

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 28/05/2022 13:16 (SGT)
Date of Accident 28/05/2022 06:21 (SGT)
Exact Location of Accident Kim Keat Rd, Singapore
Additional Location Information ALONG KIM KEAT ROAD TOWARDS BALESTIER ROAD
(INFRONT OF MASJID HAJJAH)
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLS5917E

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner SHAHRUL HISAM BIN BUANG
NRIC No S7804947B
Email Address BOISHAH0378@GMAIL.COM
Mobile Phone No (Phone) +65-82543639
Alternative Phone No +65-82543639

VEHICLE PARTICULARS

Manufacturer Nissan
Model Pulsar
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 1197

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 5124719576
Cover Note Number -

DRIVER

Name of Driver SHAHRUL HISAM BIN BUANG

NRIC No	S7804947B
Date Of Birth	03/03/1978
Occupation	Indoor
Date Of Driving Pass	13/06/2011
Driving experience	10 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-82543639
Alt. Phone Number	+65-82543639
Email Address	BOISHAH0378@GMAIL.COM
Address	BLK 21 JALAN TENTERAM #07-467
Address complement	-
Postcode	320021
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	Side Swipe
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

ON 28/05/2022 AT ABOUT 0621 HRS, I WAS PARKED MY CAR SLS5917E OUTSIDE OF THE MASJID HAJJAH RAHIMABI KEBUN LIMAU AND I WENT IN TO THE MOSQUE FOR PRAYING. WHEN WE ALL PRAYING IN THE MOSQUE, SUDDENLY I HEARD A LOUD BANG SOUND AND 1 OF MY FRIEND, SAW A TAXI RAN AWAY AFTER COLLIDED ONTO MY CAR. WHEN I WENT OUT TO CHECK MY VEHICLE AND I REALIZED THAT MY CAR SUFFERED SERIOUSLY DAMAGES ON RIGHT SIDE AND REAR SIDE. DUE TO THE HUGE IMPACT OF MY CAR ALSO BEING PUSHED TO LEFT AND HIT ONTO THE ROAD KERB. I HAD CALLED TO THE POLICE AFTER THAT AND WHILE WE WAITING THE POLICE CAME, THE TAXI DRIVER COME BACK TO THE ACCIDENT SCENE AND HE APOLOGIZED TO ME THAT HIS MISTAKE TO CAUSED THE ACCIDENT HAPPENING ONTO MY CAR. THE TRAFFIC POLICE CAME AND TAKE NOTE FOR BOTH PARTIES PARTICULARS AND LET US GO THROUGH WITH INSURANCE CLAIM, HENCE, I HERETO LODGE THIS REPORT TO CLAIM AGAINST THE TAXI (SHD7099D)'S INSURANCE FOR MY ACCIDENT DAMAGES.

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	SHD7099D
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Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	-
Contact Number	(Phone) +65-92328255
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN**IMPORTANT NOTICE**

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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")

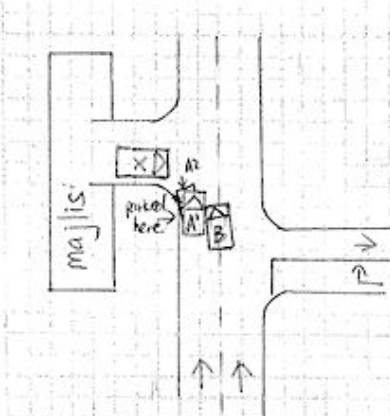
(b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and

(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

Sketch Plan

(A) SLS 5917E

(B) SHD 7099D

Along Kim Keat Road Towards
Balestier Road
(In front of Masjid Hajjah
Rahimabi Kebun Limau).


Describe Circumstances of the Accident

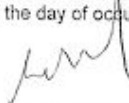
On 30/05/2022 @ about 0621 hrs, I was parked my car (SL55917-E) outside of the Masjid Hajjah Rahimabi Kebun Limau and I went in to the mosque for praying. When we all praying in the mosque, suddenly I heard a loud bang sound and I & my friend saw a taxi ran away after collided onto my car. When I went out to check my vehicle and I realized that my car suffered seriously damages on right side & rear side. Due to the huge impact my car also being pushed to left and hit onto the road kerb. I had called to the police after that and while we waiting the police come, the taxi driver came back to the accident scene and he apologized to me that his mistake to caused the accident happening onto my car. The traffic police came and take note for both parties particulars and let us go through with insurance claim. Hence, I here to lodge this report to claim against the taxi (SHD 70990)'s Insurance for my accident damages.

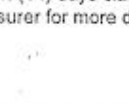
Declaration

We declare the foregoing particulars are true in every respect.

If you wish to claim against your own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more details.


Policyholder's Signature / Date & Time


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


Witnessed by Reporting Centre Personnel















make yours

Certificate of Insurance

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
 MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960
 ROAD TRANSPORT ACT, 1987 (MALAYSIA)
 ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)
 MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: S124719576

Cover : drive CLASSIC

1. Index mark and Registration Number of Vehicle : SL55917E
Chassis Number : VSKDDAC13UB014241
2. Name of Policyholder : SHAHRUL HISAM BIN BUANG
3. Effective Date of Insurance : 24 Nov 2021
4. Expiry Date of Insurance : 23 Nov 2022
5. Persons or Classes of Persons entitled to drive#
 (a) The Policyholder.
 (b) Any other person who is driving on the Policyholder's order or with his/her 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 driving the Motor Vehicle.
6. Limitations as to Use#
 (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's business or profession.

This Policy does not cover

- (a) Use for hire or reward.
- (b) Use for racing, pace-making, reliability trial or speed-testing.
- (c) Use for the carriage of goods (other than samples) in connection with any trade or business.
- (d) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (Third Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1)	: S\$600
EXCESS (SECTION 2)	: N/A
WINDSCREEN EXCESS	: S\$100
ADDITIONAL EXCESS	: N/A
UNNAMED DRIVER EXCESS	: PLEASE REFER OVERLEAF
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
ROADSIDE ASSISTANCE AND WELLNESS COVER	: NO
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: SHAHRUL HISAM BIN BUANG
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: SSL HOLDINGS PTE. LTD.
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

I/We hereby Certify that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia)

Agency : INXURE NETWORK SERVICES (00000614975)
 Date of Issue : 24 Nov 2021 13:40 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED



Chief Executive