me could not stop in time and collided to my vehicle.

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

Policyholder's Signature
Date & Time:

Erwin 8.3.21 1735 HRS

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

Reporting Centre Personnel's Signature: _____
Name: _____
NRIC/FIN No.: _____

Accord Auto Services Pte Ltd

Tel: 6271 7433 / 9274 0999 Fax: 6274 5715 Email: avclaims@mycarworkshop.com

Particular Of Insured/Driver & Details Of The Accident Motor Accident Report

*Date of Accident: 08.03.2021
*Accident Location: PIE Changi

*Time of Accident: 1620 HRS

Vehicle Details

*Vehicle Number: SJR 7843A

Eng Cap: 1499

1.5 MIVEC

*Make & Model: Mitsubishi Lancer Ex Gix AT

Insured / Policyholder

*Owner Name: Othman Bin Omar *NRIC: S1205859D

*Address: Blk 821 Yishun St 81 #02-636

*Email: erwan - ehsan @ hotmail.com

*HP: 98765834

*Occupation: PUB Technician (Indoor/Outdoor) *Tel (H)/Other: 67568151

Driver (same as above)

*Driver Name: Erwan Bin Ehsan *NRIC: S8126007I

*Address: Blk 821 Yishun St 81 #02-636

*Date of Birth: 06.09.1981 *Driving Pass Date: 04.02.2014 *HP: 96895079

*Email: erwan - ehsan @ hotmail.com

*Gender: Male / Female

*Occupation: Technician (Indoor/Outdoor) *Tel/H/Other: 67568151

*Driver an employee: Yes / (No) *If no, what is relationship with the policyholder: Son-in-law

Passengers Details

*P/Name: Lydianah Bte Othman (Male/Female) *P/Name: (Male/Female)

*P/Name: Misnah Bte Mawi (Male/Female) *P/Name: (Male/Female)

Insurance Company

*Insurer: NTUC *Coverage: C/TPFT/TPO *Policy No:

Detail of other vehicle / Property 1

Vehicle No.: SJJ 9764Z

Make & Model: Honda

Vehicle Category:

Name of Driver: Cheong Loo Ling

NRIC : S8029759I

HP : 84186656

No. of Passengers (Including Driver): 2

Detail of other vehicle / Property 2

Vehicle No.:

Make & Model:

Vehicle Category:

Name of Driver:

NRIC :

HP :

No. of Passengers (Including Driver):

For Official Use Only

*Claiming against Own Ins.: Yes / No (If No, Reporting Only / TP Claims)

General Information of the accident

*Type of accident: Head-Rear / Side swipe / others:

*Weather conditions: Clear / Raining / others:

*Any video cam: Yes / No

*Road Surface: Dry / Wet / others:

*Witness: Yes / (No) (Name: NRIC: HP:)

*Accident reported to police: Yes / (No) *Summon against whom:

*Injured party: Yes / (No) *No. of passengers (include driver):

-I/Name: *Fasten seat belt: Yes / No *Conveyed by Ambulance: Yes / No

-I/Name: *Fasten seat belt: Yes / No *Conveyed by Ambulance: Yes / No

Claim Handling

Accident MT/1123677

Policy No.	5101287099-02	Vehicle No.	SJR7843A	GST Registration No.	
Certificate No.				Policyholder NRIC	S12
Policyholder Name	OTHMAN BIN OMAR	Cover Type	drivo CLASSIC	Loading	0
Product Code	PRIVATE CAR INSURANCE	Contact No.(Office)		Contact No.(Home)	
Contact No.(Mobile)	98765834	Special Remark		eCode	No
Email Address		TCA	No Yes	eCode Reason	
KFK	No Yes	NCD Entitlement(%)	50	Private Hire	No
NCD Protection	Yes				
Accident Details					
Report Date	09/03/2021 12:31	Accident Report Within 24 hrs	Yes	Accident Type	Colli
Date of Accident	08/03/2021	Time of Accident hh:mm	16:20	Country of Accident	Sing
Reporting Centre		Orange Force		ICM No.	
Accident Location	PIE CHANGI				
Total Excess Applicable					
Excess Type	Per Accident	Windscreen Excess	100.00		
OD Standard Excess	600.00	TP Standard Excess	0.00		
YIED OD Excess	0.00	YIED TP Excess	0.00	Driver is Covered?	Cov
Additional Excess	0				
Total OD Excess Applicable	600.00	Total TP Excess Applicable	0.00		
Benefits					
GST Registered Information					
GST Registered	No	GST Registration Date		GST Status Verified	Yes
GST Registration No.					
Modification History					
Policyholder Mailing Address					
Address 1	BLK 821 #02-636	Address 2	YISHUN STREET 81	Address 3	SIN
Address 4		Address Type	Singapore address	Post Code	760
Unit No.	02-636	Related Policy Number	5101287099-02		
OI Driver Info					
Driver Name	Erwan Bin Ehsan	Driver Type	Named Driver	Driver DOB	06/1
Unnamed driver Name		Driver NRIC	S8126007I	Driving Experience	8
Register Date of Driver License	01/01/2013	Driver Age	39	Contact No.(Home)	
Contact No.(Mobile)	96895079	Contact No.(Office)		Address 3	
Address 1		Address 2		Post Code	
Address 4		Address Type	Foreign address		
Unit No.					
Does he own a Singapore Registered car?	No	Driver Vehicle No.	SJR7843A	Driver Insurer Company	NTL
Declaration					
Breathalyser or Blood Test Reading?	0 mg	Any injury?	No		

Modification History

Claim 001

New

Claim Type *	OD-MX	Insured Name	OTHMAN BIN OMAR	Insured NRIC	S12
Contact No.(Mobile)	98765834	Contact No.(Home)	67535583	Contact No.(Office)	626
Email Address		OI Vehicle Number	SJR7843A	TP Vehicle Number	SJJ9764Z
Claim Description	SJR7843A / SJJ9764Z ON 8 Mar 2021			Name of Preferred Workshop	
Preferred Workshop Contact No.		Insured Liability *	Not at Fault	GIA report	Rec
Require Finalisation	Yes	Preferred Repair Option	Preferred Workshop, Name unknown	Date Received	09/03/2021
Date Registered	09/03/2021 12:36	Claim Close Date			
Report Taken By	ROSLI WAHAB				
<input checked="" type="checkbox"/> Print AK letter					

Save Submit

Attachment

Accident No.
Last Doc. Received

MT/1123677
☒ Yes ☐ No

Claim No.
Upload Date

001
09/03/2021 12:37

Path *

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Message Read

Category *

Confidential

Urgency *

Clear Please Select

Clear Please Select

Clear Please Select

Clear Please Select

Clear Please Select

Clear Please Select

Clear Please Select

NO

NO

NO

NO

NO

NO

NO

Normal

Normal

Normal

Normal

Normal

Normal

Normal

Attachment List

Attachment	Uploaded By/Date	Category		Urgency	Description
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Mar 2021 12:37	Photos		Normal	Photos 2021-3-9
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Mar 2021 12:37	Photos		Normal	Photos 2021-3-9
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Mar 2021 12:37	Photos		Normal	Photos 2021-3-9
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Mar 2021 12:37	Photos		Normal	Photos 2021-3-9
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Mar 2021 12:37	Photos		Normal	Photos 2021-3-9
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Mar 2021 12:37	Photos		Normal	Photos 2021-3-9
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	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Mar 2021 12:37	Photos		Normal	Photos 2021-3-9
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Mar 2021 12:36	Photos		Normal	Photos 2021-3-9
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Mar 2021 12:36	NRIC/ Driving License	Y	Normal	NRIC/ Driving License 2021-3-9
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Mar 2021 12:36	NRIC/ Driving License	Y	Normal	NRIC/ Driving License 2021-3-9
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Mar 2021 12:36	NRIC/ Driving License	Y	Normal	NRIC/ Driving License 2021-3-9
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Mar 2021 12:36	NRIC/ Driving License	Y	Normal	NRIC/ Driving License 2021-3-9
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICES (BUKIT MERAH)) on 09 Mar 2021 12:36	SAS		Normal	SAS 2021-3-9

Video List

Uploaded By/Date	Folder Date	File Name		Source
		Display in New Window	Scan and uploading	

Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
 MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
 ROAD TRANSPORT ACT, 1987 (MALAYSIA)
 ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)
 MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5101287099-02

Cover : drivo CLASSIC

1. Index mark and Registration Number of Vehicle : **SJR7843A**
 Chassis Number : JMYSRCY2A9U004457
2. Name of Policyholder : OTHMAN BIN OMAR
3. Effective Date of Insurance : 14 Jul 2020
4. Expiry Date of Insurance : 13 Jul 2021
5. Persons or Classes of Persons entitled to drive#
 (a) The Policyholder.
 (b) Any other person who is driving on the Policyholder's order or with his/her permission.
 Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.
6. Limitations as to Use#
 (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

EXCESS (SECTION 1)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: NO
NCD PROTECTION	: YES (FREE)
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: RUSHDAN BIN OMAR
NAMED DRIVER (1)	: ERWAN BIN EHSAN
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE LESS RESIDUAL COE/PARF VALUE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : INSUREMYCAR.COM.SG (00000615275)
 Date of Issue : 26 Jun 2020 10:58 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive