

# 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 ..... 20/03/2021 10:00 (SGT)  
Date of Accident ..... 17/03/2021 14:00 (SGT)  
Exact Location of Accident ..... Singapore, Jurong Town Hall  
Additional Location Information ..... -  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... GBJ3913U

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... AZIZ 7 TRANSPORTATION  
Company Reg No ..... 5XXXX507M  
Email Address ..... 3PYTHEMANSHAH@GMAIL.COM  
Mobile Phone No ..... (Phone) +65-87511500  
Alternative Phone No ..... +65-87511500

### VEHICLE PARTICULARS

Manufacturer ..... Toyota  
Model ..... Hiace  
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 - Claiming third party  
Vehicle Category ..... Commercial vehicle  
Transmission ..... Manual  
CC ..... 3000

### INSURANCE COMPANY

Name of Insurance Company ..... NTUC Income Insurance Co-operative Ltd  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... 5117253849  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... SHAHRIN BIN RAFIE  
NRIC No ..... SXXXX178F

Date Of Birth .....	13/12/1980
Occupation .....	Outdoor
Date Of Driving Pass .....	07/12/2017
Driving experience .....	3 YEARS AND 3 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-87511500
Alt. Phone Number .....	-
Email Address .....	3PYTHEMANSHAH@GMAIL.COM
Address .....	BLK 780 YISHUN RING RD #03-3544
Address complement .....	-
Postcode .....	760780
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Employee
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 - Change/cross lane
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? .....	Yes
Was any injured conveyed to hospital by ambulance? .....	No
Was any other material or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Yishun North Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18008529999
Alt. Police Station Phone No .....	(Fax) +65-68522299
Police Station Address .....	31 Yishun Central Singapore 768827
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT L/20210317/2085

#### 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 .....	GBE3076L
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle

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 .....	SHAHBIN BIN RAFIE
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	BODY
Injured person in which vehicle? .....	GBJ3913U
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No

**SKETCH PLAN****IMPORTANT NOTICE**

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6. 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.
7. By the lodgment 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;
- (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;

**AZIZ 7 TRANSPORTATION**

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.:

ACCIDENT REPORT FORM





























**SINGAPORE  
POLICE FORCE**



L/20210317/2085

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**POLICE REPORT (NP299)**

Report No. L/20210317/2085

Police Station Of Origin  
Yishun North N.P.C  
31 Yishun Central SINGAPORE 768827  
Tel No: 1800-8529999

Date/Time Report Made 17/03/2021 21:14	Vide Report No.	Station Diary No. 117
Name Of Informant SHAHN BIN RAFIE	Address APT BLK 780 YISHUN RING ROAD #03-3544 SINGAPORE 760780	
ID Type / ID No. NRIC NO / S8038178F	Contact No. Home/Office	Mobile 87511500
Nationality SINGAPORE CITIZEN	Email Address	
Occupation DELIVERY DRIVER	Sex Male	Age 40
Institution/School Name	Date of Birth 13/12/1980	Race Boyanesse
Date/Time Of Incident 17/03/2021 14:00	Location Of Incident JURONG TOWN HALL ROAD SINGAPORE Near JTC Summit	

**Brief details.**

On the 17/03/2021 at around 1400hrs, I was driving my van, a Toyota HiAce bearing plate number GBJ3913U, along Jurong Town Hall Road heading towards to Jurong East. I was driving along the most right lane, intending to turn right into Jurong East St 12. The junction of Jurong Town Hall Road to Jurong East St 12 was a T junction.

As I was approaching the T junction, I observed that there was a Mitsubishi pick up truck, bearing plate

Signature Of Officer Recording The Report: L / Sgt 3 ADAM TOK BIN RIDUAN SHAFIQUE	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 17/03/2021 21:14
Officer In-Charge Of Case: L / Woodlands Police Divisional Investigation Branch / Insp WONG JAYMANN Contact No.: 64660000	Classification Of Case:

Authentication Stamp







**SINGAPORE  
POLICE FORCE**



L/20210317/2085

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POLICE REPORT (NP299)


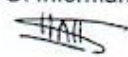
CONTINUATION OF REPORT

Report No. L/20210317/2085

number GBE3076L, on the lane to the left of me, intending to do a lane change from its lane into my lane. However, I observed that the vehicle wanted to do a lane change in front of me when it was very close to my vehicle. I proceeded to sound the horn of my vehicle to warn the driver however, the driver proceeded to do a lane change into my lane.

This caused my left bumper of my vehicle to collide into the right door of the said vehicle. After the accident happened, the said driver did not stop and I followed the driver and gestured her to stop after she made a U-Turn at the mentioned T-junction. The said driver then stopped and I managed to exchange particulars with her. Her particulars are as follows, Khor Min Hui (NRIC: S9515173F HP: 8218 1386). I then took photos of the damaged of our vehicles. We then both agreed to settle the accident via our insurance company.

No Traffic Police and ambulance were at scene. Nobody was injured. No government property was damaged. This is the first time such an incident has happened. I am lodging this report to facilitate the claim from my insurance company.

Signature Of Officer Recording The Report: L / Sgt 3 ADAM TOK BIN RIDUAN SHAFIQUE 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 17/03/2021 21:14
Officer In-Charge Of Case: L / Woodlands Police Divisional Investigation Branch / Insp WONG JAYMANN Contact No.: 64660000	Classification Of Case:
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