

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	09/02/2022 15:53 (SGT)
Date of Accident	08/02/2022 14:25 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	TERMINAL 1 CARPARK B3 LOT 146
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SCN948G
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	MUHAMMAD DANIAL ASMALI
NRIC No	SXXXX025I
Email Address	danialasmali@gmail.com
Mobile Phone No	(Phone) +65-97217070
Alternative Phone No	+65-97217070

VEHICLE PARTICULARS

Manufacturer	Mercedes
Model	C180k
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	1597

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMPCSNW00172242100
Cover Note Number	-

DRIVER

Name of Driver	MUHAMMAD DANIAL ASMALI
NRIC No	SXXXX025I

Date Of Birth	29/11/1989
Occupation	Indoor
Date Of Driving Pass	21/09/2015
Driving experience	6 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97217070
Alt. Phone Number	+65-97217070
Email Address	danialasmali@gmail.com
Address	BLK 172B EDGEDALE PLAINS
Address complement	#05-488
Postcode	822172
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	Collision - Head to Rear
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)	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	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE POLICE REPORT:T.20220209/7010

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	WITH WORKSHOP
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBF2469M
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-

Vehicle Category	Commercial vehicle
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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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.

[Signature]

Policyholder's Signature / Date & Time

[Signature]

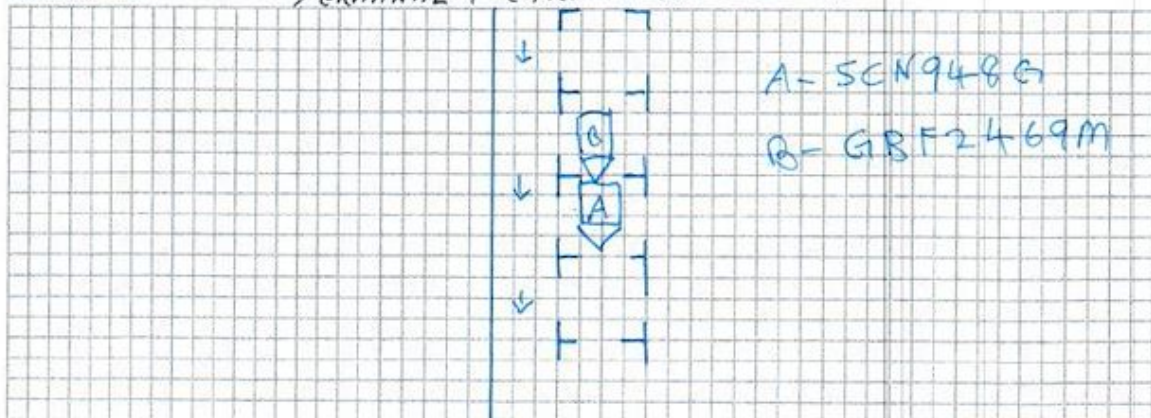
Driver's Signature (If driver is not the policyholder) / Date & Time

[Signature] 09/02/22

Witnessed by Reporting Centre Personnel

Sketch Plan

TERMINAL 1 CARPARK B3 LOT 146



Describe Circumstances of the Accident

Refer to police report

T/20220209/7010

Declaration

We declare the foregoing particulars are true in every respect.

We declare the foregoing

Policyholder's Signature / Date &
Time:



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

2/ym 09/02/22

Witnessed by Reporting Centre
Personnel



**SINGAPORE
POLICE FORCE**



T/20220209/7010

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20220209/7010

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Vehicle Owner			
Name	MUHAMMAD DANIAL ASMALI	ID No.	S89430251
Related Vehicle	NIL	Contact No.	97217070
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

With reference to report number T/20220208/2126, I would like to state that I went home and reviewed my dash cam footage and found out that vehicle GBF2469M has collided into my rear at 2:25pm at Changi Airport Terminal 1 Carpark B3 Lot 146 while he is leaving the lot behind my vehicle.



















SINGAPORE POLICE FORCE



T/20220209/7010

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20220209/7010

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 09/02/2022 14:00		Vide Report No.: T/20220208/2126		Station Diary No.:	
Informant's Particulars					
Name of Informant: MUHAMMAD DANIAL ASMALI			Address: 172B EDGEDALE PLAINS #05-488 SINGAPORE 822172		
ID Type / ID No.: NRIC NO / S8943025I			Contact No.: Home/Office: Mobile: 97217070		
Nationality: SINGAPORE CITIZEN			Email: DANIALASMALI@GMAIL.COM		
Sex: Male	Age: 32	Date of Birth: 29/11/1989	Type of Informant: Vehicle Owner		
Race: Javanese			Language: English		Institution / School Name:
Occupation: Concierge			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: 08/02/2022 14:25	Type of Location: Car Park
Location: AIRPORT BOULEVARD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of
GBF2469M	Van					0
SCN948G	Car				Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



T/20220209/7010

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 3

Report No. T/20220209/7010

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Vehicle Owner			
Name	MUHAMMAD DANIAL ASMALI	ID No.	S89430251
Related Vehicle	NIL	Contact No.	97217070
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

With reference to report number T/20220208/2126, I would like to state that I went home and reviewed my dash cam footage and found out that vehicle GBF2469M has collided into my rear at 2:25pm at Changi Airport Terminal 1 Carpark B3 Lot 146 while he is leaving the lot behind my vehicle.



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POLICE FORCE**

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Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000



T/20220209/7010

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Report No. T/20220209/7010

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
IRMAN BIN MOHAMAD SAID
Contact No.: 65476145

NP168

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

Date/Time:
09/02/2022 14:00

Classification Of Case: