

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	07/07/2022 16:19 (SGT)
Reported by	Driver
Date of Accident	07/07/2022 09:30 (SGT)
Exact Location of Accident	BKE, Singapore
Additional Location Information	BKE (WOODLANDS) BEFORE DAIRY FARM ROAD EXIT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	YQ6773C
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	BDC CONSTRUCTION PTE. LTD.
Company Reg No	2XXXXX676M
Email Address	BDC6773@GMAIL.COM
Mobile Phone No	(Phone) +65-90499030
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Dyna
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 - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	2800

INSURANCE COMPANY

Name of Insurance Company	NTUC Income Insurance Co-operative Ltd
Policy Number / Cover Note Number	5127883411

DRIVER

Name of Driver	ALAM MD SAHIDUL
Passport No/FIN	GXXXX027U
Date Of Birth	01/01/1979
Occupation	Outdoor

Date Of Driving Pass	08/08/2011
Driving experience	10 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-84917728
Alt. Phone Number	-
Email Address	BDC6773@GMAIL.COM
Address	3 SOON LEE STREET
Address complement	06-25 PIONEER JUNCTION
Postcode	627606
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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	Chain Collision
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)	4
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

PASSENGER 1

Name	MIA MD SABUJ
Gender	Male

PASSENGER 2

Name	SHAHIN
Gender	Male

PASSENGER 3

Name	CHOKDER ASHRAF
Gender	Male

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

PLEASE REFER TO SKETCH PLAN ATTACHED

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
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Was there any video captured by Car Camera? No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SHD3207K
Vehicle Manufacturer -
Vehicle Model -
Vehicle Variant -
Vehicle Colour -
Vehicle Category Private car
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) -

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SCZ8887H
Vehicle Manufacturer -
Vehicle Model -
Vehicle Variant -
Vehicle Colour -
Vehicle Category Private car
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 ALAM MD SAHIDUL
Gender Male
Phone No (Phone) +65-84917728
Address 3 SOON LEE STREET
Address Complement 06-25 PIONEER JUNCTION
Post Code 627606
Approximate Age Years Old 43
Injuries Sustained -
Injured person in which vehicle? YQ6773C
Were seat belts worn? Yes
Was this injured conveyed to hospital by ambulance? No

INJURED 2

Name of injured person MIA MD SABUJ
Gender Male
Phone No -
Address -
Address Complement -
Post Code -
Approximate Age Years Old -
Injuries Sustained -
Injured person in which vehicle? YQ6773C
Were seat belts worn? Yes

Was this injured conveyed to hospital by ambulance? No

INJURED 3

Name of injured person SHAHIN
Gender Male
Phone No -
Address -
Address Complement -
Post Code -
Approximate Age Years Old -
Injuries Sustained -
Injured person in which vehicle? YQ6773C
Were seat belts worn? Yes
Was this injured conveyed to hospital by ambulance? No

INJURED 4

Name of injured person CHOKDER ASHRAF
Gender Male
Phone No -
Address -
Address Complement -
Post Code -
Approximate Age Years Old -
Injuries Sustained -
Injured person in which vehicle? YQ6773C
Were seat belts worn? Yes
Was this injured conveyed to hospital by ambulance? No

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5. **Any false reporting may be referred to the Traffic Police Department for investigation.**
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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.



[Handwritten signature]

[Handwritten signature]



Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Sketch Plan

Vehicle: YQ 6713C
 Vehicle: SHD 3267K
 Vehicle: SCZ 8827H

Describe Circumstance of the Accident

Handwritten sketch plan details:

- Top right: A large, stylized 'W' or 'M' shape.
- Middle right: The word 'Attac' written diagonally.
- Center: A small 'W' or 'M' shape.
- Bottom left: The word 'Porten' written diagonally.
- Bottom center: A small 'W' or 'M' shape.

Declaration

(We declare the following particulars are true in every respect)



Policyholder's Signature / Date & Time

Handwritten signature of the driver.

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

Handwritten signature of the reporting centre personnel.



Witnessed by Reporting Centre Personnel (Name as in NRIC-ID card)

ON THE STATED DATE AND TIME. I, VEHICLE A (YQ6773C) WAS TRAVELLING STRAIGHT ON LANE 2 OF BKE(WOODLANDS) BEFORE DAIRY FARM ROAD EXIT. WHEN THE FRONT VEHICLE C (SCZ8887H) SLOWED DOWN AND STOP, I FOLLOWED SUIT TO SLOWED DOWN WITHOUT HAVING ANY COLLISION WITH THE FRONT VEHICLE C (SCZ8887H). SUDDENLY I FELT A HUGE IMPACT FROM THE REAR PORTION OF MY VEHICLE, THE HUGE IMPACT CAUSE MY VEHICLE TO PROPEL FORWARD AND HIT ONTO VEHICLE C (SCZ8887H) REAR PORTION. AFTER I ALIGHTED I THEN REALISE THAT IS VEHICLE B (SHD3207K) THAT HAD COLLIDED ONTO MY VEHICLE. I WISH TO STATE THAT THIS IS A 3 CARS CHAIN COLLISION.

I WISH TO STATE THAT I GOT 3 PASSENGERS IN MY CAR.

VEHICLE A : YQ6773C

VEHICLE B : SHD3207K

VEHICLE C : SCZ8887H

h.f.



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Owner ID Type:

Company

Owner ID:

676M

Vehicle Details

Vehicle No.:

YQ6773C

Vehicle to be Exported:

No

Intended Deregistration Date:

10 Jul 2022

Vehicle Make:

TOYOTA

Vehicle Model:

DYNA 150 5MT

Primary Colour:

Silver

Manufacturing Year:

2022

Engine No.:

1GD8896801

Chassis No.:

JHHAGV4680K002219

Maximum Power Output:

-

Open Market Value:

\$31,609.00

Original Registration Date:

28 Apr 2022

First Registration Date:

28 Apr 2022

Transfer Count:

1

Actual ARF Paid:

\$1,581.00

Intended PARF Rebate Details

PARF Eligibility:

No

PARF Eligibility Expiry Date:

-

PARF Rebate Amount:

\$0.00

Intended COE Rebate Details

COE Expiry Date:

27 Apr 2032

COE Category:

C - Goods Vehicle & Bus

COE Period(Years):

10

PQP Paid:

\$32,255.00

COE Rebate Amount:

\$31,600.00

Total Rebate Amount:**\$31,600.00**

The information contained herein is correct as at 10 Jul 2022

OK



toyota dyna

Min Price ▼

to

No Max ▼

Depreciation ▼

Vehicle Type ▼

Category ▼




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 3.0 [2014] [Euro VI] (M)	POA	• 10.3km/L 142bhp 5-speed (M)		
2.8 [Euro VI] (M)	\$97,000	• n/a 215bhp Unknown		
2.8 E Package [Euro VI] (A)	\$97,500	• n/a 215bhp Unknown		
3.0 [Euro VI] (A)	\$98,000 \$9,500 /yr ?	• 10.3km/L 142bhp 5-speed (A)		
3.0 [Euro VI] (M)	\$99,000 \$9,900 /yr ?	• 10.3km/L 142bhp 5-speed (M)		

Car Model

Price

Dealer

Built in

User Rating

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(2008-2009)

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