

# 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 ..... 22/04/2022 16:49 (SGT)  
Date of Accident ..... 21/04/2022 21:20 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... TAMPINES AVE 5 TOWARDS PIE  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SMA4439H

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... HUA HONG PTE. LTD.  
Company Reg No ..... 200900309M  
Email Address ..... claims@huahong.com.sg  
Mobile Phone No ..... (Phone) +65-81182320  
Alternative Phone No ..... (Office) +65-66619687

### VEHICLE PARTICULARS

Manufacturer ..... Toyota  
Model ..... C-hr  
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 hire  
Transmission ..... Auto  
CC ..... 1800

### INSURANCE COMPANY

Name of Insurance Company ..... NTUC Income Insurance Co-operative Ltd  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... 5109921641-03-000063  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... MOHAMMAD SYAKIR BIN MOHAMMAD JUNID  
NRIC No ..... S9120731A

Date Of Birth .....	17/06/1991
Occupation .....	Outdoor
Date Of Driving Pass .....	24/05/2017
Driving experience .....	4 YEARS AND 11 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-87497534
Alt. Phone Number .....	-
Email Address .....	TYSONZARA64@GMAIL.COM
Address .....	BLK 326B SUMANG WALK #10-978
Address complement .....	-
Postcode .....	822326
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 .....	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) .....	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### PASSENGER 1

Name .....	Passenger
Gender .....	Female

#### 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 / POLICE REPORT

#### 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 .....	FILE SIZE TOO BIG TO BE UPLOADED
Was there any audio recorded? .....	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SMK2100U
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Vehicle Manufacturer .....	BMW
Vehicle Model .....	520i
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	UNKNOWN MALE CHINESE
Contact Number .....	-
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	1

### INJURED PERSONS DETAILS

#### INJURED 1

Name of injured person .....	MOHAMMAD SYAKIR BIN MOHAMMAD JUNID
Gender .....	Male
Phone No .....	-
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	-
Injured person in which vehicle? .....	SMA4439H
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No

SKETCH PLANIMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
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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.

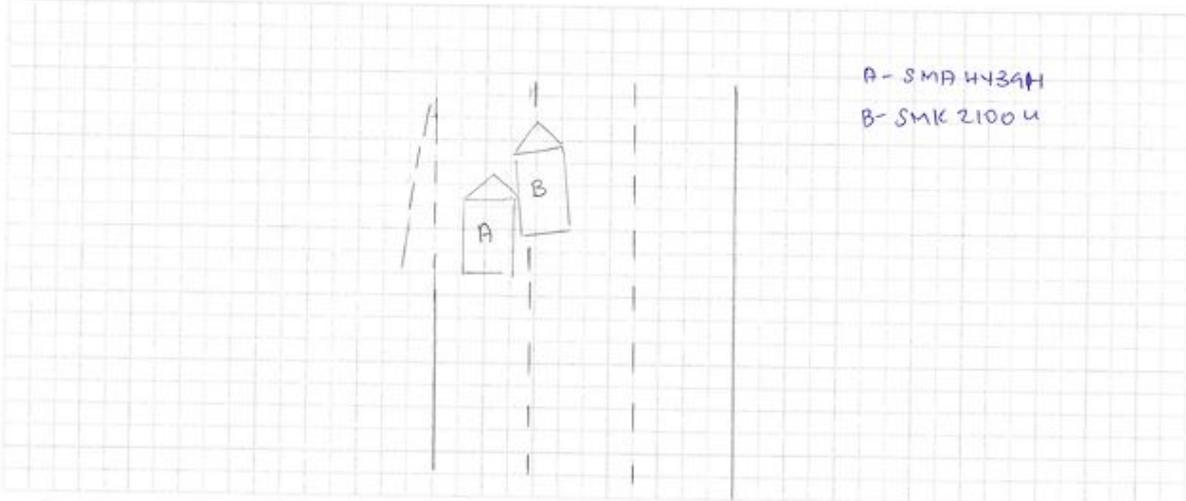


Policyholder's Signature  
Date & Time:

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

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Accident Date & Time : 21.04.2022 @ 21:30hrs
Accident Location : Tampines Ave 5 towards PIE
REFER POLICE REPORT T/20220422/2006
<input type="checkbox"/> Reporting Only <input type="checkbox"/> Own Damage <input checked="" type="checkbox"/> Third Party <input type="checkbox"/> Claim at other workshop (OD/TP)

DECLARATION

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



**\* IMPORTANT NOTE:**  
 You had been advised by the workshop that in the event that you wish to claim against your own policy (Own Damage Claim), there is a **FOURTEEN (14) days** clause whereby the claim must be made within the stipulated timeframe from the day of occurrence.

Policyholder's Signature  
 Date & Time:

