

SP28

SN07225K000C / NTUC Income Insurance Co-operative Ltd
ENTRY DATE & TIME: 20/05/2022 16:33 (SGT)
SUBMITTED BY: Louis Lim
VERSION: 1 (20/05/2022 16:33 (SGT))

Your NCD will be affected due to late reporting

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	20/05/2022 16:33 (SGT)
Date of Accident	17/05/2022 17:50 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	UBI AVE 3
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number **SLL6148M**

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	ERNI BINTE MOHAMED HAMZAH
NRIC No	S8126622J
Email Address	ERNI_SERI@HOTMAIL.COM
Mobile Phone No	(Phone) +65-87486522
Alternative Phone No	+65-87486522

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Vezel
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	1500

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5123363598
Cover Note Number	-

DRIVER

Name of Driver	ABDUL SAMAD BIN RAHIM
NRIC No	S8007775J

Date Of Birth	25/03/1980
Occupation	Indoor
Date Of Driving Pass	16/08/2002
Driving experience	19 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-87482387
Alt. Phone Number	-
Email Address	SAMAD_DANISH@HOTMAIL.COM
Address	BLK 469 #15-51 ADMIRALTY DRIVE
Address complement	-
Postcode	750469
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	3
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	NUR SYAHIDAH BINTE SUPARJO
Gender	Female

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

REFER TO POLICE REPORT

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	SKR5385G
Vehicle Manufacturer	-

Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	MR JEFF
Contact Number	(Phone) +65-91088456
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMA3317H
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	MR TAN
Contact Number	(Phone) +65-91011610
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	ABDUL SAMAD BIN RAHIM
Gender	Male
Phone No	(Phone) +65-87482387
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	42
Injuries Sustained	RIGHT SHOULDER PAIN AND RIGHT BACK PAIN
Injured person in which vehicle?	SLL6148M
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 2

Name of injured person	NUR SYAHIDAH BINTE SUPARJO
Gender	Female
Phone No	(Phone) +65-88184313
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	24
Injuries Sustained	LEFT SHOULDER PAIN AND HEAD PAIN
Injured person in which vehicle?	SLL6148M
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN**IMPORTANT NOTICE**

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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: 20/05/2022
16:30

Reporting Centre Personnel's Signature
Name: Louis Lim
NRIC/FIN No.: S994220

SKETCH PLAN

A : SLL6148M

B : SKR5385G

C : SMA3317H

REFER TO ATTACHED PICTURE

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

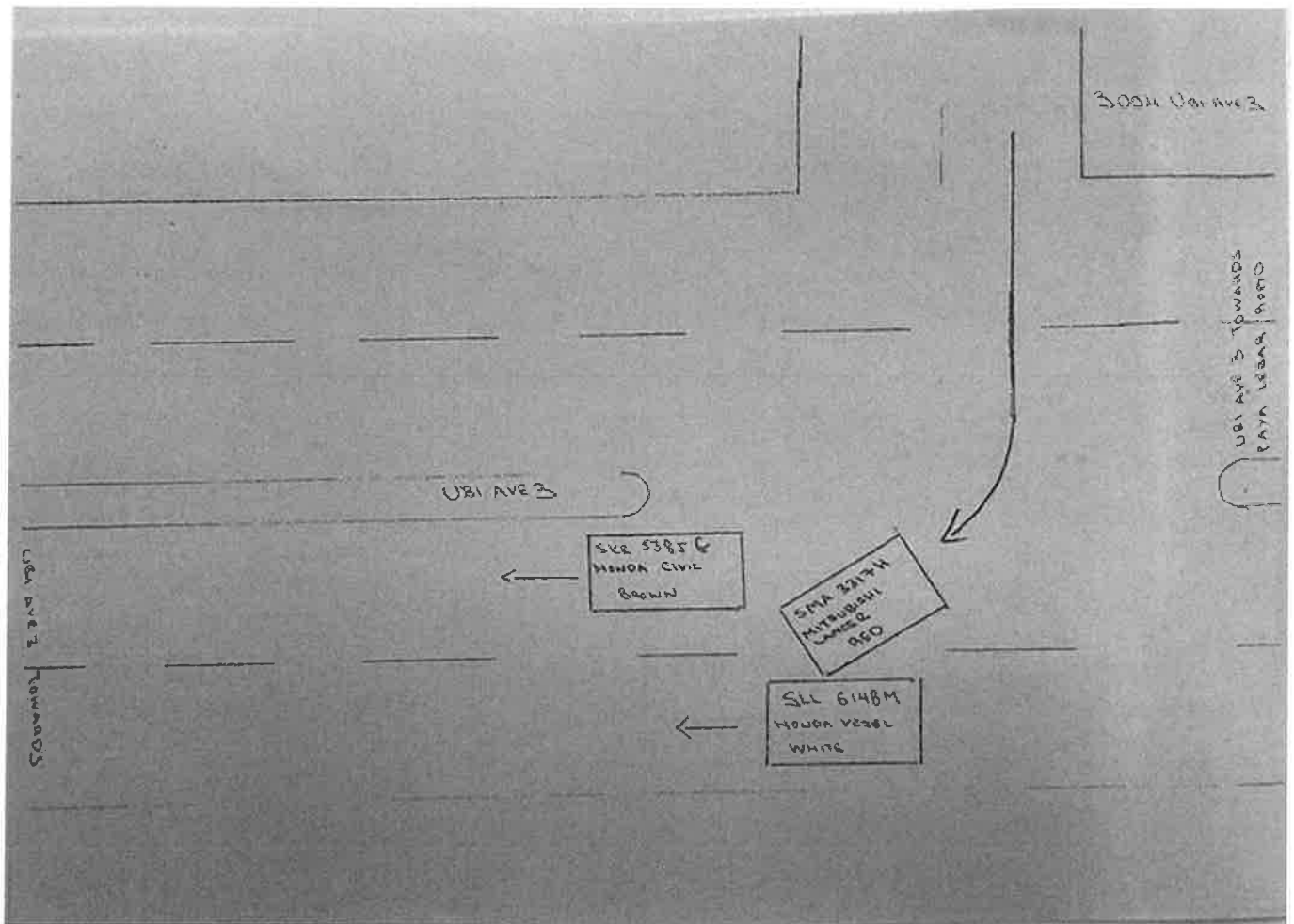
(If driver is not the policyholder)

