

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 27/12/2021 16:00 (SGT)
Date of Accident 22/12/2021 11:00 (SGT)
Exact Location of Accident Ang Mo Kio Ave 10, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBJ9954L

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner COSMOPOLITAN ENGINEERING SERVICES PTE LTD
Company Reg No 198401891K
Email Address coslease@cosmopolitan.com.sg
Mobile Phone No (Phone) +65-64413961
Alternative Phone No (Office) +65-64413961

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 - Reporting only
Vehicle Category Commercial vehicle
Transmission Manual
CC 3000

INSURANCE COMPANY

Name of Insurance Company QBE Insurance (Singapore) Pte Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 8-V0024238-MVA-R002
Cover Note Number -

DRIVER

Name of Driver SITI ZALEHA BINTE FADAL
NRIC No S7439789A

Date Of Birth	17/12/1974
Occupation	Outdoor
Date Of Driving Pass	25/04/2015
Driving experience	6 YEARS AND 8 MONTHS
Gender	Female
Mobile Number	(Phone) +65-88343229
Alt. Phone Number	-
Email Address	coslease@cosmopolitan.com.sg
Address	BLK 466 ANG MO KIO AVE 10 #11-1028
Address complement	-
Postcode	560466
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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 - Major/Minor Rd
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	Tanah Merah Neighbourhood Police Post
Police Station Phone No	(Phone) +65-18004499999
Alt. Police Station Phone No	(Fax) +65-62447251
Police Station Address	Blk 51 New Upper Changi Road #01-1514 Singapore 461051
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT: T/20211222/2096.

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	SHC1048X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi

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

SKETCH PLAN



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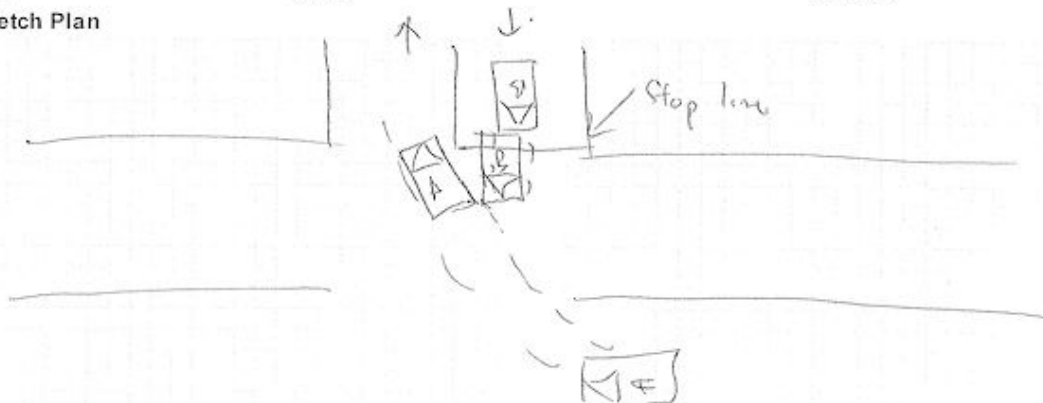
8. Consent under the Personal Data Protection Act (PDPA)

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.

 Policyholder's Signature / Date & Time	 Driver's Signature (If driver is not the policyholder) / Date & Time	_____ Witnessed by Reporting Centre Personnel
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Sketch Plan



Describe Circumstances of the Accident

Refer to police report.

Declaration

I/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/20211222/2096

Police Station Of Origin:
Tanah Merah NPP
51 New Upper Changi Road #01-1514
SINGAPORE 461051
Tel No: 1800-4499999

1 of 3

Report No. T/20211222/2096

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 22/12/2021 21:03		Vide Report No.:		Station Diary No.: 21
Informant's Particulars				
Name of Informant: SITI ZALEHA BINTE FADAL		Address: APT BLK 466 ANG MO KIO AVENUE 10 #11-1028 SINGAPORE 560466		
ID Type / ID No.: NRIC NO / S7439789A		Contact No.: Home/Office: Mobile: 88343229		
Nationality: SINGAPORE CITIZEN		Email:		
Sex: Female	Age: 47	Date of Birth: 17/12/1974	Type of Informant: Driver	
Race: Boyanese		Language: English	Institution / School Name:	
Occupation: DELIVERY		Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 22/12/2021 11:00	Type of Location: Car Park
Location: ANG MO KIO AVENUE 10				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Not Controlled	Traffic Volume: No Traffic	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBJ9954L	Van				Slightly Damaged	0
SHC1048X	Car				Slightly Damaged	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20211222/2096

Police Station Of Origin:
Tanah Merah NPP
51 New Upper Changi Road #01-1514
SINGAPORE 461051
Tel No: 1800-4499999

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Report No. T/20211222/2096

CONTINUATION OF REPORT

Driver			
Name	SITI ZALEHA BINTE FADAL		ID No. S7439789A
Related Vehicle	GBJ9954L (Van)		Contact No. 88343229
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	Unknown		ID No. NIL
Related Vehicle	SHC1048X (Car)		Contact No. NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the above date and time while I was at the carpark of Blk 467 Ang Mo Kio Avenue 10, after entering the carpark I was about to turn right when there is a taxi(SHX1048X) in front of me turning left to exit. However while turning, the taxi made a wide turn and hit onto the right side of my company van. We both then got down our vehicle and exchange our particulars as he wishes to settle it privately which I agreed. There is an in-car camera in my van however it wasn't switch on at the time the accident happened. I am unsure if there is any in-car camera inside the taxi. After which I told my company about the matter and they informed me to lodge a police report to claim insurance.



SINGAPORE
POLICE FORCE



T/20211222/2096

Police Station Of Origin:
Tanah Merah NPP
51 New Upper Changi Road #01-1514
SINGAPORE 461051
Tel No: 1800-4499999

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Report No. T/20211222/2096

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 / Sgt 1 NUR ISKANDAR BIN AHMAD KHUSAIRI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 22/12/2021 21:03
Officer In Charge Of Case: TP / GIA / DSP (2) YIP YEW SENG NELSON Contact No.: 65476182	Classification Of Case:
Authentication Stamp NP168	 SIGNATURE

QBE Insurance (Singapore) Pte Ltd

Part of QBE Insurance Group - Unique Entity No. 158401363C

1 Wallich Street, #35-01 Guoco Tower, Singapore 078881

Tel: 65-6224 6633 Fax: 65-6533 3270

GST Registration No.: M200644018

QBE**Certificate of Insurance**

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULE, 1960
 ROAD TRANSPORT ACT, 1987 (MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

- Certificate No. **8-V0024238-MVA-R002** Account Name **PANA HARRISON (ASIA) PTE LTD** MCI Type **MZ400**
- 1 Index Mark and Registration Number of Vehicle or Chassis No: **GBJ9954L**
 - 2 Name of Policyholder **COSMOPOLITAN ENGINEERING SERVICES PTE LTD**
 - 3 Effective date of Commencement of Insurance for the purpose of the Regulations **31/10/2021**
 - 4 Date of Expiry **30/10/2022**
 - 5 Person or Classes of Person entitled to drive*
Any person who is driving on the Policyholder's order or with their 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 the driving the Motor Vehicle
 And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage
 - 6 Limitations as to use*
Use for the carriage of passengers or goods in connection with the Policyholder's business.
Use for social domestic and pleasure purposes and business purposes of any person to whom the vehicle is hired.
The Policy does not cover:-
 (1) Use for racing pace-making reliability trial or speed testing.
 (2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle
 (3) Use for the carriage of passengers for hire or reward by any person to whom the vehicle is hired.
 - 7 Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third Party Risk and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Malaysia) are not to be included under these headings

Hire Purchase : DBS BANK LTD

QBE Insurance (Singapore) Pte Ltd

Date of Issue: 27/09/2021


 Authorized Signature