

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 26/03/2021 15:21 (SGT)
Date of Accident 25/03/2021 13:45 (SGT)
Exact Location of Accident Chai Chee St, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBH238R

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner FORWARDERS & DELIVERY AGENCY (S) PTE LTD
Company Reg No 2XXXXX297N
Email Address DAISYLEO2128@GMAIL.COM
Mobile Phone No (Phone) +65-94227348
Alternative Phone No (Home) +65-94227348

VEHICLE PARTICULARS

Manufacturer Nissan
Model Nv350
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 Auto
CC 1600

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number GA559879/1
Cover Note Number -

DRIVER

Name of Driver JOSEPH MICHAEL
NRIC No SXXXX068Z

Date Of Birth	28/07/1956
Occupation	Outdoor
Date Of Driving Pass	01/10/1976
Driving experience	44 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94227348
Alt. Phone Number	-
Email Address	DAISYLEO2128@GMAIL.COM
Address	APT BLK 107B CANBERRA ST #09-583
Address complement	-
Postcode	752107
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	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)	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	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED

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	YP2167J
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) -

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' law yers/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' law yers/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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.



[Handwritten signature]

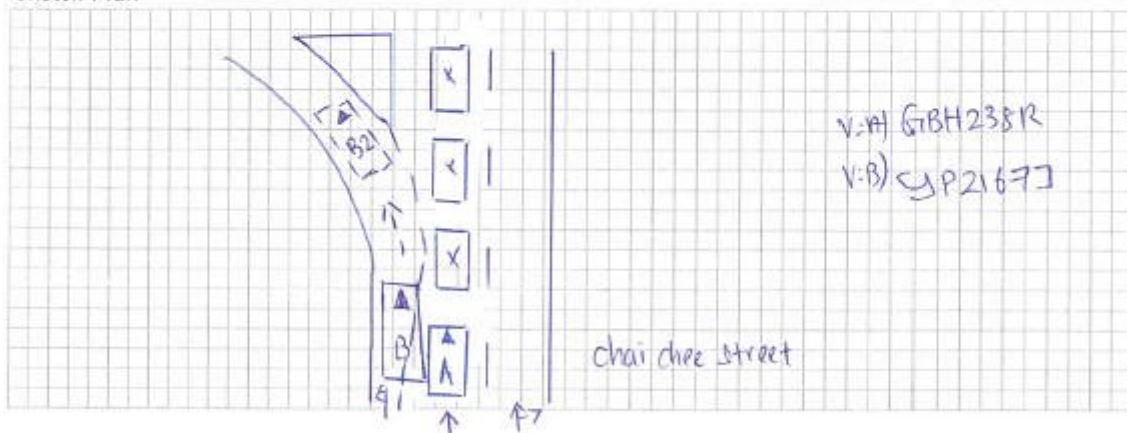
[Handwritten signature: MAC]

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

refer to police
report: T/20210326/7012

Declaration

We declare the foregoing particulars are true in every respect.