Date & Time: 20/05/2022
16:30

Reporting Centre Personnel's Signature

Name: Louis Lim

NRIC/FIN No.: S994220



IMAGES
















**SINGAPORE
POLICE FORCE**


T/20220518/7027

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

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Report No. T/20220518/7027

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/05/2022 13:35		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: ABDUL SAMAD BIN RAHIM			Address: 469 ADMIRALTY DRIVE #15-51 SINGAPORE 750469		
ID Type / ID No.: NRIC NO / S8007775J			Contact No.: Home/Office: Mobile: 87482387		
Nationality: SINGAPORE CITIZEN			Email: SAMAD_DANISH@HOTMAIL.COM		
Sex: Male	Age: 42	Date of Birth: 25/03/1980	Type of Informant: Driver		
Race: Malay			Language: English		Institution / School Name:
Occupation:			Driving Licence Information: Class: 2B,3		Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 17/05/2022 17:50	Type of Location: Straight Road
Location: UNNAMED ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 50 Km/h	
Traffic Flow: Two Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SKR5385G	Car	HONDA	Civic	Brown	Slightly Damaged	0
SLL6148M	Car	HONDA	Vezel	White	Seriously Damaged	1
SMA3317H	Car	MITSUBISHI	Lancer	Red	Seriously Damaged	0



**SINGAPORE
POLICE FORCE**



T/20220518/7027

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

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Report No. T/20220518/7027

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	JEFF	ID No.	NIL
Related Vehicle	SKR5385G (Car)	Contact No.	91088456
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
Driver			
Name	ABDUL SAMAD BIN RAHIM	ID No.	S8007775J
Related Vehicle	SLL6148M (Car)	Contact No.	87482387
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 2B,3 Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	Slight
Driver			
Name	TAN	ID No.	NIL
Related Vehicle	SMA3317H (Car)	Contact No.	91011610
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.

On 17/5/2022 @ 0550hrs, I was driving my car reg SLL6148M (Honda Vezel/White) at the left lane along Ubi Ave 3 towards Eunos Link. At that moment, the road surface is dry and the weather is clear. Suddenly, a car reg SMA3317H (Mitsubishi Lancer/Red) collided on to my driver side of my car and subsequently, the same car collided on to left rear side of SKR5385G (Honda Civic/Brown). As to avoid any obstruction, we parked our car along the roadside to take photos of the incident and discuss on the accident. During the discussion, the driver of car reg SMA3317H admitted of his mistake for colliding on both cars.



**SINGAPORE
POLICE FORCE**



T/20220518/7027

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

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Report No. T/20220518/7027

CONTINUATION OF REPORT

Due to the collision, my driver side front and back door were badly damaged and my right arm side ache after the impact.

Exchange of contact number as follows:
SMA3317H - Mr Tan (Hp: 91011610)
SKR5385G - Mr Jeff (Hpi: 91088456)



SINGAPORE POLICE FORCE



T/20220518/7027

4 of 4

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

Report No: T/20220518/7027

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 / TPB /
TAN JEOK LENG
Contact No.: 65476151

NP168

Signature Of Informant:

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

Date/Time:
18/05/2022 13:35

Classification Of Case: