

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	10/08/2021 15:02 (SGT)
Date of Accident	08/08/2021 22:30 (SGT)
Exact Location of Accident	57 Anchorvale Rd, Singapore 544964
Additional Location Information	SENGKANG SPORTS COMPLEX
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMX5002G
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	AZHARI BIN HAMID
NRIC No	SXXXX206D
Email Address	WINSON_TINGWEI@HOTMAIL.COM
Mobile Phone No	(Phone) +65-96690164
Alternative Phone No	(Office) +65-96690164

VEHICLE PARTICULARS

Manufacturer	Subaru
Model	Impreza
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	1600

INSURANCE COMPANY

Name of Insurance Company	ECICS Limited
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	MPC21P00090400
Cover Note Number	-

DRIVER

Name of Driver	AZHARI BIN HAMID
NRIC No	SXXXX206D

Date Of Birth	21/11/1991
Occupation	Indoor
Date Of Driving Pass	04/05/2015
Driving experience	6 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96690164
Alt. Phone Number	(Office) +65-96690164
Email Address	WINSON_TINGWEI@HOTMAIL.COM
Address	BLK 27 TELOK BLANGAH WAY #05-1018
Address complement	-
Postcode	090027
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	Collided into Parked Vehicle
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 vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	NABILAH BINTE MANSOR
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Yishun North Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18008529999
Alt. Police Station Phone No	(Fax) +65-68522299
Police Station Address	31 Yishun Central Singapore 768827
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

ON THE DATE & TIME OF ACCIDENT 08/08/2021 AT 22.30PM. MY VEHICLE STATIONARY PARKED AT THE SENGKANG SPORTS CENTRE PARKING LOT NEAR MACDONALD. MY WIFE WAS SITTING INSIDE THE CAR AT FRONT PASSENGER SIT WAITING FOR ME. SUBSEQUENTLY I RECEIVED A CALL FROM MY WIFE SAYING THAT VEHICLE B " SMR 9589K " REVERSE HIS CAR INTO PARKING LOT BEHIND MY CAR AND COLLIDED ONTO MY REAR CAR PORTION AND DUE TO THE IMPACT OF COLLISION , MY WIFE PHONE HOLDING AT HER HAND WAS FLEW OFF AND HIT ON MY FRONT CAR DASHBOARD RADIO SCREEN AND THE RADIO SCREEN WAS CRACKED DAMAGED TOO. THERE IS NO INJURIES INVOLVED.

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	SMR9589K
Vehicle Manufacturer	Hyundai
Vehicle Model	Avante
Vehicle Variant	-
Vehicle Colour	Red
Vehicle Category	Private car
Name of Driver	AALI AKBARDEEN MOHAMED HISHAMUDDEEN
NRIC No	SXXXX820D
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**IMPORTANT NOTICE**

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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.


Policyholder's Signature / Date & Time


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


Witnessed by Reporting Centre Personnel

**Sketch Plan**

vehicle A SMX 5002G
vehicle B SMR 9589K



Describe Circumstances of the Accident

On the date & time of accident 08/08/2021 @ 22.30pm. My vehicle stationary parked at the seng kang Sport centre parking lot near woodfield. My wife was sitting inside the car at front passenger sit waiting for me. Subsequently I received a call from my wife saying that vehicle B "SMR 9589K" reverse his car into parking lot behind my car and collided onto my rear car portion and due to the impact of collision my wife phone holding at her hand was flew off and hit on my front car dashboard Radio Screen and the radio screen was cracked damaged too. There was no injuries involved.

Declaration

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


Witnessed by Reporting Centre Personnel





CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks Compensation) Act (Chapter 189)
 Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960
 Road Transport Act, 1987 (Malaysia)
 Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

**SGDRIVERS
 PROTECTOR PLAN**

MZ300
 COMPREHENSIVE
 ORIGINAL

CERTIFICATE NO: **MPC21P00090400**
 Agency Name: **SGDRIVERS PTE LTD**
 Agency Code: **A0000069**

Chassis No: **JF1GT3KC5HG006011**
 Engine No: **FB16Y664395**

1. Index Mark and Registration Number of Vehicle: **SMX5002G**

2. Name of Policyholder: **AZHARI BIN HAMID**

3. Period of Insurance (both dates inclusive): **10 May 2021 to 09 June 2022**

4. Persons or Classes of Persons entitled to drive

- a) The Policyholder and all Named Drivers declared under the policy
- b) Any other person who is driving on the Policyholder's order or with his permission.

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 reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

5. Limitations as to use

Use for social, domestic and pleasure purposes and for the Policyholder's business. The policy does not cover use for hire or reward, tuition, driving test, race, pace-making, reliability trial, speed-testing, 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.

6. EXCESS APPLICABLE

WINDSCREEN	SGD 100.00
SECTION I - INSURED/NAMED DRIVER	SGD 1,000.00
ADDITIONAL EXCESS:	
SECTION I - UNNAMED DRIVERS	SGD 500.00
SECTION I - AGE <27, AGE >70 OR DRIVING EXP <2 YEARS OLD	SGD 3,000.00

7. Hire Purchase Company: **IIL BANK**

Signed for and on behalf of ECICS Limited

AUTHORISED SIGNATORY

Important Notice:

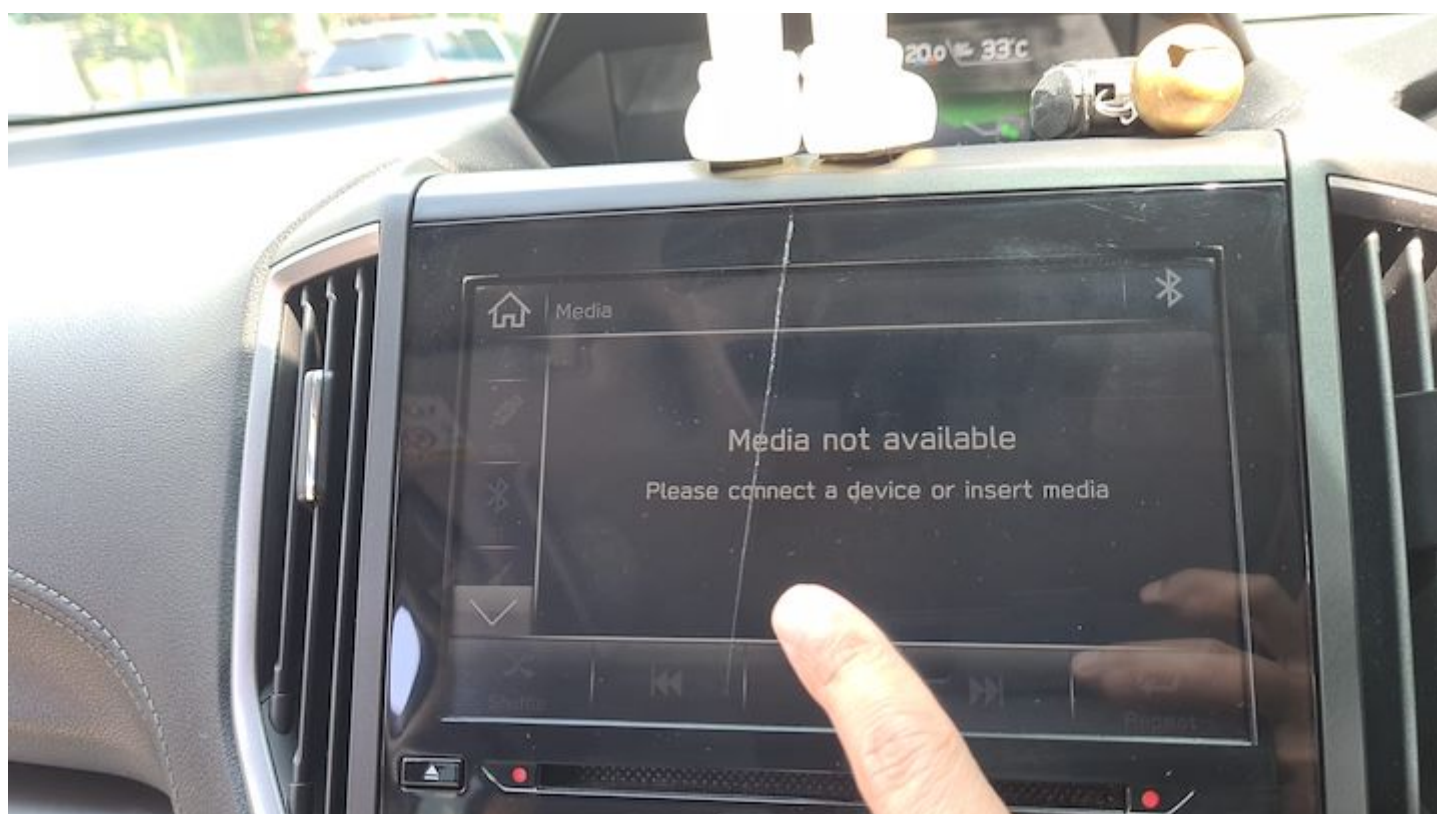
- i) Policyholders are hereby warned that it shall be unlawful for any person to use or cause or permit any other person to use a motor vehicle without a valid insurance under the Act.
- ii) On the sale of a motor vehicle, Policyholders must surrender all insurance papers issued including the Certificate of Insurance and the Policy to the insurance company. If the Certificate of Insurance has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189).
- iii) The Certificate of Insurance and the Policy will cease to be valid once the motor vehicle has been sold or transferred.
- iv) The Payment Before Cover Warranty or Premium Payment Warranty found in the Policy must be complied with otherwise there would be no liability under the Policy and Certificate of Insurance.













**SINGAPORE
POLICE FORCE**



L/20210809/2000

1 of 2

POLICE REPORT (NP299)

Report No. L/20210809/2000

Police Station Of Origin
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

Date/Time Report Made 09/08/2021 00:12	Vide Report No.	Station Diary No. 4
Name Of Informant AZHARI BIN HAMID	Address APT BLK 27 TELOK BLANGAH WAY #05-1018 SINGAPORE 090027	
ID Type / ID No. NRIC NO / S9143206D	Contact No. Home/Office	Mobile 96690164
Nationality SINGAPORE CITIZEN	Email Address	
Occupation CIVIL SERVANT	Sex Male	Age 29
Institution/School Name	Date of Birth 21/11/1991	Race Boyanese
Date/Time Of Incident 08/08/2021 22:30 - 08/08/2021 22:30	Location Of Incident 57 ANCHORVALE ROAD SENGKANG SPORTS COMPLEX SINGAPORE 544964 . Near Mcdonalds at parking lot	

Brief details.

On the 08/08/2021 @2230hrs I parked my vehicle (SMX5002G, SUBARI Impreza white in colour) at the Sengkang sport centre parking lot near Mcdonalds. My wife (Nabilah Binte Mansor, S9143925E) who is 5 months pregnant was waiting for me. She was sitting at the passenger sit.

Subsequently I received a call from my wife saying that someone had rear ended our car. So I went out

Signature Of Officer Recording The Report: L / Staff Sgt GHAZALI BIN IBRAHIM	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 09/08/2021 00:12
Officer In-Charge Of Case: L / Woodlands Police Divisional Investigation Branch / Insp WONG XIAO HUI Contact No.: 63639999	Classification Of Case:
Authentication Stamp	





**SINGAPORE
POLICE FORCE**



L/20210809/2000

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. L/20210809/2000

to checked. I took video of the damages of both vehicles. My vehicles suffered a small dent on the left rear bumper. I managed to exchange particulars. The other vehicle involved (SMR9589K), Driver (Aali Akbardeen Mohamed Hishamuddeen, S848420D hp: 81612259)

As of now, nobody was injured. This is the first time that this happened. I do not know the driver personally. No government property was damaged. My wife will not be seeing the doctor today. However will be seeing the doctor probably next week. I am lodging this report for record purpose.

Signature Of Officer Recording The Report:

L / Staff Sgt GHAZALI BIN IBRAHIM

Signature Of Informant:

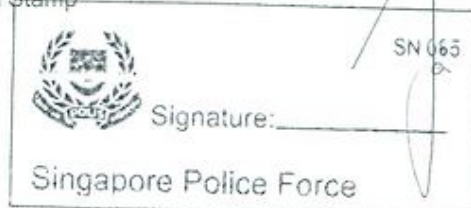
Signature Of Interpreter:
Not applicable

Date/Time:
09/08/2021 00:12

Officer In-Charge Of Case:
L / Woodlands Police Divisional Investigation Branch /
Insp WONG XIAO HUI
Contact No.: 63639999

Classification Of Case:

Authentication Stamp



SN 065