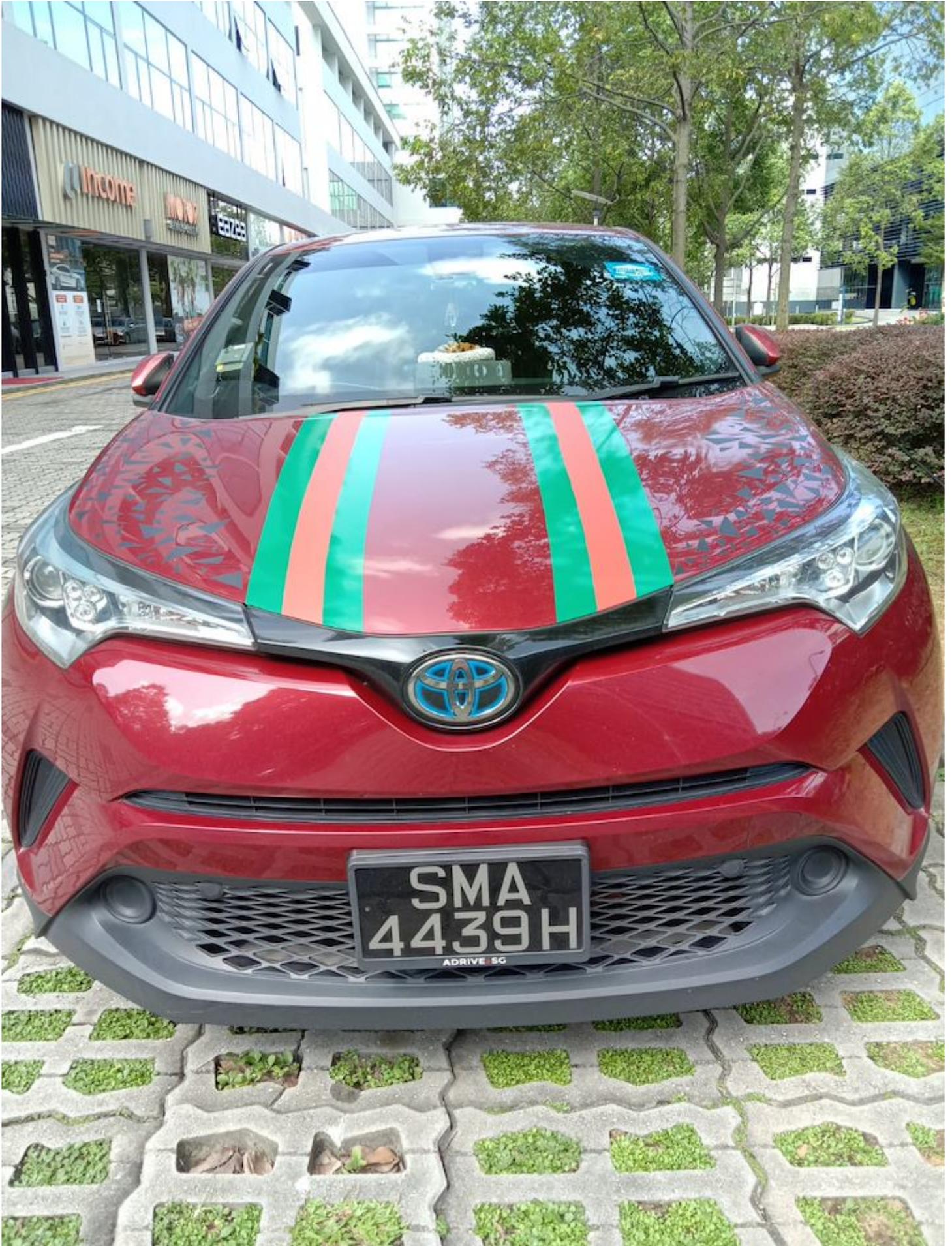
*Sj*

Driver's Signature  
 (if driver is not the policyholder)  
 Date & Time:

Reporting Centre Personnel's Signature  
 Name:  
 NRIC/FIN No.:












**SINGAPORE  
POLICE FORCE**


T/20220422/2006

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

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Report No. T/20220422/2006

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 22/04/2022 01:28	Vide Report No.:	Station Diary No.: 11
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Informant's Particulars			
Name of Informant: MOHAMMAD SYAKIR BIN MOHAMMAD JUNID		Address: APT BLK 326B SUMANG WALK #10-978 SINGAPORE 822326	
ID Type / ID No.: NRIC NO / S9120731A		Contact No.: Home/Office:                      Mobile: 87497534	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 30	Date of Birth: 17/06/1991	Type of Informant: Driver
Race: Malay		Language:	Institution / School Name:
Occupation: GRAB DRIVER		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: 21/04/2022 21:20	Type of Location: Straight Road
Location:  TAMPINES AVENUE 5				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SMA4439H	Car	TOYOTA	C-HR HYBRID 1.8S CVT	Red	Slightly Damaged	1
SMK2100U	Car	BMW	520I LED NAV	White		0



SINGAPORE  
POLICE FORCE



T/20220422/2006

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

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Report No. T/20220422/2006

CONTINUATION OF REPORT

**Brief Details.**

On 21/04/2022 at about 2120hrs, I was driving (Vehicle registration no: SMA4439H) along Tampines Avenue 5 towards PIE, on the most left lane, when a vehicle (Vehicle registration no: SMK2100U) cut across 2 lanes from my right and tried to overtake me in the lane I am travelling. Vehicle SMK2100U was driving very closely to my vehicle to which I honked at him. He continued driving closely and the left back passenger door of his vehicle, grazed on the front right bumper of my vehicle. I then honked at him to stop and managed to overtake him and we both stopped at the roadside with my hazard light on. Another vehicle who witnessed the incident also stopped in front of my vehicle to assist.

After alighting from my vehicle to talk to the driver of SMK2100U, he did not alight from his vehicle and he immediately sped off. I managed to follow him and gestured him to stop however he ignored, to which I did not continue to attempt to stop him. I would also like to state that I have a car dash-cam footage of the incident. There are deep scratches on the front right bumper of my vehicle from this incident. I am unsure of the cost of the damages.



**SINGAPORE  
POLICE FORCE**



T/20220422/2006

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

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Report No. T/20220422/2006

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 / Other SITI AISYAH UMAIRAH BINTE MOHAMAD MOKHTAR	
Signature Of Interpreter: Not applicable	
Officer In Charge Of Case: TP / HRT / SR STAFF SGT NEO ZHI YUAN Contact No.: 65476079	

Signature Of Informant:	
Date/Time: 22/04/2022 01:28	
Classification Of Case:	

NP168

