

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

1. Please report <u>correctly</u> the details of the accident to speed up the claims process.

2. This Form must be <u>completed by the Policyholder and/or the Authorised Driver</u>

3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding of material facts may allow insurance companies to repudiate

5. International production in 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

Date of Accident

Exact Location of Accident

Additional Location Information

Country/State of Loss

28/07/2021 08:55 (SGT)

26/07/2021 16:00 (SGT)

Singapore

OSCP OF PREMIER@KAKI BUKIT, 8 KAKI BUKIT AVE 4(LOT 22)

Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number

SMX64K

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

NRIC No.

Email Address

Mobile Phone No

Alternative Phone No

MUHAMMAD LUTFI BIN ABDUL RAZAK

S9016181D

THELUTFIRAZAK@GMAIL.COM

(Phone) +65-83633836

+65-85695856

VEHICLE PARTICULARS

Manufacturer

Model

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?

Vehicle Category

Transmission

CC

Lexus

Rx200t

Private use

No - Claiming third party

Private car

Auto 2000

INSURANCE COMPANY

Name of Insurance Company

Type of Coverage

Fleet Policy

Policy Number

Cover Note Number

NTUC Income Insurance Co-operative Ltd

Comprehensive

No

5121521412

drivo CLASSIC

DRIVER

Name of Driver

NRIC No

MUHAMMAD LUTFI BIN ABDUL RAZAK

S9016181D



Date Of Birth Occupation Date Of Driving Pass Driving experience Gender

Mobile Number Alt. Phone Number **Email Address** Address

Address complement Postcode

Is the driver the policyholder? If No, Relationship of the Driver with the Insured

Does Driver Own Other Vehicles?

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 Weather Conditions Road Surface

OTHER INFORMATION

Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?

DETAILS OF POLICE ACTION

Was the accident reported to the police? Police Station Name Police Station Phone No. Alt. Police Station Phone No. Police Station Address Was notice of intended Prosecution given?

If yes, against whom?

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN

ATTACHMENT(S)

Are accident photos available for attachment? Was there any video captured by Car Camera? Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant Vehicle Colour

Vehicle Category

GBH9738E

Commercial vehicle

Accident report SN07217R000M

Page 2 of 15

Yes

18/05/1990

20/11/2015

+65-85695856

THE TOPIARY

797500

Yes

No

Clear

Dry

No

No

Yes

0

No

Yes

No

Bedok Division Headquarters

30 Bedok North Road Singapore 469676

(Phone) +65-18002440000

(Fax) +65-64443009

2

5 YEARS AND 8 MONTHS

THELUTFIRAZAK@GMAIL.COM

Hit and run / Vandalism / Damaged whilst parked

21 FERNVALE LANE #03-25

(Phone) +65-83633836

Indoor

No

No

Name of Driver	DENNY
Contact Number	
Contact Number Address	(Phone) +65-97891657
Address complement	
Postcode	1=1
Insurance Company Name	()
Nature Of Damage	·•
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1.00 1.00

NOME WOTOR SERVICE OF	ENTRE	Report Date & Start Line	27 07 2021	16.44
Report No. MT	D-O A <u>26/67/2021</u> France 16:00 hrs	Vehicle No SMN64K	Repeating Type	-

SKETCH PLAN

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
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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 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.
- 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)

t 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:
 - 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

27 07 21 16 44
Polic Apolder's Signature (Cate S Time

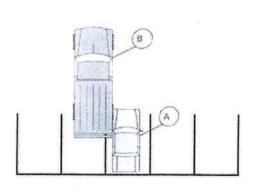
27 07 21 16 44

Driver's Signature (If driver is not the policyholder) - Date & Tene

Ganesh (\$993561) Customer Care Executive Motor Service Centre

Witnessed by Reporting Centre Peronne

SKETCH PLAN



OSCP OF PREMIER@KAKI BUKIT, 8 KAKI BUKIT AVE 4(LOT 22)

Vehicle A: SMX64K

Vehicle B: GBH9738E

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

My vehicle was stationary parked at the parking lot 22. After I went back home to fetch my wife, my wife told me there was damage sustained on front left passenger door. That's where I view back my car cam and noticed that vehicle B collided to my vehicle left portion. On the next day I managed to met the vehicle B driver to tell him on the incident but his not compliant to this incident even with video footage. No one was injured in this accident.

Declaration

I/We declare the foregoing particulars are true in every respect.