FORWARDERS
FERRY AGENCY (S) PTE. LTD.
FORWARDERS
FERRY AGENCY (S) PTE. LTD.
POLICYHOLDER'S SIGNATURE / Date & Time

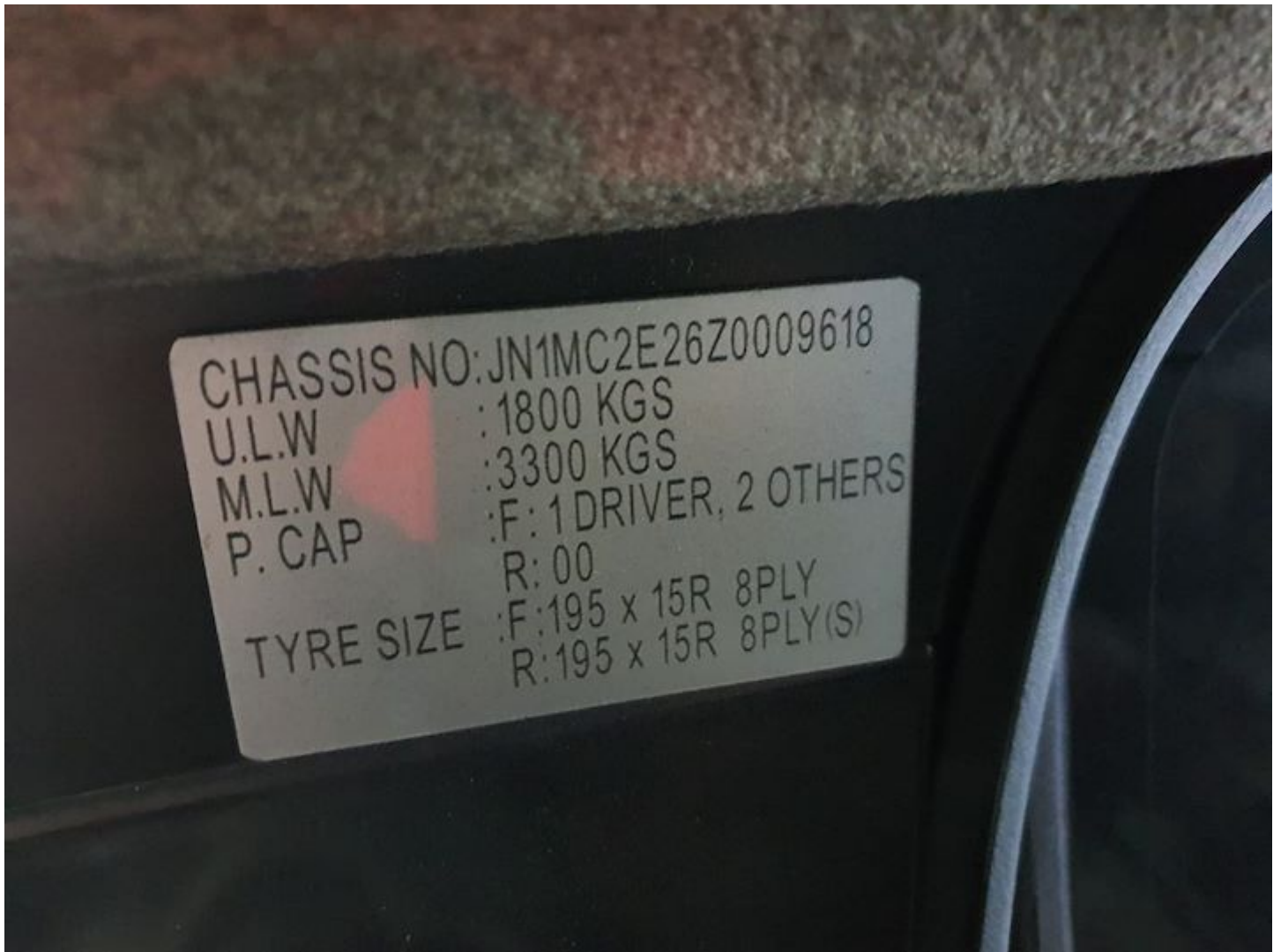
[Signature]

DRIVER'S SIGNATURE (If driver is not the policyholder) / Date & Time

[Signature]

WITNESSED BY REPORTING CENTRE PERSONNEL



















**SINGAPORE
POLICE FORCE**



T/20210326/7012

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20210326/7012

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/03/2021 12:37	Vide Report No.:	Station Diary No.:
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Informant's Particulars			
Name of Informant: JOSEPH MICHAEL		Address: 107B CANBERRA STREET #09-583 SINGAPORE 752107	
ID Type / ID No.: NRIC NO / S1221068Z		Contact No.: Home/Office: Mobile: 94227348	
Nationality: SINGAPORE CITIZEN		Email: Daisyleo2128@gmail.com	
Sex: Male	Age: 64	Date of Birth: 28/07/1956	Type of Informant: Driver
Race: Indian		Language: English	Institution / School Name:
Occupation: others		Driving Licence Information: Class:	Date of Expiry:

