

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 25/03/2021 17:28 (SGT)
Date of Accident 24/03/2021 21:27 (SGT)
Exact Location of Accident TPE, Singapore
Additional Location Information ALONG TAMPINES EXPRESSWAY TWRDS CHANGI
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMM8046T

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner MUHAMMAD NUR BIN ABDOL AJIS
NRIC No SXXXX533E
Email Address
Mobile Phone No
Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Toyota
Model Wish
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
Transmission Auto
CC 1794

INSURANCE COMPANY

Name of Insurance Company Auto & General Insurance (Singapore) Pte. Limited.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number P10534434R00
Cover Note Number

DRIVER

Name of Driver MUHAMMAD NUR BIN ABDOL AJIS
NRIC No SXXXX533E

Date Of Birth	
Occupation	Inaoor
Date Of Driving Pass	05/07/2007
Driving experience	13 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	
Alt. Phone Number	
Email Address	
Address	
Address complement	-
Postcode	
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	Side Swipe
Weather Conditions	Clear
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?	No
Was any injured conveyed to hospital by ambulance?	-
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	Woodlands West Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18003639999
Alt. Police Station Phone No	(Fax) +65-63640997
Police Station Address	1 Woodlands St 12 Singapore 738622
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO POLICE REPORT NO : T/20210324/2159.

ATTACHMENT(S)

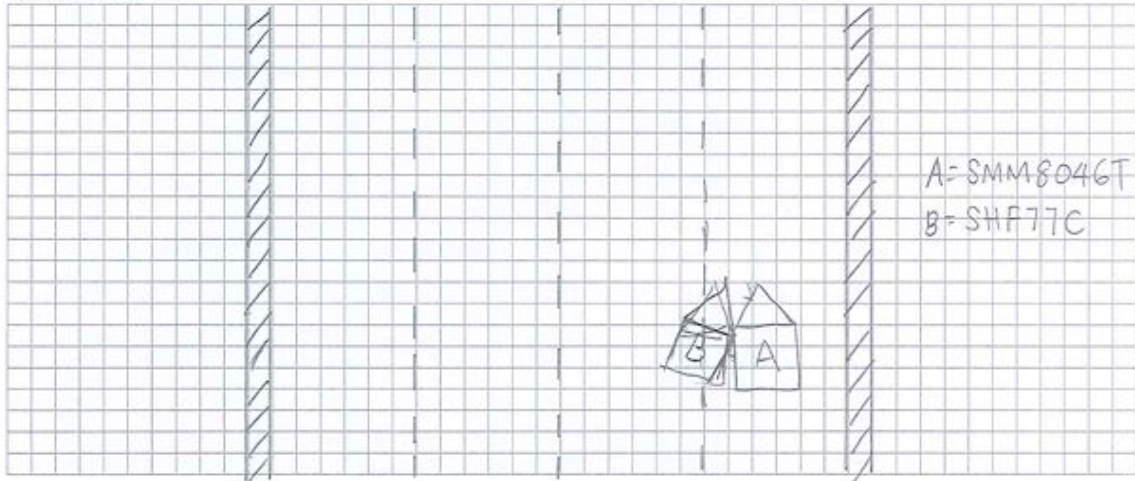
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHF77C
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi

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)	2

SKETCH PLAN




DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Pls refer to Police Report No: 7/20210324/2159.

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:


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

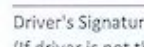
SKETCH PLANIMPORTANT NOTICE

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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.


 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.:

It pays to choose

**Budget
Direct
insurance**

Certificate of Insurance

 Comprehensive Car Policy
 Policy Number: P10534434R00

Motor Vehicles (Third-Party Risks And Compensation) Act (Chapter 189) of Singapore, Motor Vehicles (Third-Party Risks And Compensation) Rules of Singapore, Road Transport Act 1987 of Malaysia, Road Transport (Amendment) Act 2019 of Malaysia, Motor Vehicles (Third-Party Risks) Rules, 1959 of Malaysia, or any Amendment, Act or Acts passed in substitution thereof.

Certificate Number P10534434R00 s(Comprehensive / Named Driver Plan)

1) Vehicle Registration Number	:	SMM8046T
Chassis Number	:	ZNE100313237
2) Effective Date / Time of Commencement of Insurance for the Purpose of the Act	:	14/03/2021 (00:00)
3) Date / Time of Expiry of Insurance	:	16/06/2022 (23:59)
4) Excess (i) Policy	:	S\$ 600.00
(ii) Windscreen	:	S\$ 100.00
5) Policyholder	:	Muhammad Nur Bin Abdol Ajis
6) Persons or Classes of Persons Entitled to Drive*		
Drivers named as a Main / Named Driver in this Certificate of Insurance only.		
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 any reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of accident or loss. Please refer to the Product Disclosure Document for full terms and conditions.		
Main Driver / Date of Birth	:	Muhammad Nur Bin Abdol Ajis(22/08/1984)
Named Driver(s) / Date of Birth	:	No driver is named.
7) Limitation as to use*		
Use only for social, domestic and pleasure purposes. The Policy does not cover use for hire or reward, tuition or driving tests, racing, pace-making, reliability trials, speed-testing or the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.		
* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) of Singapore and Section 95 of the Road Transport Act 1987 of Malaysia, are not to be included under these headings.		
8) Finance Company	:	Hong Leong Finance Limited

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) of Singapore and Part IV of the Road Transport Act 1987 of Malaysia or any Amendment, Act or Acts passed in substitution thereof.

Issued in Singapore on
11/03/2021

Auto & General Insurance (Singapore) Pte. Limited
Trading as Budget Direct Insurance



Simon Birch
Chief Executive Officer

Auto & General Insurance (Singapore) Pte. Limited (Co. Reg. No. 201626103G), trading as **Budget Direct Insurance**
190 Clemenceau Avenue, #03-01, Singapore Shopping Centre, Singapore 239924 Tel: 6221 2111 budgetdirect.com.sg















**SINGAPORE
POLICE FORCE**



T/20210324/2159

1 of 4

Police Station Of Origin:
Woodlands West N.P.C.
1 Woodlands Street 12 SINGAPORE 738622
Tel No: 1800-363 9999

Report No. T/20210324/2159

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/03/2021 23:49	Vide Report No.:	Station Diary No.: 674
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Informant's Particulars

Name of Informant: MUHAMMAD NUR BIN ABDOL AJIS			Address:		
ID Type / ID No.: NRIC NO /			Contact No.: Home/Office: Mobile.		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age:	Date of Birth:	Type of Informant: Driver		
Race: Malay			Language:		Institution / School Name:
Occupation: CIVIL SERVANT			Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 24/03/2021 21:30	Type of Location: Straight Road
Location: TAMPINES EXPRESSWAY				
Weather: Clear		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
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
SHF77C	Car	TOYOTA	PRIUS HYBRID 1.8 CVT	Maroon	Seriously Damaged	1
SMM8046T	Car	TOYOTA	WISH 1.8 A	White	Seriously Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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**SINGAPORE
POLICE FORCE**



T/20210324/2159

Police Station Of Origin:
Woodlands West N.P.C.
1 Woodlands Street 12 SINGAPORE 738622
Tel No: 1800-363 9999

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Report No. T/20210324/2159

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMM8046T	AUTO & GENERAL INSURANCE (SINGAPORE) PTE. LIMITED	P10534434R00	14/03/2021	16/06/2022

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	CHUA ENG JOO		ID No.	
Related Vehicle	SHF77C (Car)		Contact No.	
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
Driver				
Name	MUHAMMAD NUR BIN ABDOL AJIS		ID No.	
Related Vehicle	SMM8046T (Car)		Contact No.	
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave		NIL	Degree of Injury	NIL

Brief Details.

On 24/03/2021 at around 2127hrs, I was travelling along TPE towards Changi near to exit 5 and my vehicle collided with another taxi (SHF77C). It is 5 lane road and I was travelling along the most right lane at that point of time. The taxi was travelling on the second lane and started to swirl his vehicle and getting close to the left side of my vehicle. I tried to avoid however the taxi still collided onto the left of my vehicle and my vehicle then move towards the center divider.

The taxi driver opened his door and started to vomit and mentioned that he is feeling unwell. I observed that there is another passenger in his taxi. No one was injured during the accident. I asked if he required any ambulance however he denied. There is an in car camera installed in my vehicle.

After my traffic accident happened, there is another 2 road traffic accident happened at the rear of my vehicle however did not hit onto my vehicle. I already informed my insurance company and was told to lodge a police report.



**SINGAPORE
POLICE FORCE**



T/20210324/2159

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CONTINUATION OF REPORT



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Report No. T/20210324/2159

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: L / Sgt 1 TEO KAI XUN 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 24/03/2021 23:49
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:
Authentication Stamp NP168  Signature:  Singapore Police Force	