

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 03/06/2022 13:56 (SGT)
Date of Accident 01/06/2022 20:10 (SGT)
Exact Location of Accident Collyer Quay, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKZ1686Y

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner MUHAMMAD TAUFIQ BIN RAHMAT
NRIC No SXXXX714G
Email Address mdopik@gmail.com
Mobile Phone No (Phone) +65-91836747
Alternative Phone No +65-91836747

VEHICLE PARTICULARS

Manufacturer Toyota
Model Noah
Variant -
Exact purpose for which vehicle was being used at time of accident Private hire
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Private hire
Transmission Auto
CC 1986

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DMHCSNW00011062100
Cover Note Number -

DRIVER

Name of Driver MUHAMMAD TAUFIQ BIN RAHMAT
NRIC No SXXXX714G

Date Of Birth	18/11/1984
Occupation	Outdoor
Date Of Driving Pass	21/10/2011
Driving experience	10 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91836747
Alt. Phone Number	+65-91836747
Email Address	mdopik@gmail.com
Address	BLK 47 EDGEFIELD PLAINS
Address complement	#02-13
Postcode	828713
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
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	Punggol Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18006049999
Alt. Police Station Phone No	(Fax) +65-64468015
Police Station Address	Blk 21A Tebing Lane Singapore 828837
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE 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	YP5391H
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) -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	MUHAMMAD TAUFIQ BIN RAHMAT
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT
Injured person in which vehicle?	SKZ1686Y
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

IMPORTANT NOTICE

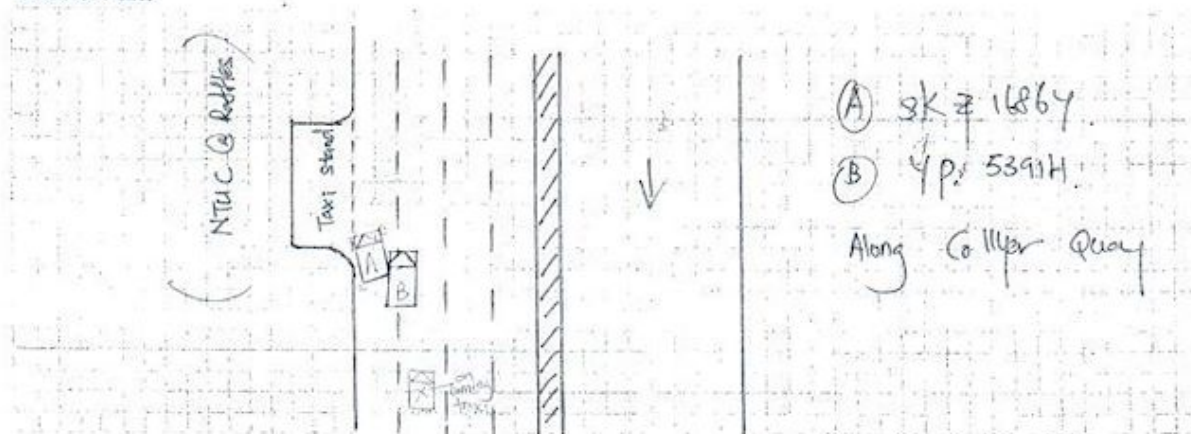
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. Consent under the Personal Data Protection Act (PDPA)
I understand, 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



Describe Circumstances of the Accident

On 01/06/2022 at about 20:00hrs, I was driving my car (3KZ1686 Y) along Collyer Quay in the left most lane. Upon reaching the location to pickup my grab passenger (taxi stand @ NTUC Raffles), I then slow down and stationary with turned on my hazard light with waiting the passenger. Suddenly I felt an impact from behind while I came out to inspect my car and I realized that the lorry (Veh. B: YP5391H) collided on to rear right portion and grazed over right portion of my car while trying to filter lane to the right. The lorry driver explained to me that he saw an oncoming taxi on the right lane while filtering thus he swerve back to the left to give way to the oncoming traffic and collided with my car. I was left pain & discomfort after the accident so I went to visit to my doctor and was given 5 days of MC. Hence, I hereto lodge this report to claim against Veh. B (YP5391H)'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


**SINGAPORE
POLICE FORCE**


T/20220602/2084

Police Station Of Origin:
Punggol N.P.C
151 Punggol Central SINGAPORE 828727
Tel No: 1800-6049999

Report No. T/20220602

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKZ1686Y	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMHCSNW00011062100	28/09/2021	27/09/2022

