# **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 05/09/2022 18:04 (SGT) Reported by Date of Accident 05/09/2022 08:30 (SGT) Exact Location of Accident Singapore Additional Location Information CTE towards City before Ang Mo Kio Ave 5 exit Country/State of Loss Singapore

### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SFD2828Z

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner Chang Poh Nah NRIC No S7517846H Email Address jac\_changpn@yahoo.com.sg Mobile Phone No (Phone) +65-88232828 Alternative Phone No

### VEHICLE PARTICULARS

Manufacturer Audi Model A6 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 CC 1798

**INSURANCE COMPANY** 

Name of Insurance Company AXA Insurance Pte Ltd Policy Number / Cover Note Number GA563211/1

DRIVER

Name of Driver Chang Poh Nah NRIC No S7517846H Date Of Birth 19/06/1975 Occupation Indoor

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	22/09/1995 27 YEARS Female (Phone) +65-88232828 - jac_changpn@yahoo.com.sg BLK 468B Admiralty Drive #13-31 - 752468 Yes - No
Type of Accident Weather Conditions Road Surface	Collision - Head to Rear Clear Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident?  Number of vehicles involved in the accident  Was anybody injured in the Accident?  Was any injured conveyed to hospital by ambulance?  Was any other vehicle or property damaged?  Number of Passengers (Including Driver)  Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?  Translator's name  Translator's ID  Translator's phone number  Translator's email  Original language used in the statement	No 2 Yes No Yes 1 No
DETAILS OF POLICE ACTION	
Was the accident reported to the police? Police Station Name Police Station Phone No Police Station Address Was notice of intended Prosecution given? If yes, against whom?	Yes Sembawang Neighbourhood Police Centre (Phone) +65-18005549999 4 Sembawang Crescent Singapore 757633 No
CIRCUMSTANCES OF ACCIDENT	
REFER TO SKETCH PLAN  ATTACHMENT(S)  Are accident photos available for attachment?  Was there any video captured by Car Camera?	Yes No
DETAILS OF OTHER	VEHICLE PROPERTY 1
Vehicle Registration Number Vehicle Manufacturer Vehicle Model Vehicle Variant	FBP903L - -

Vehicle Colour

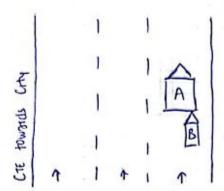
Vehicle Category	Motorcycle
Name of Driver	Muhammad Aliffi
NRIC No	S9431135G
Contact Number	(Phone) +65-98009445
Address	<del>-</del>
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

## INJURED PERSONS DETAILS

### INJURED 1

Name of injured person	Muhammad Aliffi
Gender	-
Phone No	(Phone) +65-98009445
Address	<del>-</del>
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	FBP903L
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	No

# SKETCH PLAN



A : SFD 28282

B : FBP 903 L

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

effore Ang Mo KIO AVE S exit on the right most lane. Traffic was allow moving and authority reflicte B crash into my rear.  Motortyclist suffered minor injuries and refuse to be conveyed to hospital by ambulance.	On 05 Sept 2022, 3	t about 0830Hrs, 1	was driving stong	CTE towards City
motorcyclist suffered minor injuries and refuse to be conveyed to hospital by	etore my mo kil me	3 exit on the right	most lone. Tras	the was slow moving
	motoryclust suffered mi	nor injuries and refuse	to be conveyed to	hospital by

I/We declare the foregoing particulars are true in every respect.

PolicyKolder's Signature

Driver's Signature (If driver is not the policyholder) Date & Time:

Reporting Centre Personnel's Signature

NRIC/FIN No.:

### SKETCH PLAN

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- 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.
- 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.
- By the lodgment 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:
  - 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Driver's Signature

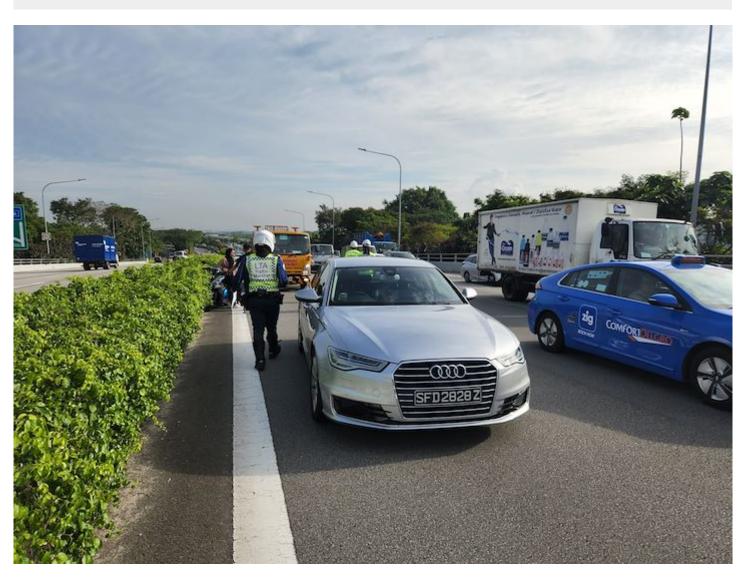
(If driver is not the policyholder)

