# **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 Actual Driver
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding 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.

- 4. The issue and acceptance of this is form by instrained 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 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**

Renault

1461

Vehicle Registration Number SJG9989H

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner MOHAMAD KHAIR BIN ABDUL WAHAB NRIC No SXXXX073J Email Address mohdkhair1978@yahoo.com.sg Mobile Phone No (Phone) +65-98572570 Alternative Phone No

#### VEHICLE PARTICULARS

Manufacturer

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 No - Claiming third party your vehicle? Vehicle Category Private car Transmission Auto

**INSURANCE COMPANY** 

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

DRIVER

CC

Name of Driver MOHAMAD KHAIR BIN ABDUL WAHAB NRIC No SXXXX073J Date Of Birth 22/03/1978 Occupation Indoor

Date Of Driving Pass 14/09/1998 Driving experience 23 YEARS AND 10 MONTHS Gender 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 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) 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? 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

# Official Accident report SN09227S0003

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

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- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance
- Any false reporting may be referred to the Police for investigation.
- 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 lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the
- 8. Consent under the Personal Data Protection Act (PDPA)

l 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
- (ii) investigating the accident and/or my claims;
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by ma;
- (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
- (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 & Driver's Signature (if driver is not the policyholder) / Date Time & Time AYE (TUAS) AFT ALEXANDRA Sketch Plan A = SJG 9989H 0 B : SJH 7993C = SLW 6985E B

|       | umstances of the Accident             |            |
|-------|---------------------------------------|------------|
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#### 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

Witnessed by Reporting Centre Personnel





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

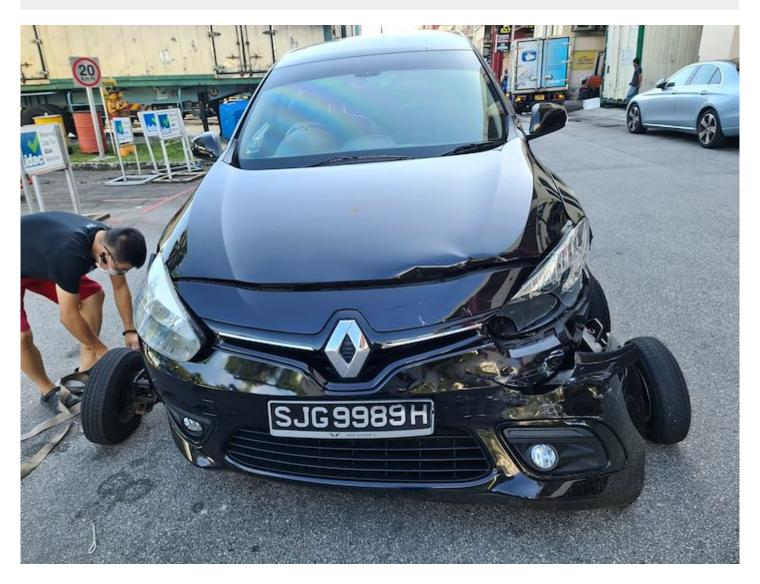
| Vehicle No. | Type  | Make   | Model | 10.   |                     |       |
|-------------|-------|--------|-------|-------|---------------------|-------|
| SLW6985E    | Car   |        | Model | Color | Conditio            | No of |
|             | Dai D | TOYOTA |       | Brown | No                  | 1     |
| SNA8875T    | Car   | JAGUAR |       |       | Damage              | 100   |
|             | C     | JAGUAR |       | Blue  | Slightly<br>Damaged | 1     |

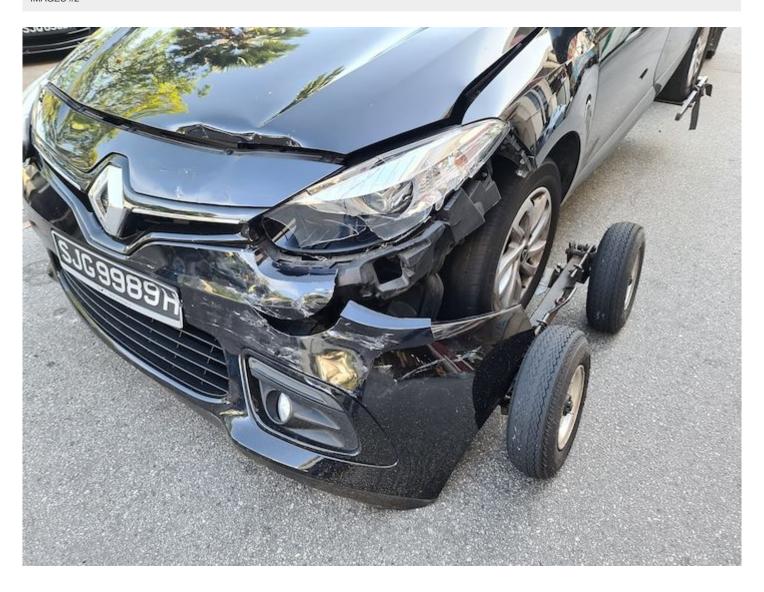
|   | ehicle Insurance                              |                        | A STATE OF THE PARTY. | William Property |
|---|---|------------------------|-----------------------|------------------|
| _ | Insurance Company                             | Insurance No           | Effective             | Expiry Date      |
|   | CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. | DMPCSNW001512<br>62101 | 31/07/2021            | 30/07/2022       |