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 25/03/2021 13:45	Type of Location: Straight Road
Location: CHAI CHEE STREET				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		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	Conditio	No of
GBH238R	Van	NISSAN	NV350	Red		0
YP2167J	Lorry	MITSUBISHI	FUSO	Blue		0

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



**SINGAPORE
POLICE FORCE**



T/20210326/7012

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20210326/7012

CONTINUATION OF REPORT

Driver			
Name	JOSEPH MICHAEL	ID No.	S1221068Z
Related Vehicle	GBH238R (Van)	Contact No.	94227348
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

ON THE 25TH MARCH 2021 AT ABOUT 1345HRS, I WAS DRIVING MY COMPANY'S VEHICLE GBH238R. I WAS TRAVELLING ALONG CHAI CHEE STREET TOWARDS CHAI CHEE ROAD. THERE WAS ABOUT 3 CARS INFRONT OF ME STOPPED AT THE JUNCTION AS TRAFFIC LIGHT WAS RED. I SLOWED DOWN MY VEHICLE CAME TO A STOP TOO. WHILE WAITING FOR THE TRAFFIC LIGHT TO TURN GREEN, I NOTICED A VERY BIG LORRY WAS ON MY LEFT TRYING TO TURN LEFT TOWARDS THE SLIP ROAD. HOWEVER THE LANE WAS QUITE NARROW AND THE DRIVER INSIST OF SQUEEZING THROUGH. WHILE HE WAS PASSING THROUGH, ITS VEHICLE REAR RIGHT PORTION COLLIDED AGAINST MY STATIONARY VEHICLE REAR LEFT PORTION. UPON THE IMPACT, THE DRIVER OF YP2167J DID NOT STOP AND INSTEAD WENT OFF. THE TRAFFIC ON MY LANE TURNED GREEN, THE VEHICLES INFRONT OF ME STARTED TO MOVE AS SUCH I MANAGE TO SIGNAL LEFT AND CHECK LANE IS CLEAR BEFORE I FOLLOWED YP2167J. FINALLY I MANAGE TO STOP YP2167J. I CALLED MY MANAGER AND HE SPOKE WITH THE PERSON INCHARGE OF YP2167J. LATER I WAS INFORMED TO FILE A REPORT TO PROCEED WITH INSURANCE CLAIM. THE LORRY YP2167J BELONGS TO THE COMPANY WAH & HUA PTE LTD. I WISH TO STATE THAT I WAS STATIONARY IN MY LANE WHEN THE ACCIDENT HAPPENED. THE LORRY COULD HAVE AVOIDED THIS ACCIDENT IF HE WAITIED PATIENTLY FOR OUR VEHICLES TO MOVE AND HAD ENOUGH SPACE FOR HIM TO TURN.



**SINGAPORE
POLICE FORCE**



T/20210326/7012

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3

Report No. T/20210326/7012

CONTINUATION OF REPORTSketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
NOR AFFENDY BIN JAFFAR
Contact No.: 65476368

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
26/03/2021 12:37

Classification Of Case:



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: S66550020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : SY0A213Q0003 Vehicle Registration No: GBH238R
Name (as shown in NRIC) : FORWARDERS & DELIVERY AGENCY (S) PTE LTD NRIC/FIN/Passport No : 200708297N
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : _____ Singapore()
Contact (Tel) : _____ Mobile No. : 94227348
Email Address : DAISYLEO2128@GMAIL.COM
Date of Accident : 25/03/2021 Time of Accident : 13:45
Place of Accident : Chai Chee St, Singapore
Insurance Company: AXA INSURANCE PTE LTD

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Amend make & model to Nissan NV 350.

Policyholder / Driver's Signature
Date:

MAG

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