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	MUHAMMAD TAUFIQ BIN RAHMAT	ID No.	S8437714G
Related Vehicle	SKZ1686Y (Car)	Contact No.	91836747
Hospital/Clinic	PANHEALTH Family Clinic	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3,4 Date of Expiry: NIL
Date Treatment	02/06/2022	Date Discharge	02/06/2022
No. of Days granted Medical Leave	05	Degree of Injury	Slight
Driver			
Name	MAH MOHAMMAD RATAN	ID No.	G2275724K
Related Vehicle	YP5391H (Lorry)	Contact No.	82691308
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 1st June 2022 at about 8.10 pm, I was driving my vehicle (SKZ1686Y) along Collyer Quay towards the direction of Nicoll Highway as I was going to pick up a passenger near the taxi stand of Clifford Centre. When I reached the location, I had stopped at the left most lane of the 4 lane road to wait for the passenger. Suddenly, a lorry (YP5391H) collided into the rear of my vehicle. Due to the collision, the rear right side of my vehicle was badly damaged and the rear right tyre was also punctured. I had then exchanged particulars with the lorry driver. I had felt slight pain at my neck area initially after the accident but I thought that it would go away after some rest. However, on the 2nd June 2022, I felt that the pain in my neck was getting worse, as such I proceeded to the Panhealth Family Clinic at Apt Blk 312B Sumang Link #01-03 to seek treatment and was given 5 days medical leave. There are in-car cameras at the front and rear of my vehicle and I will be retrieving the footages.









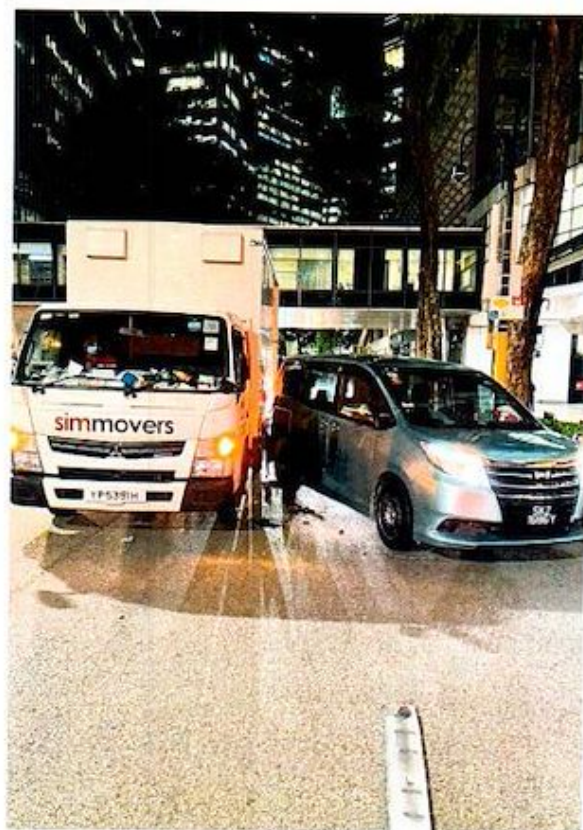
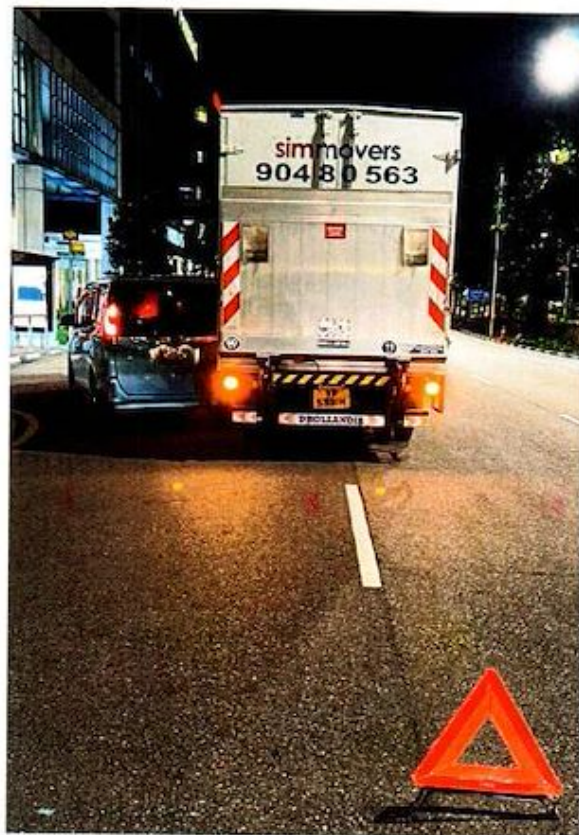
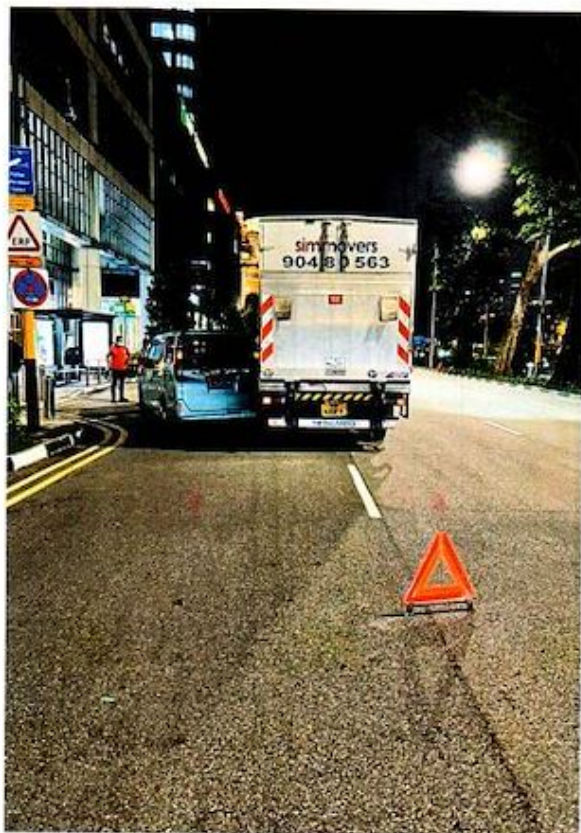














