

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	21/09/2021 17:06 (SGT)
Date of Accident	17/09/2021 14:45 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	Open space carpark behind Blks 537/538 Bedok North Street 3
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLG9097H
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	Muhammad Faisal Bin Ali
NRIC No	SXXXX310E
Email Address	fais_1811@hotmail.com
Mobile Phone No	(Phone) +65-94777932
Alternative Phone No	+65-94777932

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Corolla Altis
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	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5111488482-01
Cover Note Number	-

DRIVER

Name of Driver	Muhammad Faisal Bin Ali
NRIC No	SXXXX310E

Date Of Birth	18/11/1990
Occupation	Indoor
Date Of Driving Pass	21/01/2013
Driving experience	8 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94777932
Alt. Phone Number	+65-94777932
Email Address	fais_1811@hotmail.com
Address	Blk 762 Pasir Ris Street 71 #06-224
Address complement	-
Postcode	510762
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)	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	Bedok North Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002449999
Alt. Police Station Phone No	(Fax) +65-62447258
Police Station Address	30 Bedok North Road Singapore 469676
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

See attached sketch plan and police report no: T/20210917/2106

(Third party reversed and hit onto insured vehicle)

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	To forward to own insurers
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1


Vehicle Registration Number	SGS3702E
Vehicle Manufacturer	Honda
Vehicle Model	-

Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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)	-

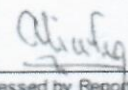
SKETCH PLAN

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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.

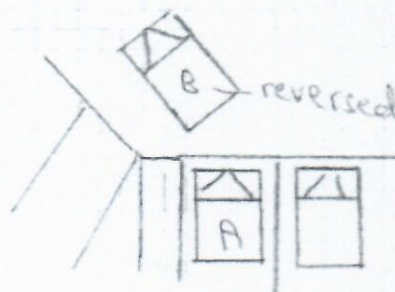
4.25pm
21/9/21

Policyholder's Signature / Date & Time

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


Witnessed by Reporting Centre Personnel

Sketch Plan

A) SLG9097H
B) SGS3702E



Describe Circumstances of the Accident

See attached police report no T/20210917/2106

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



SINGAPORE
POLICE FORCE



T/20210917/2106

Police Station Of Origin
Bedok North N.P.C
30 Bedok North Road SINGAPORE 459678
Tel No. 1300-2449999

1 of 3

Report No. T/20210917/2106

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made 17/09/2021 18:24	Video Report No	Station Diary No 102
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Informant's Particulars

Name of Informant: MUHAMMAD FAISAL BIN ALI			Address: APT BLK 762 PASIR RIS STREET 71 #06-224 SINGAPORE 510762	
ID Type / ID No.: NRIC NO / S9043310E			Contact No.: Home/Office: Mobile: 9477 7932	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 30	Date of Birth: 18/11/1990	Type of Informant: Driver	
Race: Malay			Language: English	Institution / School Name:
Occupation: SMRT TECHNICIAN			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: 17/09/2021 14:45	Type of Location: Car Park
Location: BEDOK NORTH STREET 3			
Weather: Clear	Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way	Traffic Control: Not Controlled	Traffic Volume: No Traffic	
Type of Collision: Moving Vehicle Against - Parked Vehicle			Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGS3702E	Car	HONDA		Silver		0
SLG9097H	Car	TOYOTA	COROLLA ALTIS 1.6 AUTO	Silver	Slightly Damaged	0

Details of Vehicle Insurance

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



T/20210917/2106

Police Station Of Origin
Bedok North N.P.C.
30 Bedok North Road SINGAPORE 459675
Tel No 1800-2449999

Report No. T/20210917/2106

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLG9097H	NTUC Income Insurance Co-Operative Limited	5111488482-01	04/11/2020	03/11/2021

Brief Details.

On 17/09/2021 at about 1420hrs, I parked my silver Toyota car bearing registration number SLG 9097 H at the open-spaced carpark behind Blk 538 Bedok North Street 3 market and Blk 537 Bedok North Street 3. I left my car to go to the hawker centre. Upon returning to my car, I discovered some damages at the front bumper of my car. An unknown male Chinese in his 50s approached me to inform that another car had reversed and hit onto the front bumper of my car. I then checked on my in-car camera and it last recorded one silver Honda car bearing registration number SGS 3702 E reversing towards my car and then my camera suddenly stopped recording. I went around the carpark and found the said Honda car parked a few lots away at the same carpark. It had some damages to its rear bumper. I had taken photograph of the rear bumper for my own record. I tried waiting for the driver of the said Honda car but it left without me noticing it leaving.



SINGAPORE
POLICE FORCE



T/20210917/2106

Police Station Of Origin:
Bedok North N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

Report No: T/20210917/2106

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
G/
SI NADIYAH BINTE EASA

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
17/09/2021 18:24

Officer In Charge Of Case:
TP / HRT /
SI KALESWARI PALANI
Contact No.: 65476902

Classification Of Case:

Authentication Stamp
NP168