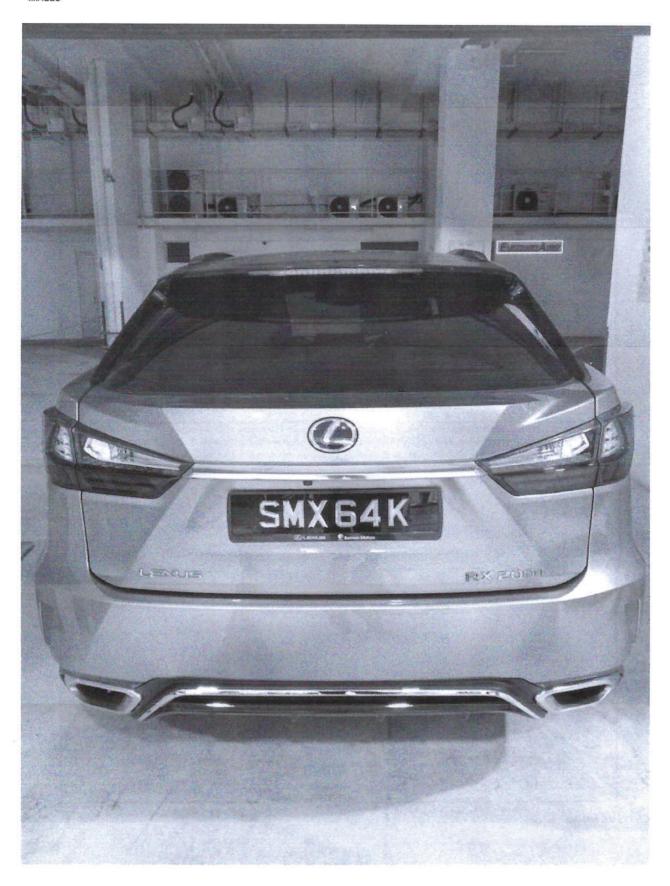
27-07-21 16-44

27 07 21 16:44

Driver's Signature (if dover is not the policyholder) | Date & Time

Customer Care Executive Motor Service Centre

Witnessed by Reporting Centre Personnel





















1 of 2

POLICE REPORT (NP299)

Police Station Of Origin Bedok Division HO 30 Bedok North Road SINGAPORE 469676 Tel No. 1800-2440000 Report No. G/20210727/7060

Date/Time Report Made 27/07/2021 18:35	Vide Re	port No.		Station Diary No.
Name Of Informant	Address	3		
MUHAMMAD LUTFI BIN ABDUL RAZAK	21 FER	NVALE LAI	NE #03-25 SINGA	PORE 797500
ID Type / ID No. NRIC NO / S9016181D	Contact Home/C	No.	Mobile: 83633836	
Nationality SINGAPORE CITIZEN	Email Address THELUTFIRAZAK@GMAIL.COM			
Occupation	Sex	Age	Date of Birth	Race
Motor vehicle mechanic	Male	31	18/05/1990	Indian
Institution/School Name	Language English			
Date/Time Of Incident 26/07/2021 16:00 - 26/07/2021 16:30	Location Of Incident 10 KAKI BUKIT AVENUE 4 PREMIER @ KAKI BUKIT SINGAPORE 415874			
Brief details.	UNION	VIVE 4150		

I am a business owner and I run a Vespa service workshop at Premier @ Kaki Bukit, unit #03-02. I arrive work as usual on the 26th of July 2021 and parked my car, a 2016 Lexus RX200t, plate number SMX64K, at the open carpark lot number 22 at 1030am. After finishing work at about 7pm, I went back to my car and drove off to Marina Bay Sands to fetch my wife. Upon entering my car, my wife asked what had happened to the car as there was a dent and a hole on the front passenger door of my car. I went out to have a look and realized that my vehicle was hit by someone else.

Signature Of Officer Recording The Report:	Signature Of Informant:
Not applicable	The identity of the person making this report has been authenticated by Singpass No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 27/07/2021 18:35
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	





12 19727-706G

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20210727/7060

There was no letter or note left on my car to notify me of the accident by any party. Upon reaching home. I checked my car camera and found the culprit to the incident. I have the video footage of the vehicle inlolved, GBH9738E.

The next day on 27th July 2021, I informed the security side of Premier @ Kaki Bukit building of the incident. They managed to get the owner of the vehicle to meet and try to mediate this issue. However, owner of the said vehicle is adamant that her vehicle did not reverse into mine even after showing the video footage to them. I am lodging this report to pursue this matter.

Person Name	MUHAMMAD LUTFI BIN AE	DUI RAZAK	
ID Type	NRIC NO	ID No	S9016181D
Gender	Male	Age	31
Race	Indian	Language	English
Occupation	Motor vehicle mechanic	Address	21 FERNVALE LANE #03-25 SINGAPORE 797500
Mobile No	83633836	Is Informant A Victim?	Yes

Signature Of Officer Recording The Report	Signature Of Informant:
Not applicable	The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time 27/07/2021 18:35
Officer In-Charge Of Case:	Classification Of Case
Authentication Stamp	