

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 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	29/08/2022 17:13 (SGT)
Reported by	Driver
Date of Accident	28/08/2022 18:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	PIE TWDS CHANGI
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMD7987G
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	SIANG HOCK CAR RENTAL PTE LTD
Company Reg No	2XXXXX271R
Email Address	car.rental@sianghock.com.sg
Mobile Phone No	(Phone) +65-98792002
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Estima
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	2362

INSURANCE COMPANY

Name of Insurance Company	MS First Capital Insurance Ltd
Policy Number / Cover Note Number	D-22099211MFZH/7

DRIVER

Name of Driver	BOHA'ARE BIN ZAIDI
NRIC No	SXXXX711C
Date Of Birth	15/12/1962
Occupation	Outdoor

Date Of Driving Pass	22/04/2000
Driving experience	22 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97893071
Alt. Phone Number	-
Email Address	car.rental@sianghock.com.sg
Address	BLK 132 BEDOK NORTH ST 2
Address complement	#15-83
Postcode	460132
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	RENTAL
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?	Yes
Number of vehicles involved in the accident	3
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)	6
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	-

FOREIGN VEHICLE 1

Vehicle Registration Number	MCR8131
Vehicle Category	Private car

PASSENGER 1

Name	PASSENGER
Gender	Male

PASSENGER 2

Name	PASSENGER
Gender	Female

PASSENGER 3

Name	PASSENGER
Gender	Female

PASSENGER 4

Name	PASSENGER
Gender	Female

PASSENGER 5

Name	PASSENGER
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Bedok Division Headquarters
Police Station Phone No	(Phone) +65-18002440000
Alt. Police Station Phone No	(Fax) +65-64443009
Police Station Address	30 Bedok North Road Singapore 469676
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE ATTACHED STATEMENT

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	FBQ2756B
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Motorcycle
Name of Driver	MOHAMED IQBAL BIN ABDUL KAABA
NRIC No	SXXXX730J
Contact Number	(Phone) +65-94571047
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	MCR8131
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	HENRY NG SWEE THIAM
Contact Number	(Phone) +65-93979170
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

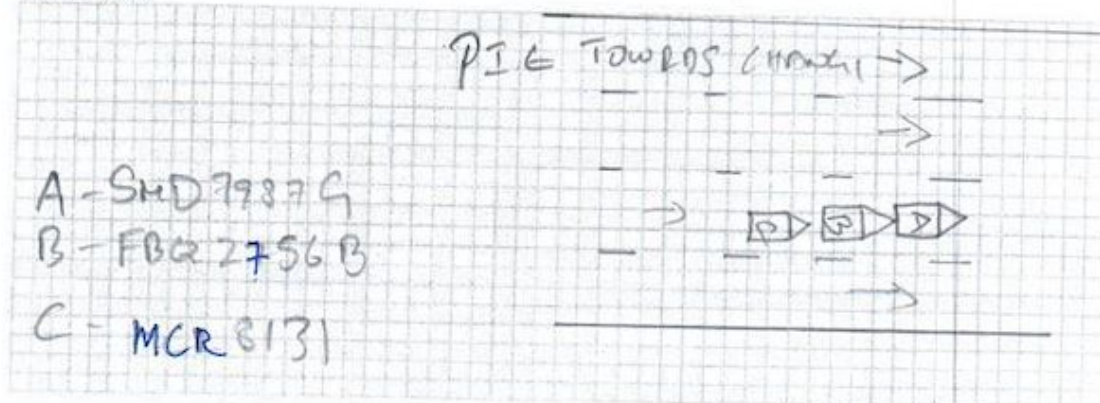
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**
I understand,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

 29/08/12
Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstances of the Accident

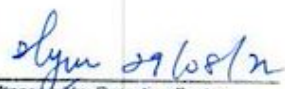
On 28 AUG 2022 @ 06:00 pm I was driving the Vehicle SMD7987G along PIE towards Changi.
 I was on my second lane and travelling straight, in front the traffic was slow due to the road works, so I slow down my vehicle and suddenly I felt a huge impact on my vehicle from behind.
 I stopped and came down behind, then I realized the motorcycle FBQ2756B hit behind my vehicle and behind him there was a foreign car MCR8131.
 Later the Police, LTA and ambulance came, the motorcycle rider got minor injuries.

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



**SINGAPORE
POLICE FORCE**



G/20220829/7029

1 of 3

POLICE REPORT (NP299)

Report No. G/20220829/7029

Police Station Of Origin
Bedok Division HQ
30 Bedok North Road SINGAPORE 469676
Tel No:1800-2440000

Date/Time Report Made 29/08/2022 11:49	Vide Report No.	Station Diary No.
Name Of Informant BOHA'ARE BIN ZAIDI	Address APT BLK 132 BEDOK NORTH STREET 2 #15-83 SINGAPORE 460132	
ID Type / ID No. NRIC NO / S1558711C	Contact No. Home/Office: Mobile: 97893071	
Nationality SINGAPORE CITIZEN	Email Address Boh-Zai@hotmail.com	
Occupation Operation assistant	Sex Male	Age 59
Institution/School Name	Date of Birth 15/12/1962	Race Malay
Date/Time Of Incident 28/08/2022 18:00 - 28/08/2022 19:00	Language English	
	Location Of Incident APT BLK 132 BEDOK NORTH STREET 2 #15-83 SINGAPORE 460132	

Brief details.

On 28 August 2022 at 6:00pm I was driving the Vehicle SMD7987G along PIE towards Changi, I was on my second lane and travelling straight, in front the traffic was slow due to road works, so I slow down my vehicle and suddenly I felt a huge impact on my vehicle from behind. I stopped my car and came down behind, then I realized the motorcycle FBQ2756B hit behind my vehicle and behind him there was a foreign car MCR8131. Later the police, LTA and ambulance came, the motorcycle rider got minor inquiries.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 29/08/2022 11:49
Officer In-Charge Of Case:	Classification Of Case:























**SINGAPORE
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G/20220829/7029

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ID Type / ID No. NRIC NO / S1558711C	Contact No. Home/Office: Mobile: 97893071	
Nationality SINGAPORE CITIZEN	Email Address Boh-Zai@hotmail.com	
Occupation Operation assistant	Sex Male	Age 59
Institution/School Name	Date of Birth 15/12/1962	Race Malay
Date/Time Of Incident 28/08/2022 18:00 - 28/08/2022 19:00	Language English	
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Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE
POLICE FORCE**



G/20220829/7029

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20220829/7029

Subjects Involved			
Suspect			
Person Name	MOHAMED IQBAL BIN ABDUL KAABA		
ID Type	NRIC NO	ID No	S9147730J
Gender	Male	Age	31
Race	Indian	Language	Malay
Mobile No	94571047	Complexion	Dark
Build	Medium	Height About	175cm
Attire Last Worn	Black dri-fit t-shirt with black jogger pants	Hair Colour	Black
Hair Style	Short-Straight		
Victim			
Person Name	BOHA'ARE BIN ZAIDI		
ID Type	NRIC NO	ID No	S1558711C
Gender	Male	Age	59
Race	Malay	Language	English
Occupation	Operation assistant	Address Type	
Address	APT BLK 132 BEDOK NORTH STREET 2 #15-83 SINGAPORE 460132	Mobile No	97893071
Is Informant A Victim?	Yes		
Person Name	BOHA'ARE BIN ZAIDI (Informant)		

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:

Signature Of Informant:

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

Date/Time:
29/08/2022 11:49

Classification Of Case:

**SINGAPORE
POLICE FORCE**

G/20220829/7029

3 of 3

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20220829/7029

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Officer In-Charge Of Case:	Classification Of Case: