

## 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 .....	28/07/2022 10:46 (SGT)
Reported by .....	Both
Date of Accident .....	25/07/2022 18:00 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	AYE(TUAS)AFT ALEXANDRA RD 6.2KM
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SJG9989H
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#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	MOHAMAD KHAIR BIN ABDUL WAHAB
NRIC No .....	S7807073J
Email Address .....	mohdkhair1978@yahoo.com.sg
Mobile Phone No .....	(Phone) +65-98572570
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Renault
Model .....	Fluence
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 .....	1461

#### INSURANCE COMPANY

Name of Insurance Company .....	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number .....	DMPCSNW00151262101

#### DRIVER

Name of Driver .....	MOHAMAD KHAIR BIN ABDUL WAHAB
NRIC No .....	S7807073J
Date Of Birth .....	22/03/1978
Occupation .....	Indoor

Date Of Driving Pass .....	14/09/1998
Driving experience .....	23 YEARS AND 10 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-98572570
Alt. Phone Number .....	-
Email Address .....	mohdkhair1978@yahoo.com.sg
Address .....	BLK 815C CHOA CHU KANG AVE 7
Address complement .....	#05-43
Postcode .....	683815
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 .....	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 .....	4
Was anybody injured in the Accident? .....	Yes
Was any injured conveyed to hospital by ambulance? .....	Yes
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
Translator's name .....	-
Translator's ID .....	-
Translator's phone number .....	-
Translator's email .....	-
Original language used in the statement .....	-

#### 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

PLS REFER TO THE POLICE REPORT

#### ATTACHMENT(S)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SJH7993C
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 .....	SNA8875T
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 3

Vehicle Registration Number .....	SLW6985E
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 .....	MOHAMAD KHAIR BIN ABDUL WAHAB
Gender .....	Male
Phone No .....	-
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	SERIOUS
Injured person in which vehicle? .....	SJG9989H
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	Yes


# SKETCH PLAN

## IMPORTANT NOTICE

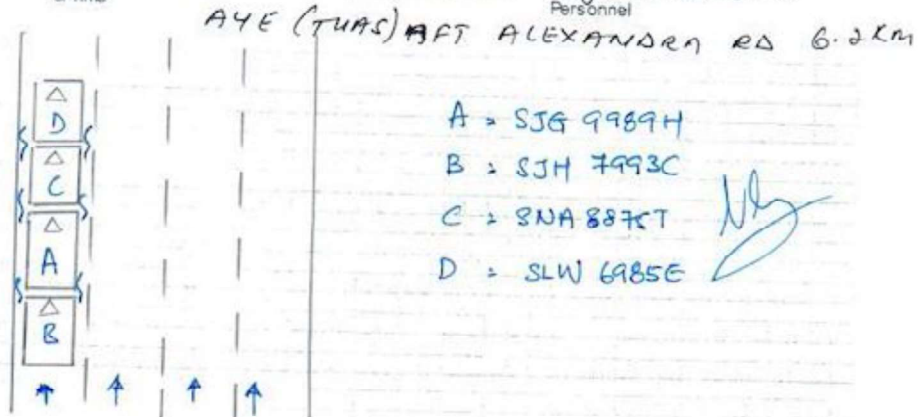
1. Please report correctly the details of the accident to speed up the claims process.
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available 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' law yers/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' law yers/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 law yers/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

 28/07/22  
Witnessed by Reporting Centre Personnel

Sketch Plan






**Describe Circumstances of the Accident**


AS PER POLICE REPORT

**Declaration**

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

 20/07/22  
Witnessed by Reporting Centre Personnel



**SINGAPORE  
POLICE FORCE**



T/20220726/7024

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

2 of 3  
Report No. T/20220726/7024

## CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of
SLW6985E	Car	TOYOTA		Brown	No Damage	1
SNA8875T	Car	JAGUAR		Blue	Slightly Damaged	1

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJG9989H	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSNW001512 62101	31/07/2021	30/07/2022

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	MOHAMAD KHAIR BIN AB WAHAB	ID No.	S7807073J
Related Vehicle	SJG9989H (Car)	Contact No.	98572570
Hospital/Clinic	NATIONAL UNIVERSITY HOSPITAL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	25/07/2022	Date	25/07/2022
No. of Days granted Medical Leave	03	Degree of	Serious

