

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	08/10/2021 13:22 (SGT)
Date of Accident	07/10/2021 19:50 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	SOON LEE STREET
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBE8971U
-----------------------------	----------

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	HUMBLE DELIVERY SERVICES
Company Reg No	53404298L
Email Address	muhdjasni07@gmail.com
Mobile Phone No	(Phone) +65-89229091
Alternative Phone No	+65-89229091

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	Commercial vehicle
Transmission	Manual
CC	2989

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5117218439-01
Cover Note Number	25/04/2021 - 24/04/2022

DRIVER

Name of Driver	MUHAMMAD JASNI BIN MOHD MDET
NRIC No	S8902621J

Date Of Birth	28/01/1989
Occupation	Outdoor
Date Of Driving Pass	26/04/2013
Driving experience	8 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-89229091
Alt. Phone Number	-
Email Address	muhdjasni07@gmail.com
Address	BLK 97 #04-188 WHAMPOA DRIVE
Address complement	-
Postcode	320097
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	SOLE PROPRIETOR
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	0
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	Hougang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004890999
Alt. Police Station Phone No	(Fax) +65-63128989
Police Station Address	60 Hougang Ave 9 Singapore 538775
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN

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	VIDEO SIZE HUGE TO UPLOAD
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YQ2726R
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-

Category	Commercial vehicle
Name of Driver	UNKNOWN
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	MUHAMMAD JASNI BIN MOHD MDET
Gender	Male
Phone No	(Phone) +65-89229091
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	GBE8971U
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

INCOME MOTOR SERVICE CENTRE

Report Date & Start Time: 08/10/2021 13:06

Report No: MT

D.O.A: 07/10/2021
Time: 19:50 hrs

Vehicle No: GBES971U Reporting 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.
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. 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.
7. 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)**

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.
- (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.



08/10/21 / 13:06

Policyholder's Signature / Date & Time

[Signature]

08/10/21 / 13:06

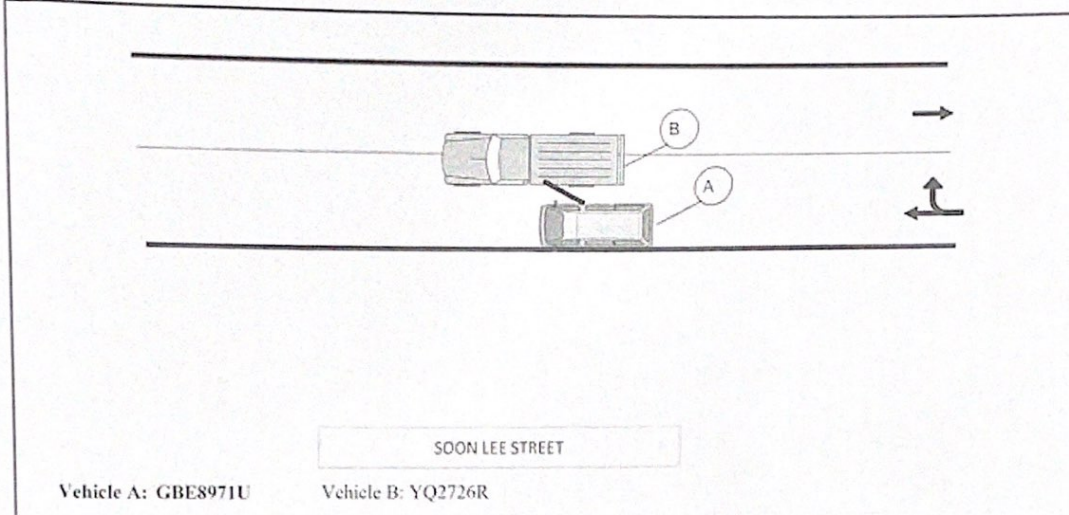
Driver's Signature (If driver is not the policyholder) / Date & Time

[Signature]

Ganesh (S993561)
Customer Care Executive
Motor Service Centre

Witnessed by Reporting Centre Personnel

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report No. T/20211007/2117

Declaration

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



08/10/21 / 13:06

Policyholder's Signature / Date & Time

08/10/21 / 13:06

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

Ganesh (S993561)
Customer Care Executive
Motor Service Centre

Witnessed by Reporting Centre Personnel





IMAGES #3



IES #4

N/2017/01530
2015002135

Income





ES #6









SINGAPORE POLICE FORCE



T/20211007/2117

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

1 of 3

Report No. T/20211007/2117 ✓

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 07/10/2021 23:07	Vide Report No.:	Station Diary No.: 126
--	------------------	---------------------------

Informant's Particulars

Name of Informant: MUHAMMAD JASNI BIN MOHD MDET			Address: APT BLK 97 WHAMPOA DRIVE #04-188 SINGAPORE 320097	
ID Type / ID No.: NRIC NO / S8902621J			Contact No.: Home/Office: Mobile: 89229091	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 32	Date of Birth: 28/01/1989	Type of Informant: Driver	
Race: Boyanese			Language: English	Institution / School Name:
Occupation: Driver			Driving Licence Information: Class: 2B,3 Date of Expiry:	

General Information of the Accident

General Information of the Accident				Type of Location:
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 07/10/2021 19:50	Straight Road
Location: SOON LEE STREET				
Weather: Clear	Road Surface: Dry	Road Speed Limit:		
Traffic Flow: Two Way	Traffic Control: Not Controlled	Traffic Volume: Moderate		
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction	Anyone conveyed by ambulance: No			

HOUGANG NPC
60 HOUGANG AVE
SINGAPORE 538775

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBE8971U	Van	TOYOTA	HIACE	White <i>Blue</i>	Slightly Damaged	0
YQ2726R	Lorry	MITSUBISHI		White	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
GBE8971U	NTUC Income Insurance Co-Operative	KDH2015020874	25/04/2021	24/04/2022



**SINGAPORE
POLICE FORCE**



T/20211007/2117

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

2 of 3

Report No. T/20211007/2117

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	MUHAMMAD JASNI BIN MOHD MDET	ID No.	S8902621J
Related Vehicle	GBE8971U (Van)	Contact No.	89229091
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 07/10/2021 at about 1952hrs, I was along Soon Lee Street (towards the direction of Soon Lee Road). I parked my van along the side of the said road because my front passenger side tire had been punctured. I switched on my hazard light. A White lorry YQ2726R drove towards my direction. Suddenly, the lorry's storage door (passenger side) swing out and caused damage to my driver side mirror and the driver side doors. During the accident, I was standing on road (to the right of my vehicle). When I saw from a far the door was about to swing and hit my car, I tried to use my left hand to stop the swing but I could not stop the force of the door's swing. I suffered some discomfort on my left hand but have yet to seek any medical assistance. No police or ambulance came to the scene.

As a result, the side mirror was damaged and the doors suffered scratches and dents. I shouted out to the lorry but to no avail. The lorry did not stop and went towards the direction of Soon Lee Road.

On the same day, shortly, I checked my vehicle CCTV and it captured the accident.



**SINGAPORE
POLICE FORCE**



T/20211007/2117

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

3 of 3

Report No. T/20211007/2117

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

F /

Sr Staff Sgt MUHAMMAD
SALAMUN B AHMAD

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
07/10/2021 23:07

Officer In Charge Of Case:

TP / HRT /

SSI KASMAWATI BTE SAMIAN

Contact No.: 65476368 ✓



Classification Of Case:

SN 033

Authentication Stamp
NP168

Singapore Police Force