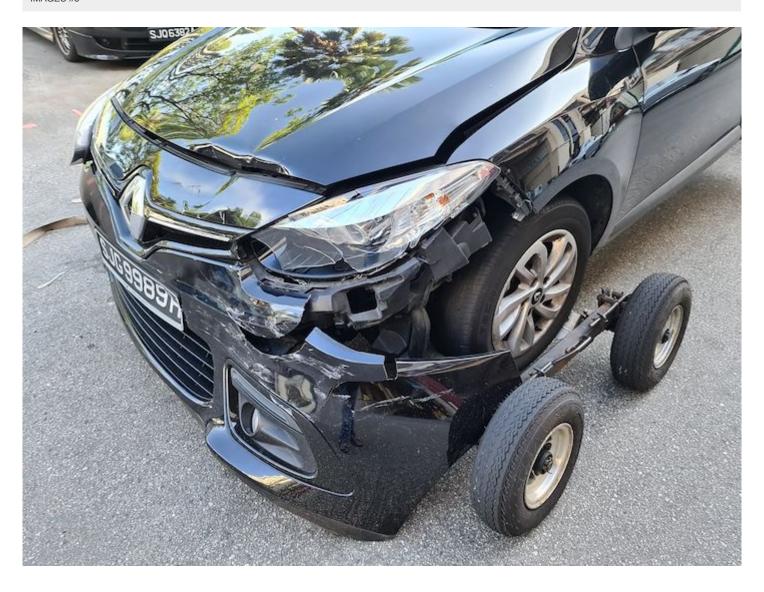
| Any Pedestrian    | Involved: No                  |           |                                |           |                                 |                 |
|-------------------|-------------------------------|-----------|--------------------------------|-----------|---------------------------------|-----------------|
| No. of Pedestria  | ns Injured: NIL               |           | Use of D                       | adactria  |                                 | Decision and an |
| Driver            |                               | O'CLEANED | Use of Pedestrian Crossing: NA |           |                                 |                 |
| Name              | MOHAMAD KHAIR BIN AB WAHAB    |           | ID No                          | ).        | S7807073J                       |                 |
| Related Vehicle   | SJG9989H (Car)                |           | Conta                          | act No.   | 98572570                        |                 |
| Hospital/Clinic   | NATIONAL LINIVERSITY HOSPITAL |           |                                |           |                                 |                 |
|                   | NATIONAL UNIVERSITY HOSPITAL  |           | Class<br>Drivin<br>Licend      | g<br>ce & | Class: 3<br>Date of Expiry: NIL |                 |
| Date              | 25/07/2022                    |           | Dete                           | Expiry    |                                 |                 |
| No. of Days grant | ed Medical Leave              | 03        | Date                           |           | 25/07                           |                 |
|                   |                               | 03        | Degree o                       | f         | Seriou                          | IS              |

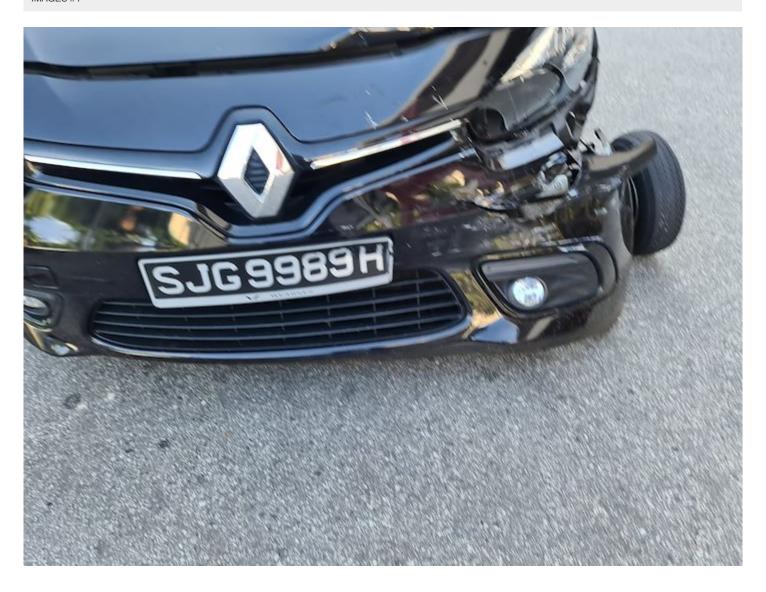
#### **Brief Details**

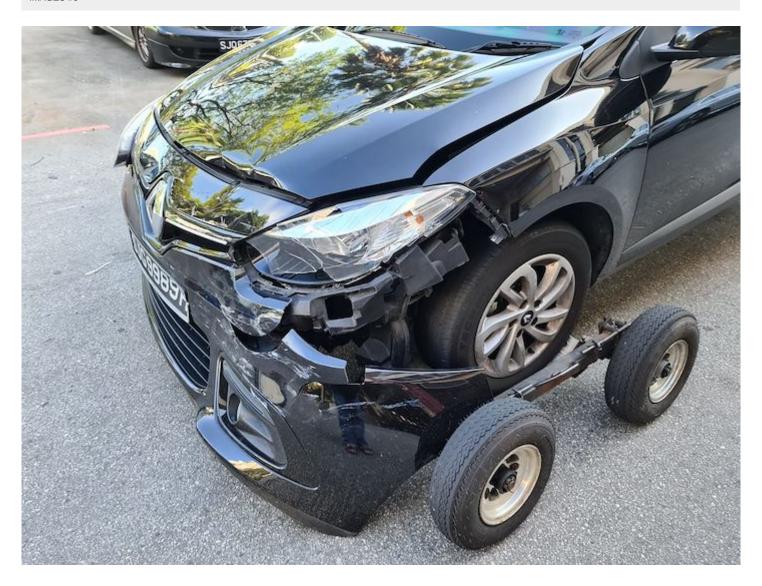
I was travelling on AYE towards Tuas on lane 4. I had just entered AYE from Alexandra Road. The traffic on Lane 4 was heavy and was slow moving and coming to a halt with the car in front of me braking. So I slowed down and had stopped when a car behind me hit me from behind. Because of the strong impact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