SINGAPORE POLICE FORCE



T/20220602/2064

Police Station Of Origin:
Punggol N.P.C
151 Punggol Central SINGAPORE 828727
Tel No: 1800-6049999

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Report No. T/20220602/2064

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 02/06/2022 15:24	Vide Report No.:	Station Diary No.: 37
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Informant's Particulars

Name of Informant: MUHAMMAD TAUFIQ BIN RAHMAT	Address: BLK 47 EDGEFIELD PLAINS #02-13 SINGAPORE 828713
ID Type / ID No.: NRIC NO / S8437714G	Contact No.: Home/Office: Mobile: 91836747
Nationality: SINGAPORE CITIZEN	Email:
Sex: Male	Age: 37
Date of Birth: 18/11/1984	Type of Informant: Driver
Race: Boyahese	Language:
Occupation: GRAB DRIVER	Institution / School Name:
Driving Licence Information: Class: 2B,2A,2,3,4	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 01/06/2022 20:10	Type of Location: Straight Road
Location: COLLYER QUAY				
Weather: Clear	Road Surface: Dry	Road Speed Limit:		
Traffic Flow: Dual Carriage Way	Traffic Control: Not Controlled	Traffic Volume: Moderate		
Type of Collision: Moving Vehicle Against - Parked Vehicle		Anyone conveyed by ambulance: No		

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKZ1686Y	Car	TOYOTA	NOAH 2.0X CVT ABS D/AIRBAG 2WD 5DR	Green	Seriously Damaged	0
YP5391H	Lorry	MITSUBISHI		White	Slightly Damaged	2

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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**SINGAPORE
POLICE FORCE**


T/20220602/2084

Police Station Of Origin:
Punggol N.P.C
151 Punggol Central SINGAPORE 828727
Tel No: 1800-6049999

Report No. T/20220602


CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKZ1686Y	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMHCSNW00011062100	28/09/2021	27/09/2022

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	MUHAMMAD TAUFIQ BIN RAHMAT	ID No.	S8437714G
Related Vehicle	SKZ1686Y (Car)	Contact No.	91836747
Hospital/Clinic	PANHEALTH Family Clinic	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3,4 Date of Expiry: NIL
Date Treatment	02/06/2022	Date Discharge	02/06/2022
No. of Days granted Medical Leave	05	Degree of Injury	Slight
Driver			
Name	MAH MOHAMMAD RATAN	ID No.	G2275724K
Related Vehicle	YP5391H (Lorry)	Contact No.	82691308
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.

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151 Punggol Central SINGAPORE 828727
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T/20220602/2064

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Report No. T/20220602/2064

CONTINUATION OF REPORT

**SINGAPORE
POLICE FORCE**

T720220602/2064

Police Station Of Origin:
Punggol N.P.C
151 Punggol Central SINGAPORE 828727
Tel No: 1800-6049999

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Report No. T720220602/2064

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 ALZRIN SHAFIQ BIN
AHMAD TARMIDI

Signature Of Informant:

Signature Of Interpreter:
Not applicableDate/Time:
02/06/2022 15:24Officer In Charge Of Case:
TP / AEIT /
INSP (1) BOON YEN KIAN
Contact No.: 65476172

Classification Of Case:

NP168