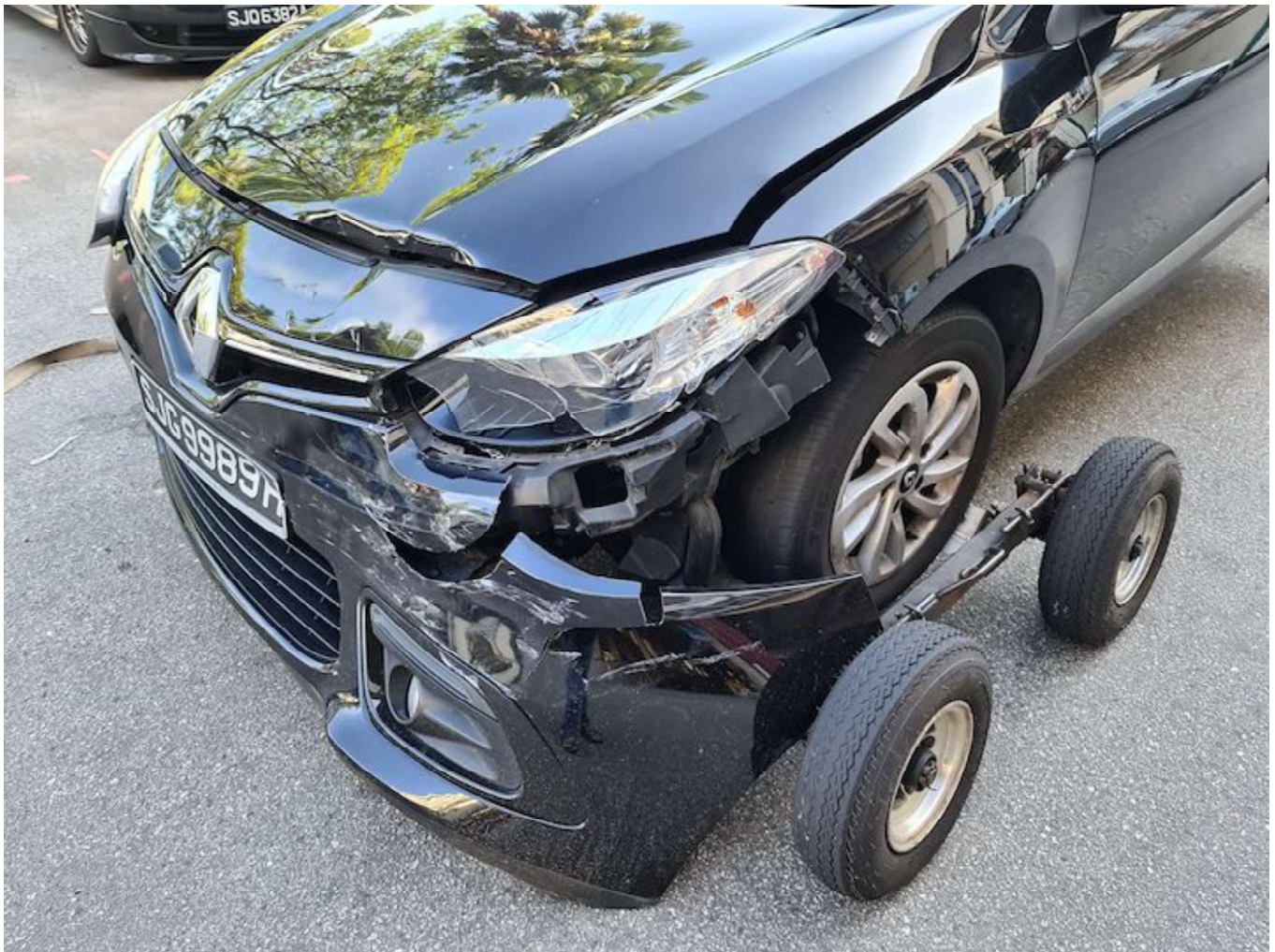
## Brief Details.

I was travelling on AYE towards Tuas on lane 4. I had just entered AYE from Alexandra Road. The traffic on Lane 4 was heavy and was slow moving and coming to a halt with the car in front of me braking. So I slowed down and had stopped when a car behind me hit me from behind. Because of the strong impact on my car, my car moved forward and hit the car in front of me.