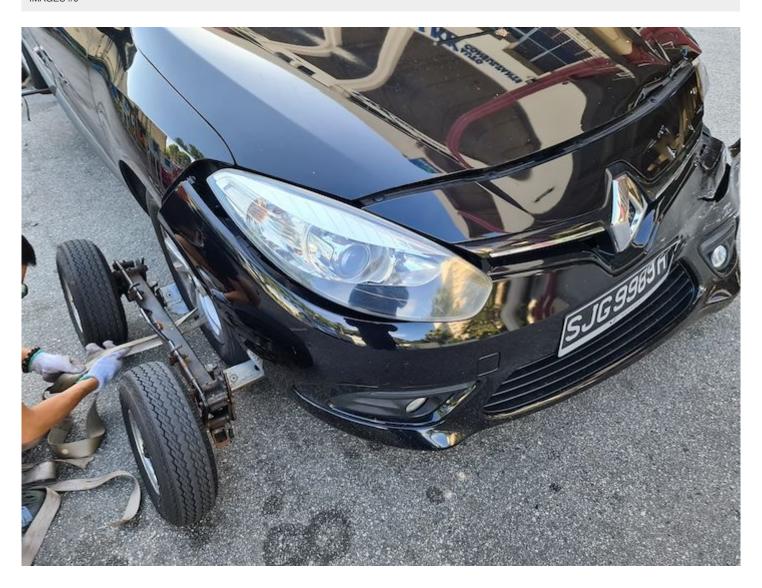


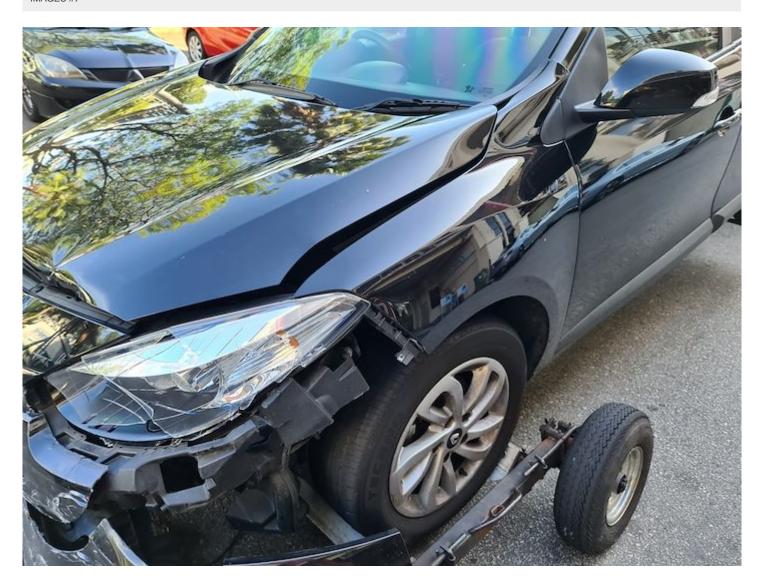


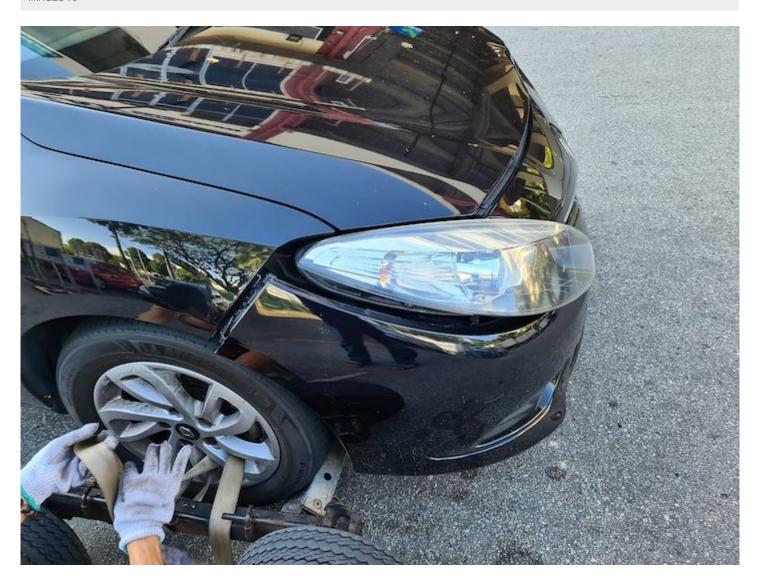


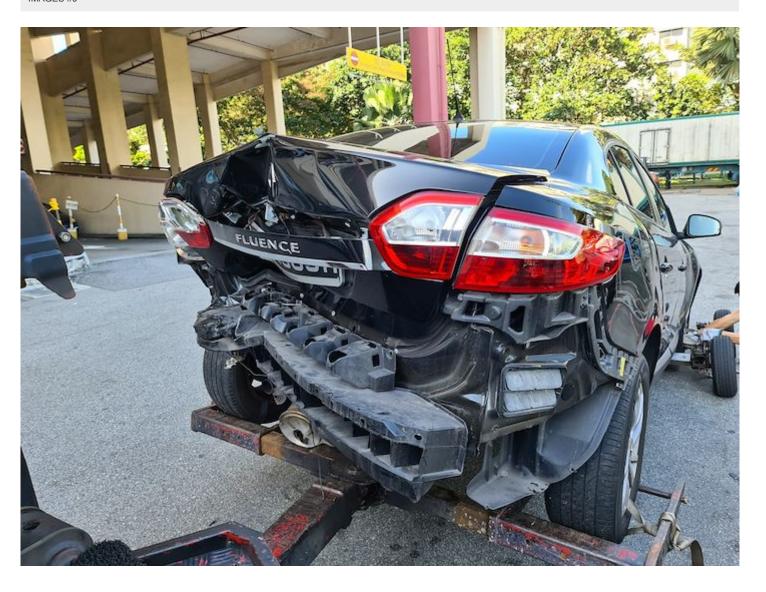




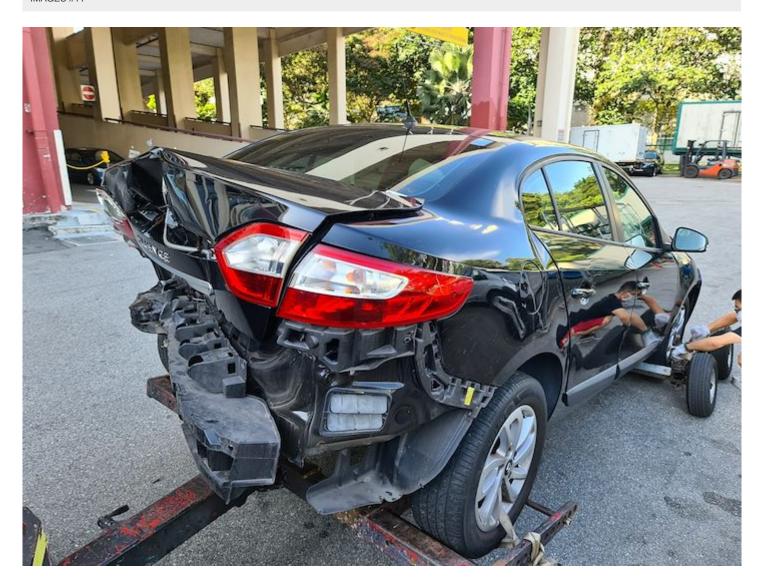


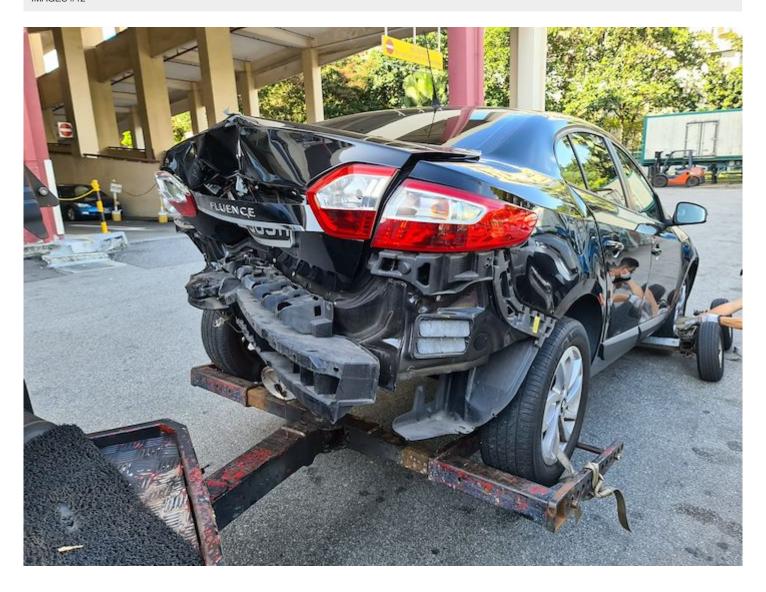


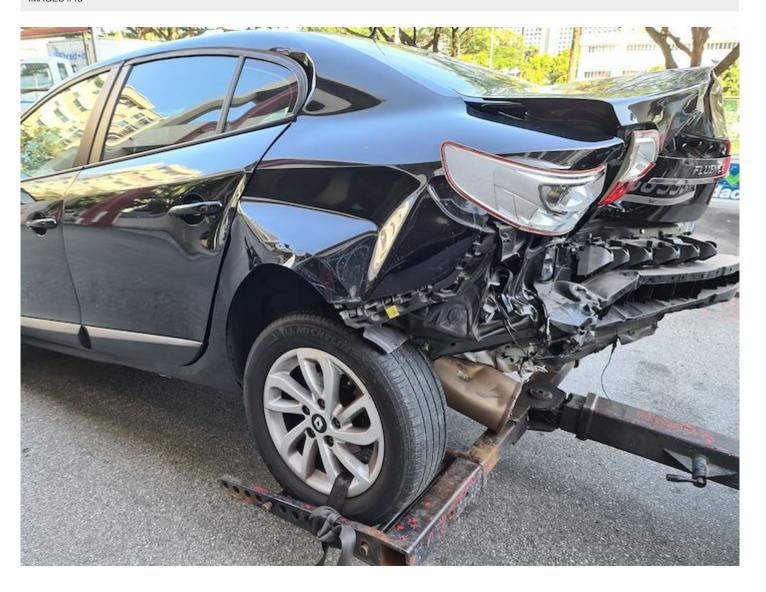


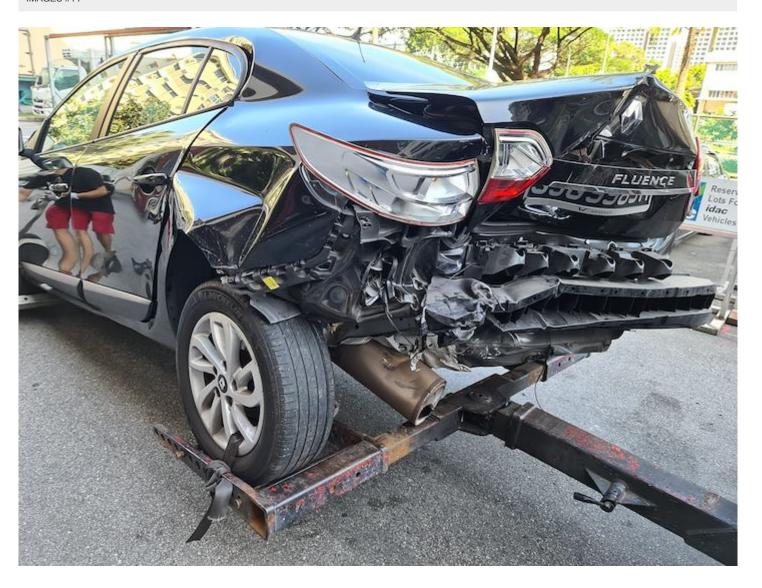


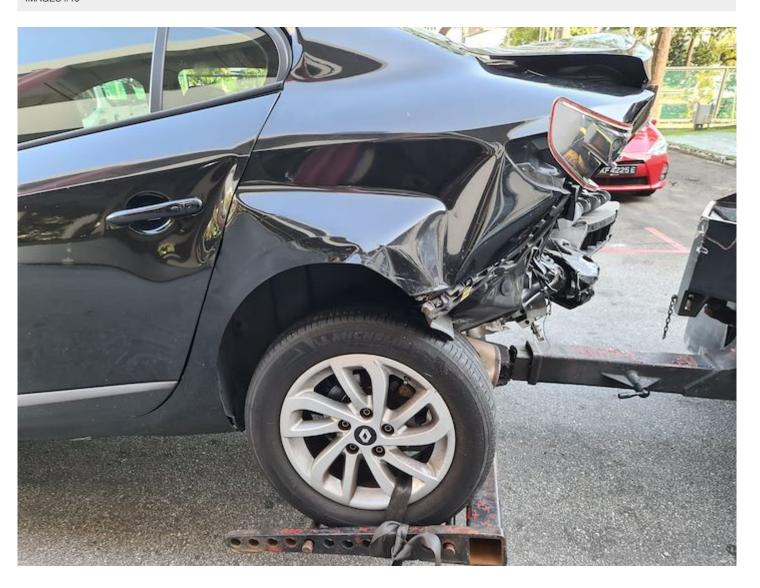


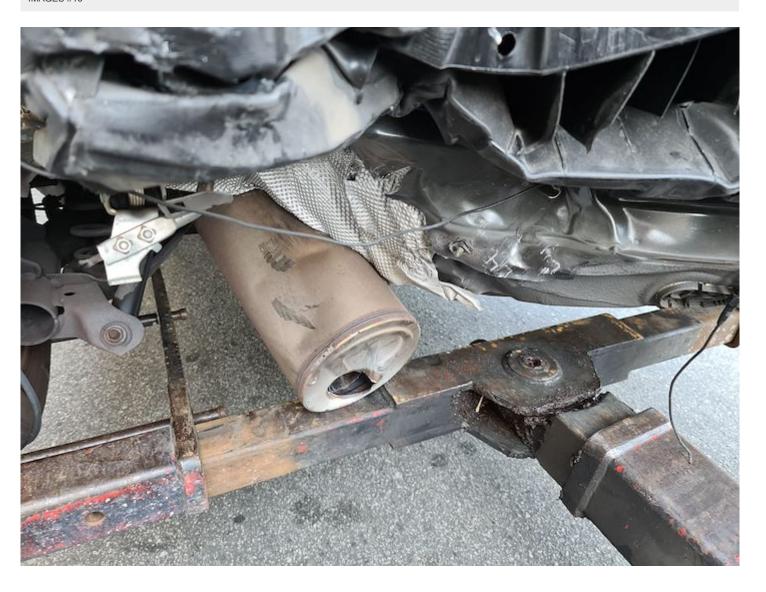


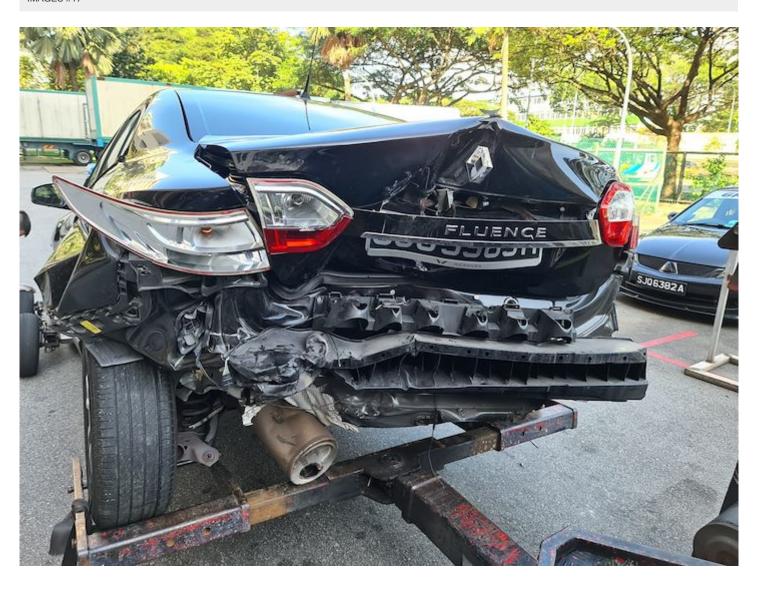


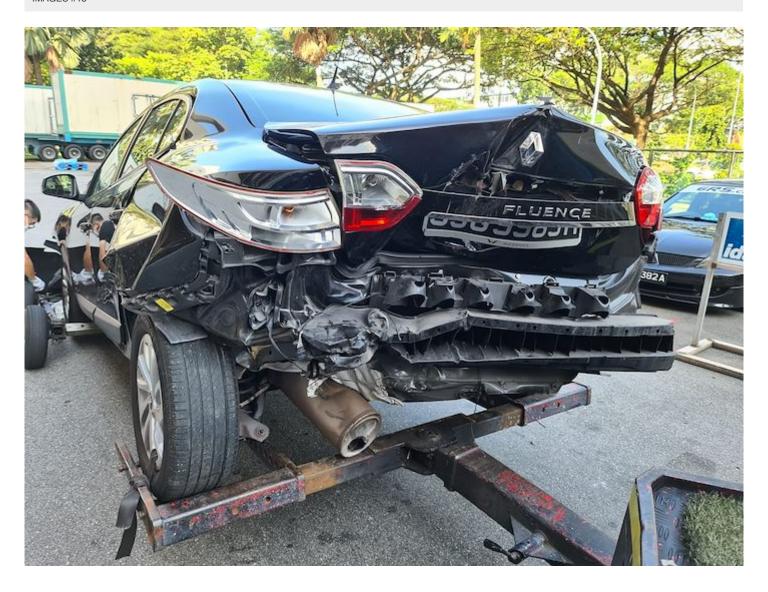


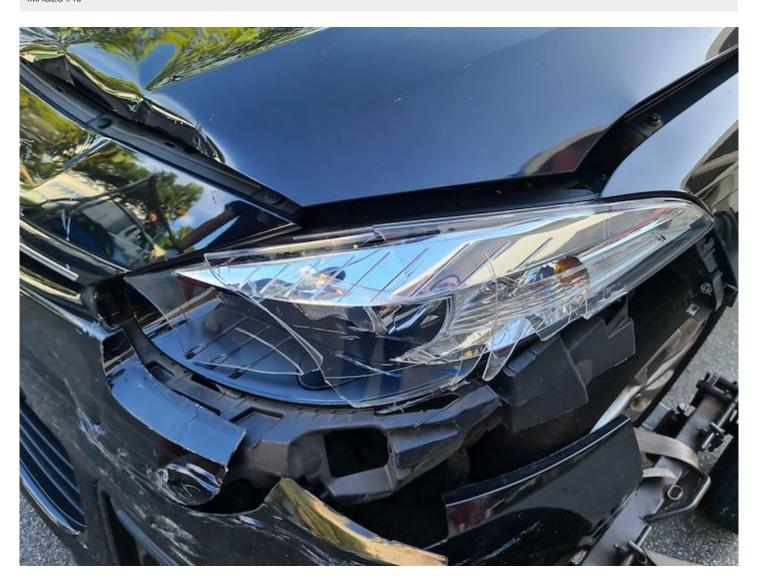
















Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865

1 of 3 Report No. T/20220726/7024

Tel No: 65470000

## REPORT OF A TRAFFIC ACCIDENT

| 26/07/2            | me Report<br>022 15:03                         | Made:                     | Vide Report No.:<br>D/20220725/0075                                | Station Diary No.          |  |  |
|--------------------|--|---------------------------|--|----------------------------|--|--|
| Informa            | nt's Partic                                    | culars                    |  |                            |  |  |
| MOHAN              | ame of Informant:<br>OHAMAD KHAIR BIN AB WAHAB |                           | Address:<br>815C CHOA CHU KANG AVENUE 7 #05-43 SINGAPORE<br>683815 |                            |  |  |
| NRIC N             | D Type / ID No.:<br>IRIC NO / S7807073J        |                           | Contact No.:<br>Home/Office:                                       | Mobile: 00570570           |  |  |
| National<br>SINGAP | ity:<br>ORE CITIZ                              | ŒΝ                        | Email: Mobile: 98572570  Email: mohdkhair1978@yahoo.com.sg         |                            |  |  |
| Sex:<br>Male       | Age:   | Date of Birth: 22/03/1978 | Type of Informant:   | sg                         |  |  |
| Race:<br>Malay     |  |                           | Language:<br>English   | Institution / School Name: |  |  |
| Occupati           | on:  |                           | Driving Licence Information:<br>Class: 3                           | Date of Expiry:            |  |  |

| Type of<br>Accident:   | Injury<br>Attended by Police | Drink<br>Drive:<br>No  | Date/Time of<br>Accident:<br>25/07/2022 18:00 | Type of Location<br>Straight Road                    |
|--|------------------------------|--|---|--|
| ALEXANDRA  | ROAD                         |  |   |  |
| Weather:   |                              |  |   |  |
| Clear  |                              | Road Surface:<br>Dry   | R   | oad Speed Limit:                                     |
| The state of the s |                              | Control of the contro |   | oad Speed Limit:<br>O Km/h<br>raffic Volume:<br>eavy |

| Vehicle No. | Туре | Make    | Model                           | Color | 0 ""                 |       |
|-------------|------|---------|---------------------------------|-------|----------------------|-------|
| SJG9989H    | Car  | RENAULT |                                 |       | Conditio             | No of |
|             |      | KENAGET | FLUENCE+1<br>.5+DCI+110<br>+A/T | Black |                      | 0     |
| SJH7993C    | Car  | HONDA   | Character                       |       |                      |       |
|             | B    | HONDA   | Stream                          | White | Seriously<br>Damaged | 1     |





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

| Vehicle No. | Type  | Make   | Model | 10.   |                     |       |
|-------------|-------|--------|-------|-------|---------------------|-------|
| SLW6985E    | Car   |        | Model | Color | Conditio            | No of |
|             | Dai D | TOYOTA |       | Brown | No                  | 1     |
| SNA8875T    | Car   | JAGUAR |       |       | Damage              | 100   |
|             | C     | JAGUAR |       | Blue  | Slightly<br>Damaged | 1     |

|          | ehicle Insurance  |                        | A STATE OF THE PARTY | William Property       |  |
|----------|---|------------------------|----------------------|------------------------|--|
| SJG9989H | Insurance Company CHINA TAIPING INSURANCE (SINGAPORE) PTE, LTD. | Insurance No           | Effective            | Expiry Date 30/07/2022 |  |
|          |   | DMPCSNW001512<br>62101 | 31/07/2021           |                        |  |

| Any Pedestrian                       | Involved: No                                |             |                                |             |   |   |  |
|--------------------------------------|---|-------------|--------------------------------|-------------|---|---|--|
| No. of Pedestria                     | ns Injured: NIL                             |             | Line of D                      | 1 11 0      |   |   |  |
| Driver                               |   |             | Use of Pedestrian Crossing: NA |             |   |   |  |
| Name                                 | MOHAMAD KHAIR BU                            | NI AD MALAL |                                |             | 1 |   |  |
|                                      | MOHAMAD KHAIR BIN AB WAHAB                  |             | AB                             | ID No.      |   | S7807073J                                   |  |
| Related Vehicle                      | cle SJG9989H (Car)                          |             |                                |             |   |   |  |
| Tornoic                              |   |             |                                |             |   | 98572570<br>Class: 3<br>Date of Expiry: NIL |  |
| Hospital/Clinic                      | ospital/Clinic NATIONAL UNIVERSITY HOSPITAL |             |                                |             |   |   |  |
| opida omio                           |   |             | TAL                            |             |   |   |  |
| Date                                 | 25/07/2022 Date                             |             |                                |             |   |   |  |
| Vo of Days granted M. H. Li          |   |             | Date                           | 25/07/      |   | 22  |  |
| to: or days granted Medical Leave 03 |   |             | Degree of                      | e of Seriou |   |   |  |

#### 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.





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

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

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: