

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	08/06/2021 17:54 (SGT)
Date of Accident	07/06/2021 11:44 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	AMBULANCE BAY-BLK 5 SGH
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMV6978U
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	ISS FACILITY SERVICES PL/GOLDBELL LEASING
Company Reg No	NA
Email Address	RICHARD.TIOTUICO-ACOL@SGH.COM.SG
Mobile Phone No	(Phone) +65-97231542
Alternative Phone No	+65-97231542

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	Private car
Transmission	Auto
CC	2982

INSURANCE COMPANY

Name of Insurance Company	MSIG Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	B29116218MKF
Cover Note Number	-

DRIVER

Name of Driver	MD IBRAHIM B OMAR
NRIC No	SXXXX256E

Address complement -
Postcode -
Insurance Company Name -
Nature Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) -

WITNESS DETAILS

WITNESS 1

Name MOHAMED ISA BIN HASHIM
Phone (Phone) +65-83878494
Email -

Date Of Birth	09/11/1944
Occupation	Outdoor
Date Of Driving Pass	26/11/1963
Driving experience	57 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98300415
Alt. Phone Number	-
Email Address	RICHARD.TIOTUICO.ACOL@SGH.COM.SG
Address	BLK 72 REDHILL ROAD
Address complement	#08-63
Postcode	150072
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	Hit and run / Vandalism / Damaged whilst parked
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE 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	YN5209M
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	WANG ZIZHUANG
Passport No/FIN	GXXXX896M
Contact Number	(Phone) +65-86569342
Address	-

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' 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.



Wilson Tham
AS Facility Services
Asst. Contract Manager

Mohamed Isa Ibrahim 8/6/21
21746176/8
1244/430mm

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan





POLICE REPORT (NP299)

Report No. A/20210608/7006

Police Station Of Origin
Central Division HQ
A 391 New Bridge Road #03-112 Police
Cantonment Complex SINGAPORE 088762
Tel No:1800-2240000

Date/Time Report Made 08/06/2021 09:52		Vide Report No.		Station Diary No.	
Name Of Informant ACOL RICHARD TIOTUICO		Address			
ID Type / ID No. FIN NO / G5125377P		Contact No. Home/Office: Mobile: 97231542			
Nationality FILIPINO		Email Address RICHARDACOL@GMAIL.COM			
Occupation Hospital/Clinic attendant		Sex Male	Age 37	Date of Birth 11/11/1983	Race Others
Institution/School Name		Language English			
Date/Time Of Incident 07/06/2021 11:40 - 07/06/2021 11:45		Location Of Incident 1 HOSPITAL CRESCENT SINGAPORE GENERAL HOSPITAL (BLK 5) SINGAPORE 169608			

Brief details.

I, Ibrahim Bin Omar (S1084256E), ISS Ambulance driver at Singapore General Hospital. I am reporting this incident for record purposes.

On 7 June 2021 at 1144H, while witness Mohamed Isa Bin Hashim(S1346176G) was seated inside Ambulance SKB2315M which is parked at Lot 9 at SGH Block 5 car park area, he saw 1 long oxygen truck (Reg YN5209M; Air Liquide Company) coming into the carpark that would do an oxygen refill at the liquid oxygen station. The truck make a right a turn at the roundabout but it could not reverse into the

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 08/06/2021 09:52
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp



**SINGAPORE
POLICE FORCE**



A/20210608/7006

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. A/20210608/7006

station. The driver had one partner tapping at the rear part of the truck to indicate reversing. it moved forward and backward a few times. When the partner stopped tapping, the driver continued reversing and miscalculated his maneuver. The rear of the truck hit the front right side of bonnet of parked ambulance vehicle SMV6978U. The truck driver continued to park his vehicle before approaching ambulance driver of SMV6978U, Md Ibrahim B Omar.

At 1145h, while ambulance driver Ibrahim was seated at rear passenger seat inside SMV6978U vehicle which was parked at Lot 3 at SGH Blk 5 car park area, he heard a vehicle's reversing sound then a sudden bang noise. Driver Ibrahim immediately came out inside of the ambulance to check what happened and saw that the reversing vehicle was an Air Liquide truck supplier. When he checked the vehicle, there was a dent on the right side of the ambulance van bonnet. Driver Ibrahim reported the incident to his supervisor Richard. Supervisor Richard contacted the truck driver's supervisor Wang who said the all claim by insurance.

Truck Driver Name/FIN/HP No.: Wang Zizhuang / G8825896M / 86569342

Air Liquide Company - Supervisor Wang 83322069

Ambulance Driver Name/NRIC/HP No.: Md Ibrahim B Omar / s1084256E / 98300415

ISS Facility Services Pte Ltd - Supervisor Richard 97231542

Signature Of Officer Recording The Report:

Not applicable

Signature Of Interpreter:

Not applicable

Officer In-Charge Of Case:

Authentication Stamp

Signature Of Informant:

The identity of the person making this report has been authenticated by Singpass. No signature is required.

Date/Time:

08/06/2021 09:52

Classification Of Case:

Describe Circumstances of the Accident

On 07 Jun 21 at 11:44H, while witness Mohamed Isa Bin Hashim (NRIC S1346176G), was seated inside Ambulance SK62313M which was parked at Lot 19 at SGB Bix 5 carpark area, he saw 1 long oxygen truck (Reg YN6209M, A- Liqueide Company) coming into the carpark that would do an oxygen refill at the liquid oxygen station. The truck make a right turn at the roundabout but it could not reverse into the station. The driver had one partner tapping at the rear part of the truck to indicate reversing. It moved forward and backward a few times. When the partner stopped tapping the driver continued reversing and misaligned his maneuver. The rear of the truck hit the front right side bonnet of parked ambulance vehicle SMV6978U. The truck driver continued to park his vehicle before approaching ambulance driver of SMV6978U, Md Ibrahim B Omar

At 1145H, while ambulance driver Ibrahim was seated at the rear passenger seat inside the SMV6078U vehicle which was parked at Lot 3 at SGH Bldg 5 carpark area, he heard a vehicle's reversing sound then a sudden bang noise. Driver Ibrahim immediately came out inside of the ambulance to check what had happened and saw that the reversing vehicle was an Air Liquide truck supplier. When he checked the vehicle, there was a dent on the right side of the ambulance van bonnet. Driver Ibrahim reported the incident to his supervisor Richard. Supervisor Richard contacted the truck driver's supervisor Wang who said that all claim by insurance.

Truck Driver Name / FIN / HP No. Wang Zizhuang / GB825895M / 86569342

Air Liquide Company - Supervisor Wang 83522069

Ambulance Driver Name/ NRIC / HP No. Md Ibrahim B Omar / S1084256E / 98300415

ISS Facility Services Pte Ltd – Supervisor: Richard 97231542

Declaration

We declare the foregoing particulars are true in every respect.



~~Wilson Thru~~
~~65 Facility~~
~~Contract Manage~~

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre
Personnel