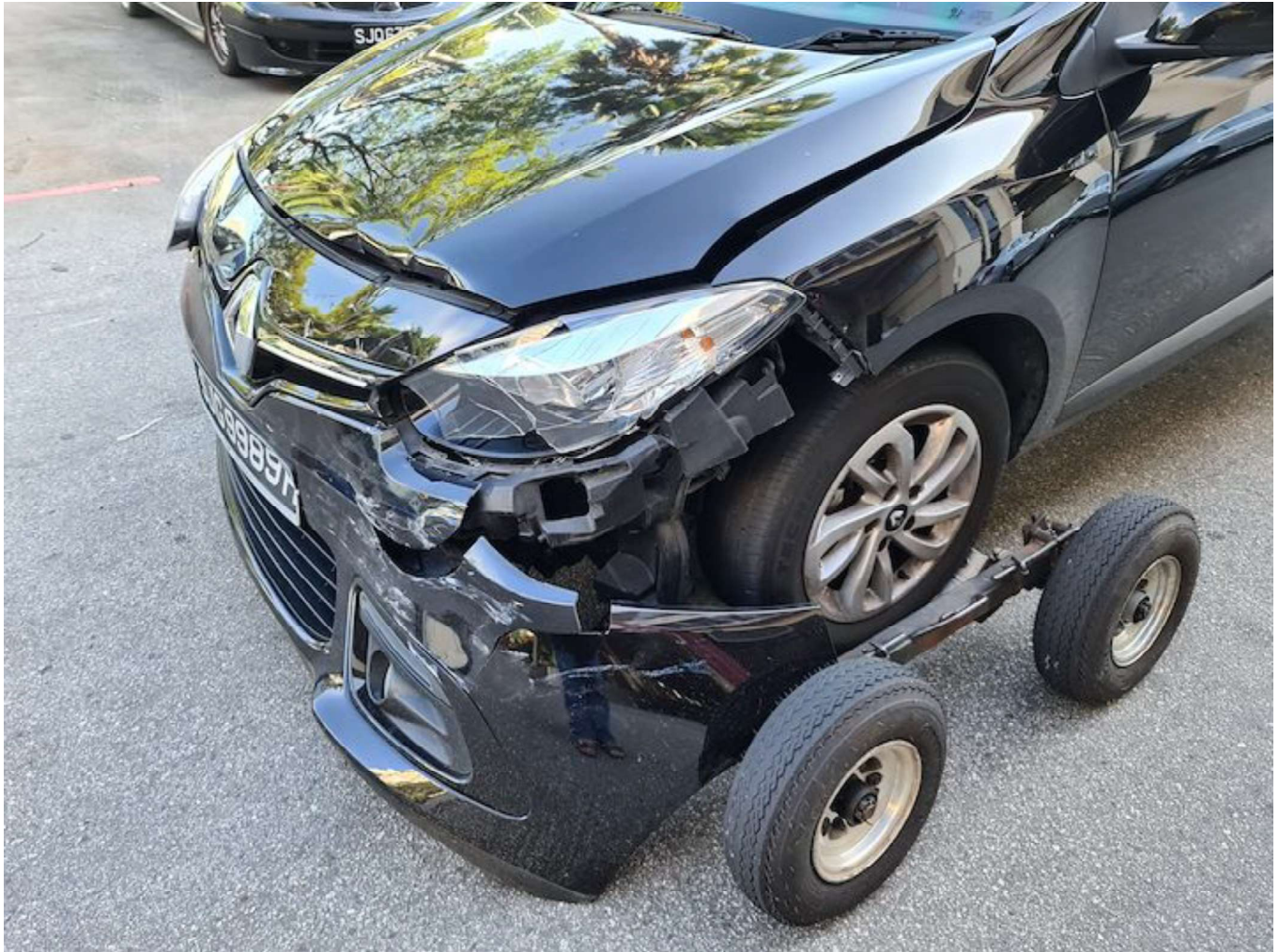






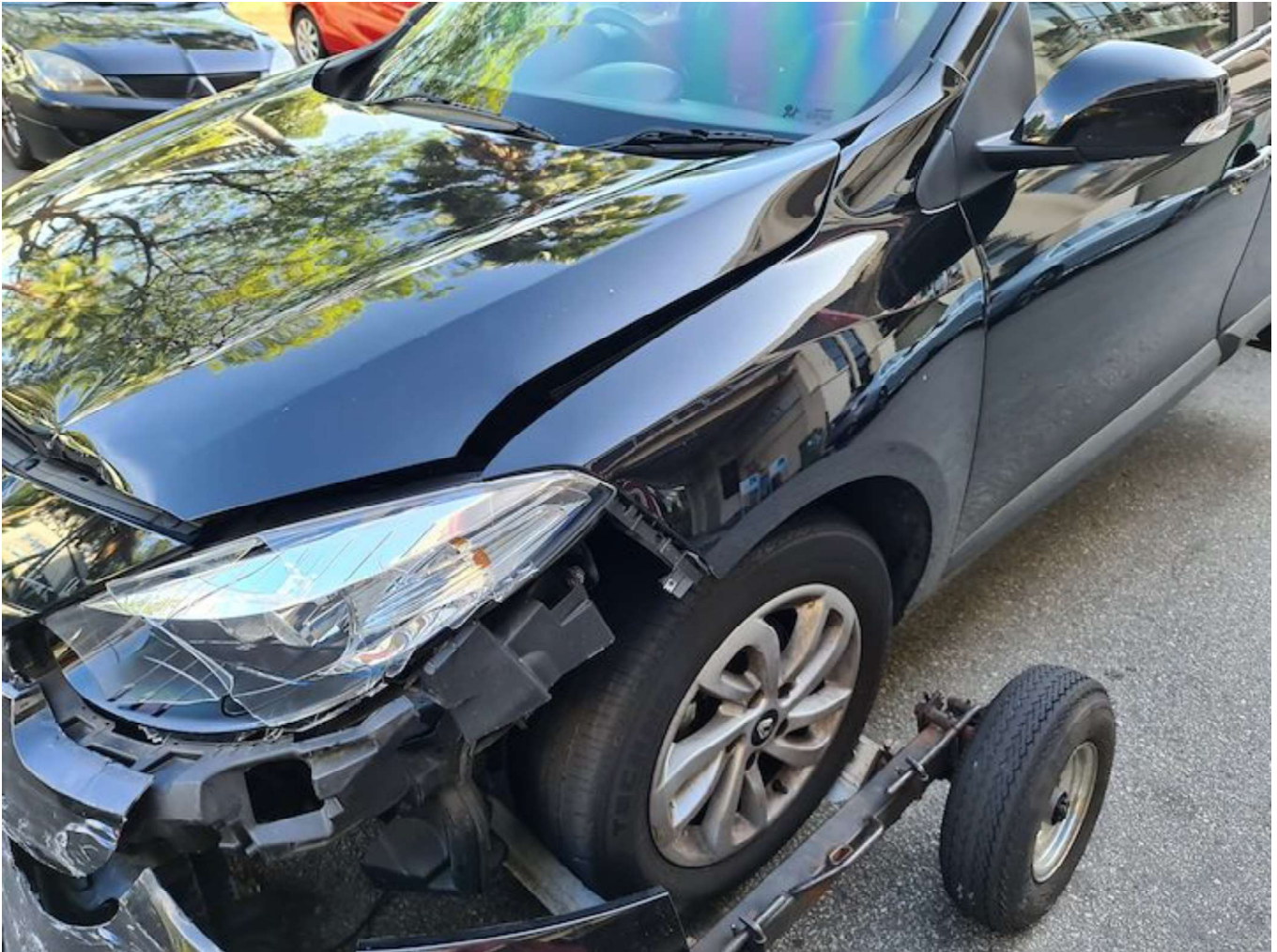








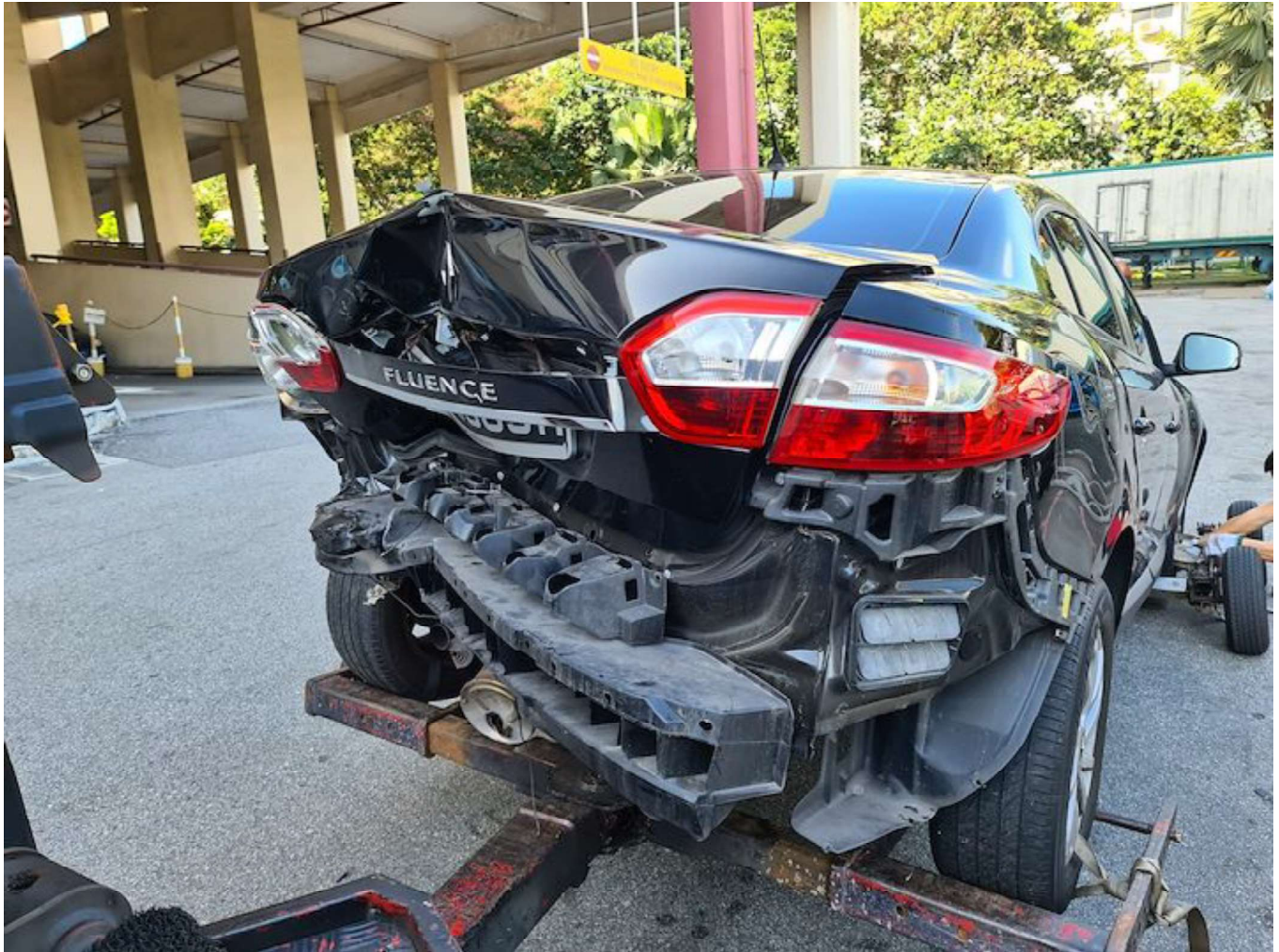






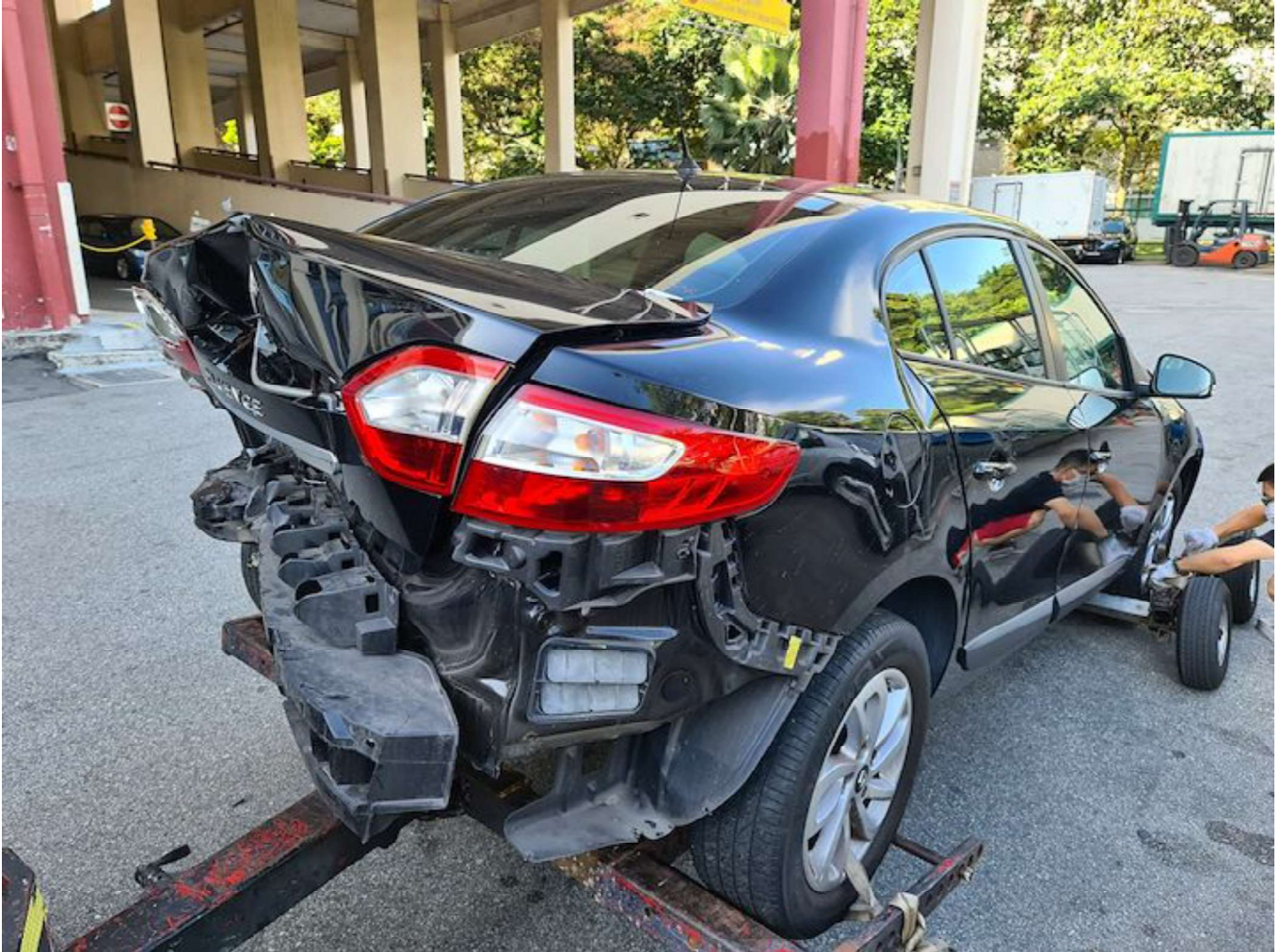


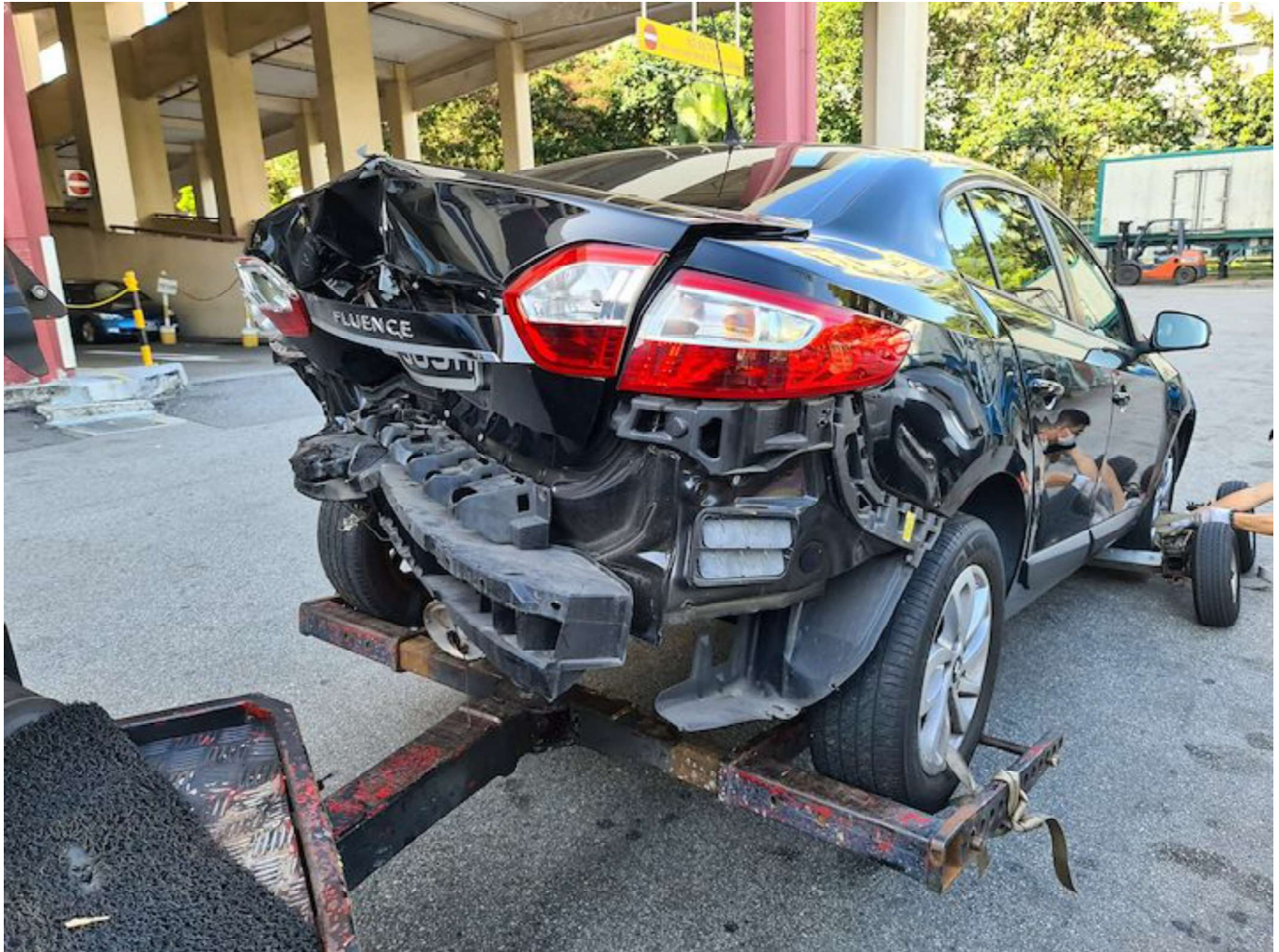




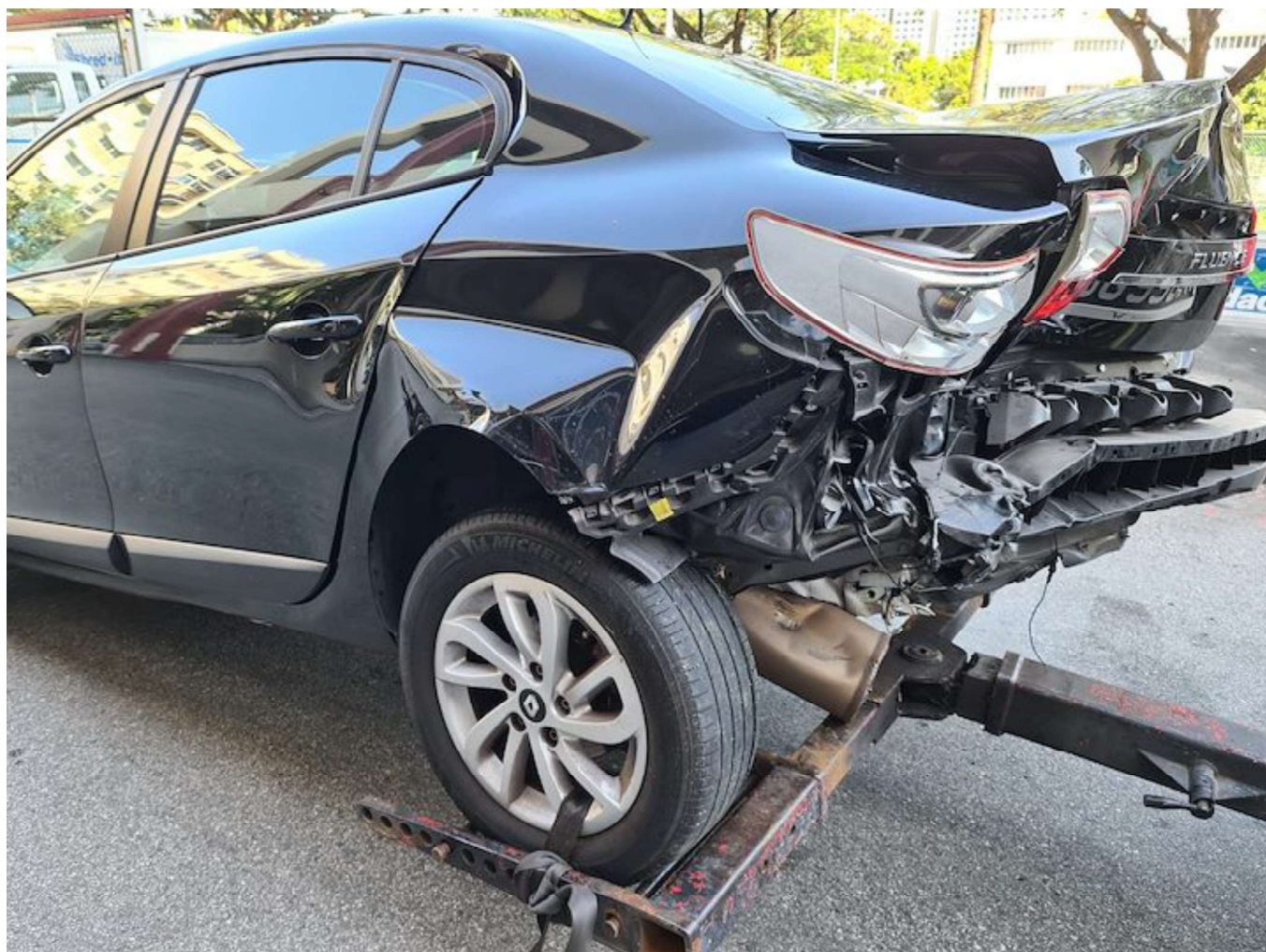






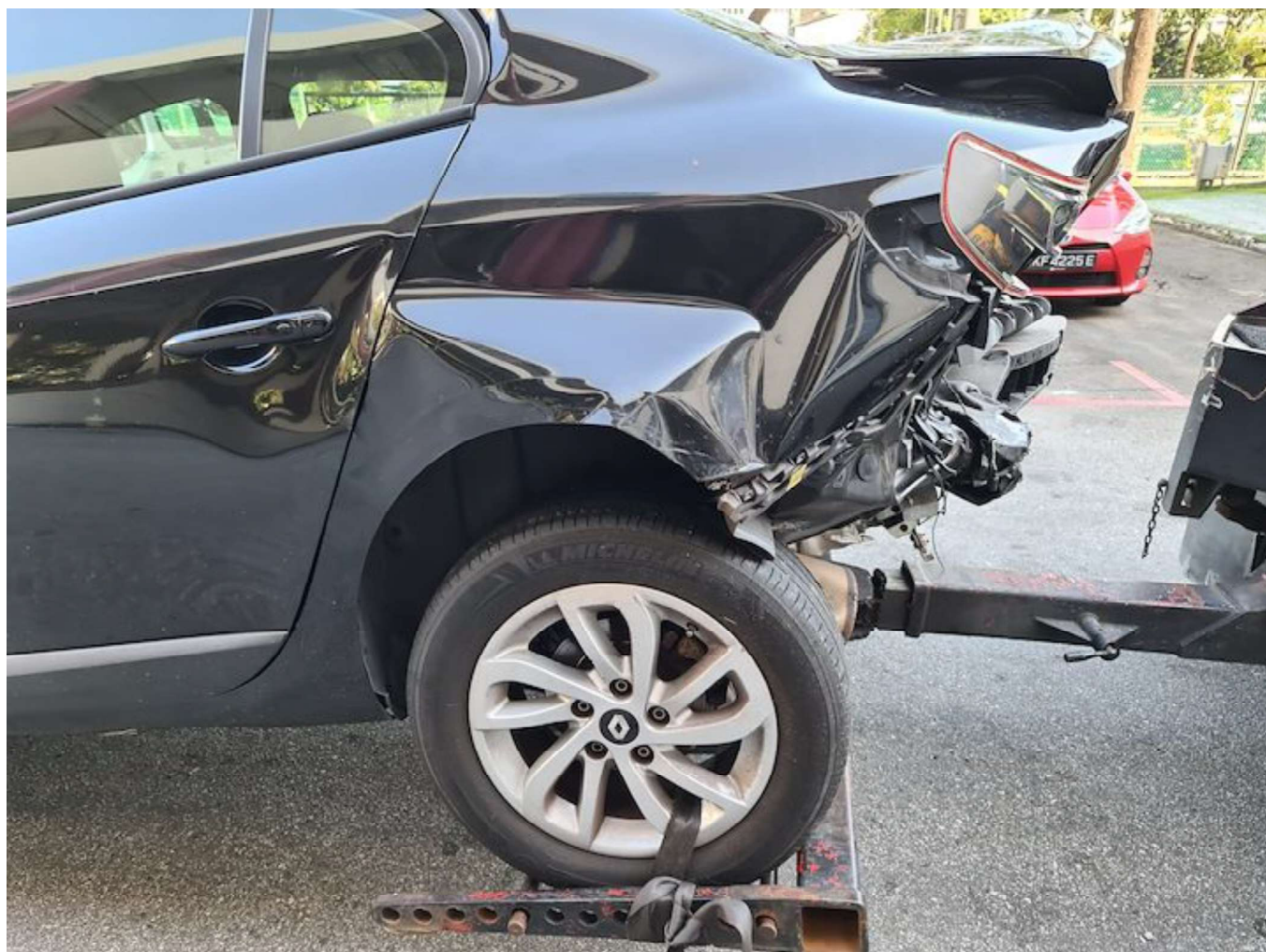




























**SINGAPORE  
POLICE FORCE**



T/20220726/7024

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

1 of 3  
Report No. T/20220726/7024

### REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/07/2022 15:03		Vide Report No.: D/20220725/0075	Station Diary No.:
<b>Informant's Particulars</b>			
Name of Informant: MOHAMAD KHAIR BIN AB WAHAB		Address: 815C CHOA CHU KANG AVENUE 7 #05-43 SINGAPORE 683815	
ID Type / ID No.: NRIC NO / S7807073J		Contact No.: Home/Office: Mobile: 98572570	
Nationality: SINGAPORE CITIZEN		Email: mohdkhair1978@yahoo.com.sg	
Sex: Male	Age: 44	Date of Birth: 22/03/1978	Type of Informant: Driver
Race: Malay		Language: English	Institution / School Name:
Occupation:		Driving Licence Information: Class: 3	Date of Expiry:

<b>General Information of the Accident</b>				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 25/07/2022 18:00	Type of Location: Straight Road
Location:  ALEXANDRA ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 80 Km/h	
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: Yes	

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SJG9989H	Car	RENAULT	FLUENCE+1 .5+DCI+110 +A/T	Black		0
SJH7993C	Car	HONDA	Stream	White	Seriously Damaged	1





**SINGAPORE  
POLICE FORCE**



T/20220726/7024

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
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Report No. T/20220726/7024

## CONTINUATION OF REPORT

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SNA8875T	Car	JAGUAR		Blue	Slightly Damaged	1

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJG9989H	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSNW001512 62101	31/07/2021	30/07/2022

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	MOHAMAD KHAIR BIN AB WAHAB	ID No.	S7807073J
Related Vehicle	SJG9989H (Car)	Contact No.	98572570
Hospital/Clinic	NATIONAL UNIVERSITY HOSPITAL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	25/07/2022	Date	25/07/2022
No. of Days granted Medical Leave	03	Degree of	Serious

## Brief Details.

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**SINGAPORE  
POLICE FORCE**

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



T/20220726/7024

3 of 3

Report No. T/20220726/7024

**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 / TPIB /  
SITI NORHAFIDAH BINTE HANAFI  
Contact No.: 65476202

NP168

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

Date/Time:  
26/07/2022 15:03

Classification Of Case: