

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 09/11/2020 16:20 (SGT)
Date of Accident 07/11/2020 10:50 (SGT)
Exact Location of Accident ALONG PUNGGOL ROAD
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLC8686K

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner MOHAMMAD ALIF RIDHWAN BIN HUSNI
NRIC No S9242853B
Email Address ALFWRK20@YAHOO.COM.SG
Mobile Phone No (Phone) +65-93232553
Alternative Phone No (Phone) +93232553

VEHICLE PARTICULARS

Manufacturer BMW
Model 523i 2.5 (A)
Variant -
Exact purpose for which vehicle was being used at time of accident -
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 Direct Asia
Type of Coverage Comprehensive
Fleet Policy No
Policy Number MT/00865745
Cover Note Number -

DRIVER

Name of Driver MOHAMMAD ALIF RIDHWAN BIN HUSNI
NRIC No S9242853B
Date Of Birth 22/11/1992
Occupation Indoor

Date Of Driving Pass	16/02/2015
Driving experience	5 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93232553
Alt. Phone Number	(Phone) +-93232553
Email Address	ALFWRK20@YAHOO.COM.SG
Address	BLK 660 CHOA CHU KANG CRESCENT #04-83
Address complement	-
Postcode	680660
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 1	-
Insurance Company of Other Vehicle Owned by Driver 1	-
Vehicle Registration Number of Other Vehicle Owned by Driver 2	-
Insurance Company of Other Vehicle Owned by Driver 2	-
Vehicle Registration Number of Other Vehicle Owned by Driver 3	-
Insurance Company of Other Vehicle Owned by Driver 3	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Side Swipe
Weather Conditions	Raining
Road Surface	Wet

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	Bishan Neighbourhood Police Centre
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE POLICE REPORT

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	-
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMF503E
Vehicle Manufacturer	-
Vehicle Model	KIA/CERATO/RED
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car

Name of Driver	ELIZABETH LIEW XIAN EN
NRIC No	S9315760E
Contact Number	(Phone) +-94470786
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	MOHAMMAD ALIF RIDHWAN BIN HUSNI
Address	
Address Complement	-
Post Code	-
Approximate Age Years Old	28
Injuries Sustained	BODY PAIN
Injured person in which vehicle?	-
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

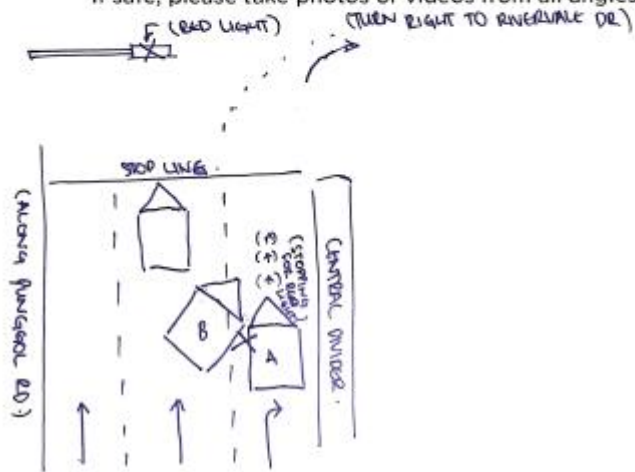
Accident Toolkit

Sketch plan

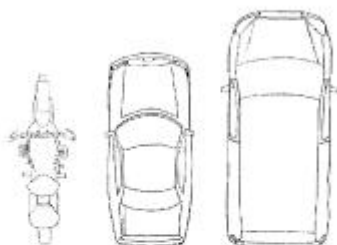
Sketch of accident scene:

Please illustrate the layout of roads with arrows showing the direction and position of vehicles at the time of impact. Also please note the road names, road signs and vehicle registration numbers.

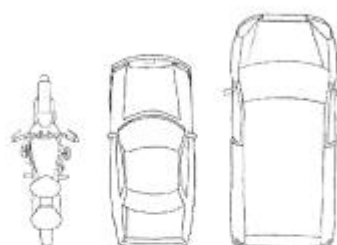
If safe, please take photos or videos from all angles.



Please indicate on vehicle A (your vehicle) and, vehicle B(third party vehicle), the point of impact and area(s) of visible damage with an arrow.



Vehicle A
SLC 9686K



Vehicle B
SMF 503 E




Call us direct
Customer Care
6665 5555
Claims Support 24/7 Hotline
6532 1818
+65 9801 3099 (from overseas)

SKETCH PLANIMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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5. Any false reporting may be referred to the Police for investigation.
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.

X 
 Policyholder's Signature
 Date & Time: 07/11/2020
 1400485

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


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

For MVRs, Submission to GIA 1/3



















































**SINGAPORE
POLICE FORCE**



T202011092040

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

1 of 3
Report No: T202011092040

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 09/11/2020 12:53	Video Report No.:	Station Diary No.: 47
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Informant's Particulars

Name of Informant: MOHAMMAD ALIF RIDHWAN BIN HUSNI		Address: APT BLK 680 CHOA CHU KANG CRESCENT #04-83 SINGAPORE 680660	
ID Type / ID No.: NRIC NO / S92428538		Contact No.: Home/Office: Mobile: 93232553	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 27	Date of Birth: 22/11/1992	Type of Informant: Driver
Race: Malay	Language: English		Institution / School Name:
Occupation: SCDF	Driving Licence Information: Class: 3,4		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 09/11/2020 10:50	Type of Location: X-Junction
Location: COMPASSVALE STREET				
Weather: Raining		Road Surface: Wet		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLC8686K	Car	BMW	523i A	Grey		0
SMF503E	Car	KIA	CERATO 1.6(A) EX	Red		0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
SLC8686K	DIRECT ASIA INSURANCE (SINGAPORE) PTE. LTD.	MT/00885745	03/11/2020	02/11/2021



**SINGAPORE
POLICE FORCE**



1/20201109/2040

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

2 of 3
Report No. 1/20201109/2040

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	MOHAMMAD ALIF RIDHWAN BIN HUSNI	ID No.	S9242853B
Related Vehicle	SLC8686K (Car)	Contact No.	93232553
Hospital/Clinic	UNIHEALTH 24HRS CLINIC	Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: NIL
Date Treatment	09/11/2020	Date Discharge	09/11/2020
No. of Days granted Medical Leave	03	Degree of Injury	NIL
Driver			
Name	ELIZABETH LIEW XIAN EN	ID No.	S9315760E
Related Vehicle	SMF503E (Car)	Contact No.	94470786
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	NIL

Brief Details.

On 07th November 2020 at 10.51am, I was driving my vehicle registration number: SLC8686K along Punggol Road. I was driving on the first lane and there was no other vehicle ahead of me (First lane turning right to Rivervale Drive). There were another 2 vehicles which were on the left side (2nd lane) and both vehicles were on the stationary position. While I was driving to a complete stop, there was a vehicle registration number: SMF503E (V2) out of sudden change to my lane abruptly and collided to my vehicle.

V2 turned right at the very last minute caused me to apply emergency brake however due to the impact, my vehicle collided to the centre divider. As it was raining, we moved to a nearby location just behind the B/190, Rivervale Drive. We exchanged particulars and took shots of the damages.

I wished to state that I felt pain on my bodies due to the huge impact. I went to seek medical attention and was given 3 days MC. I was advised to lodge a Police report.



**SINGAPORE
POLICE FORCE**



1/20201109/2040

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

3 of 3

Report No. T/20201109/2040

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 65474685 stating the **report number** as reference.

Signature Of Officer Recording The Report: E / Sr Staff Sgt MOHAMAD FARID BIN JAMAL	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 09/11/2020 12:53
Officer In Charge Of Case: TP / AEIT / Insp BOON YEN KIAN EVE Contact No.: 65476185	Classification Of Case:
Authentication Stamp NP158 	



Contact us at
 Hotline: (65) 6532 2888
 E-mail: CustomerService@DirectAsia.com

YOUR POLICY SCHEDULE

This document forms part of your contract with us and should be read together with your Certificate of Insurance and your Policy Details. Do let us know if any of the details shown here need to be amended or updated.

Car Insurance

Policy number	: NT/00865745		
Period of cover	: Policy begins 03/11/2020 16:39 and runs until 02/11/2021 23:59		
Premium	: S\$ 2,200.32 (inclusive of GST)		
Own Damage Excess	: S\$ 900.00 (before any applicable GST)		
Windscreen Excess	: S\$ 100.00 (before any applicable GST)		
Vehicle Details			
Vehicle Registration	: SLC8686K	Chassis number	: WBAFP32040C543965
Make and model	: BMW 523i 2.5 (A) Saloon	Car usage	: Private and Business Use
Year of registration	: 2010		
Finance company / Hire purchase	: RICARDO CARS PTE LTD		
Is your car modified? (Modifications are according to LTA guidelines)	: No		
Policyholder			
Policyholder	: MOHAMMAD ALIF RIDHWAN BIN HUSNI		
Mailing Address	: 660 CHOA CHU KANG CRESCENT, #04-83, Singapore 680660		
E-mail Address	: alfrwk20@yahoo.co	Mobile Number	: 93232553
	m.sg		
No Claims Discount (NCD)	: 10%		
Main Driver Details			
Main Driver	: MOHAMMAD ALIF RIDHWAN BIN HUSNI		
Date of Birth	: 22/11/1992	Marital Status	: Single
Gender	: Male	Number of accidents or claims in the last 36 months	: 0
Certificate of Merit	: No	Years of valid driving licence	: > 5
Important Note: This policy is on a named driver basis. Any unnamed drivers will not be covered.			
Young and/ or Inexperienced Driver (YIED): refers to any driver who is below the age of 30 or holds a driving licence for less than 2 years.			
Promotion Details			
Promotion Item : 3000 Escape Points + 24Hr Breakdown Assistance			

Direct Asia Insurance (Singapore) Pte. Ltd.


 Underwriting Manager

Direct Asia Insurance (Singapore) Pte Ltd
 20 Anson Road #08-01 Twenty Anson Singapore 079912
 www.DirectAsia.com

Page 1 of 3

Company Registration: 200812010G

UNIHEALTH 24-HR CLINIC (TOA PAYOH)
Blk 178 Toa Payoh Central #01-218 Singapore 310178
Tel: 62031639 Fax: 62549938

Medical Certificate

Date : 09 Nov 2020
MC No. : 0000088140

This is to certify that :

Name : MOHAMMAD ALIF RIDHWAN BIN HUSNI
NRIC : S9242853B

is Unfit for Work/Duty/School for 3 days
from 09/11/2020 to 11/11/2020 inclusive.



LOCUM

**This certificate is not valid for absence from court or other judicial proceedings unless specifically stated.*