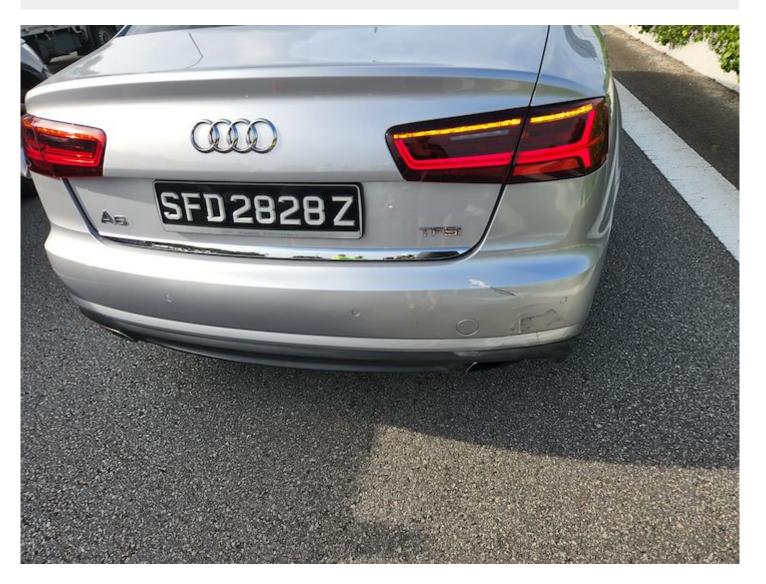
Date & Time:

Reporting Centre Personnel's Signature

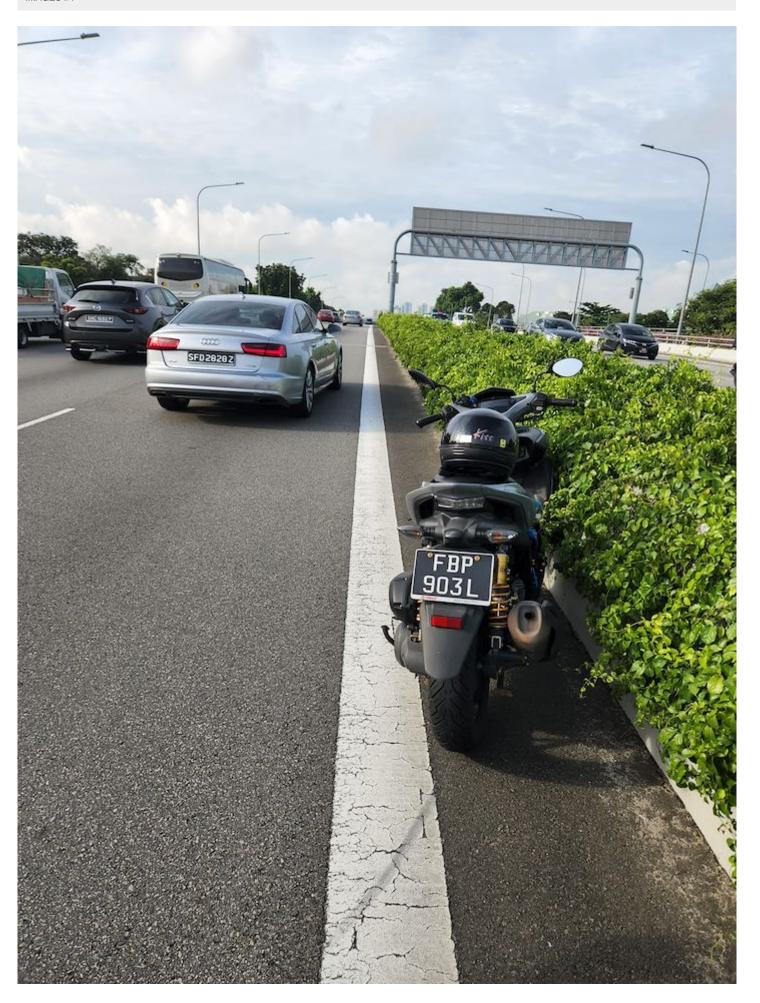
Name:

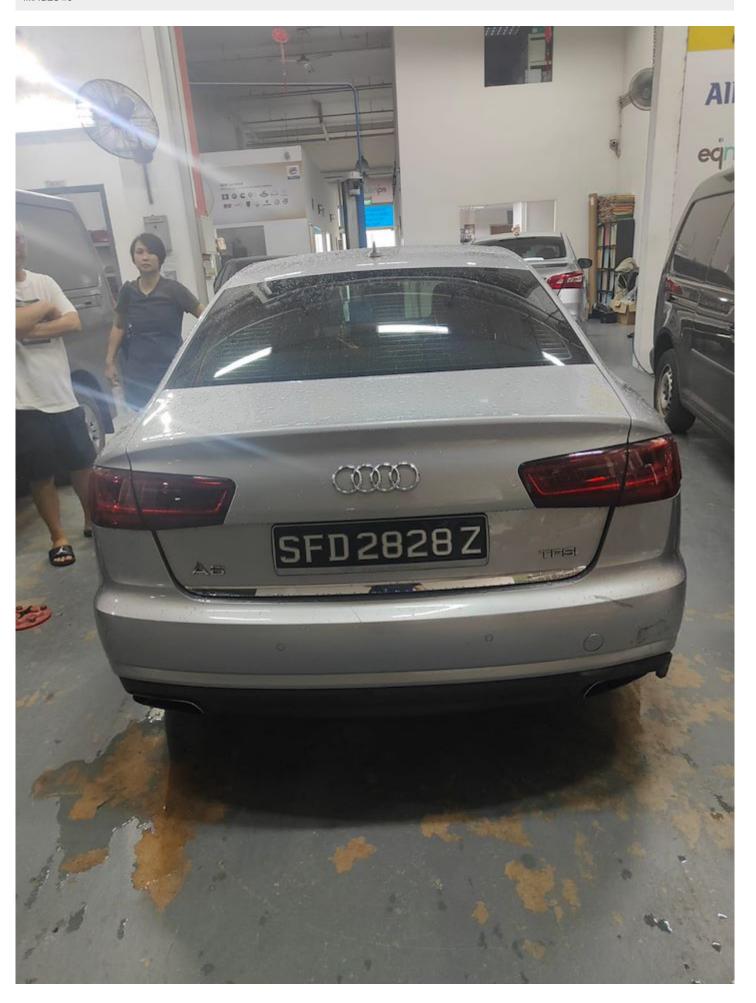
NRIC/FIN No.:

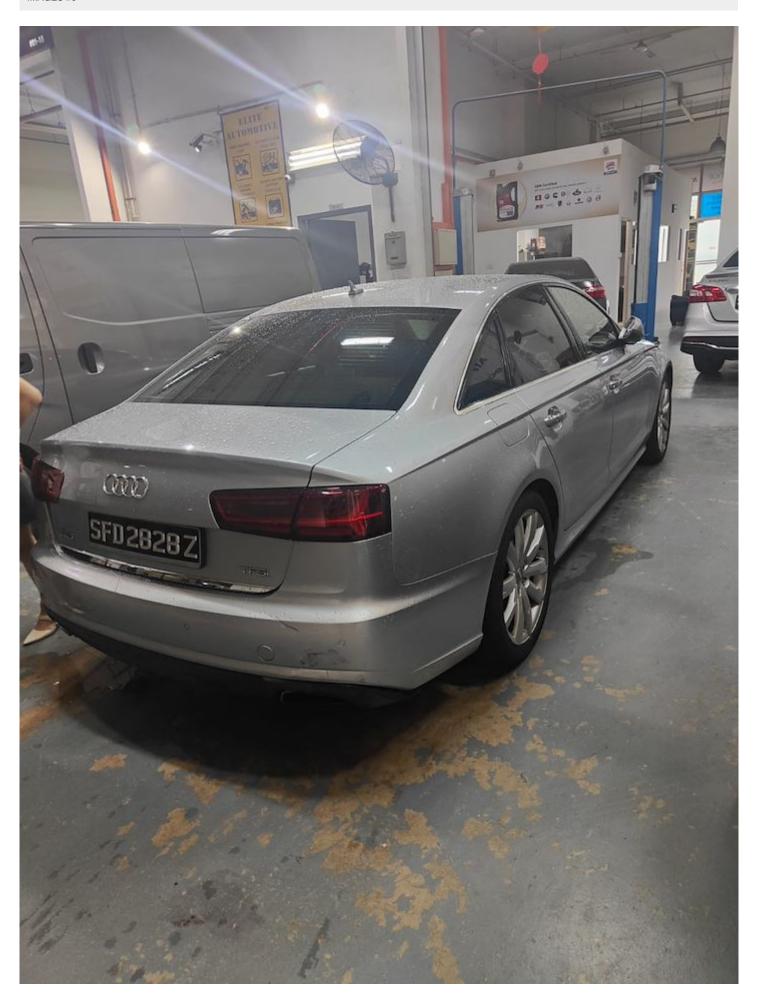


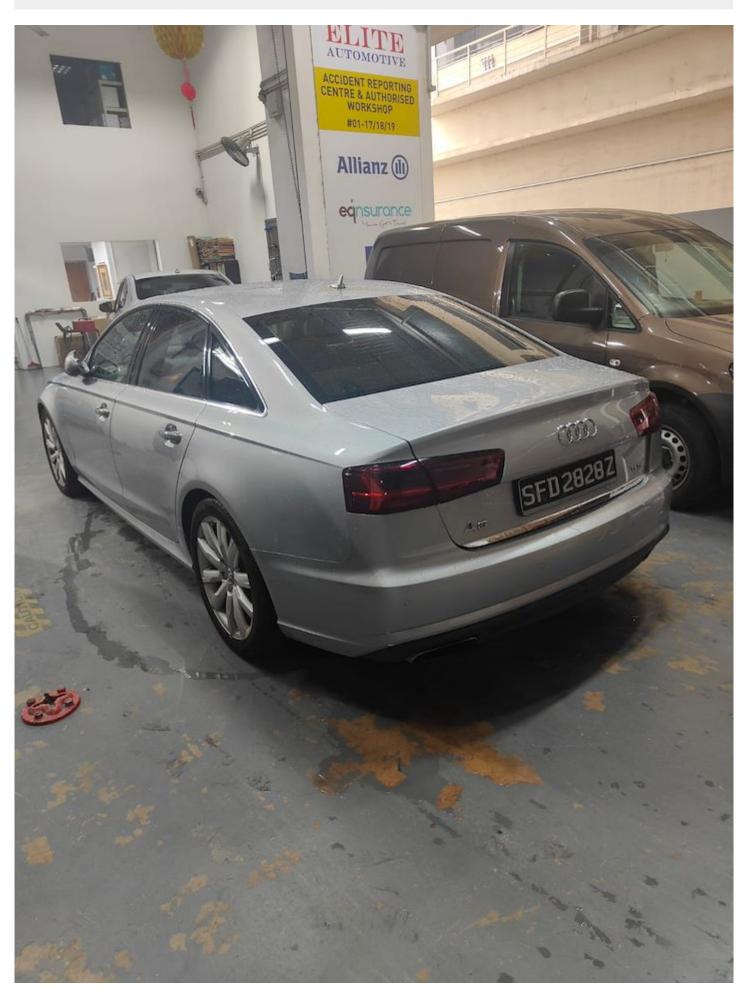


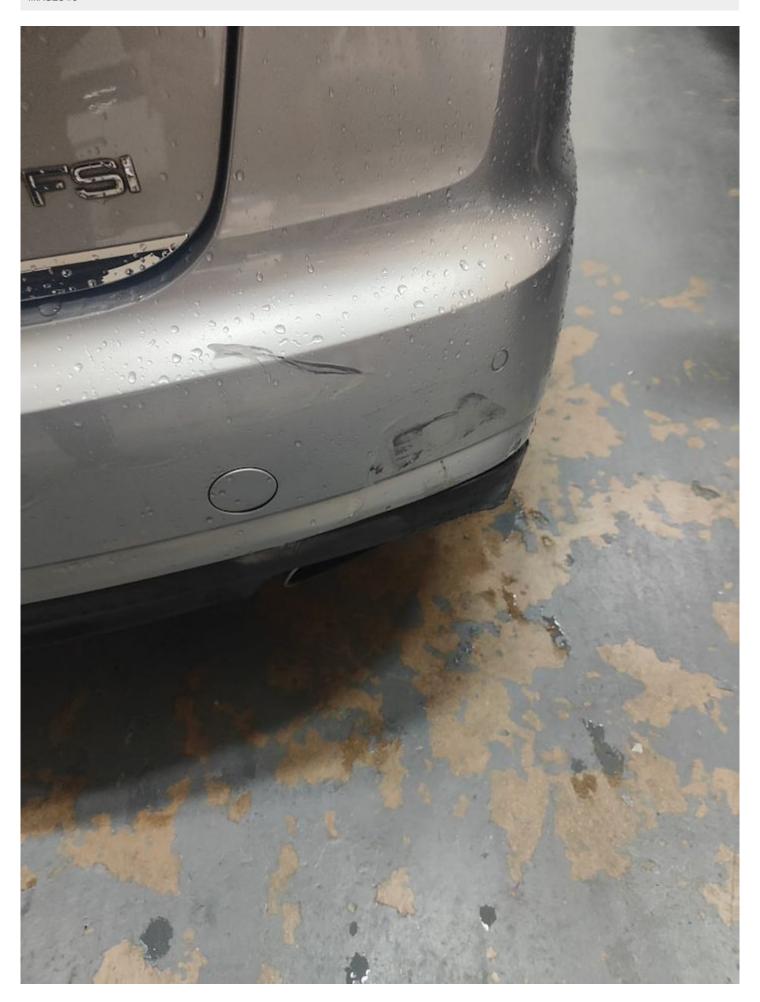




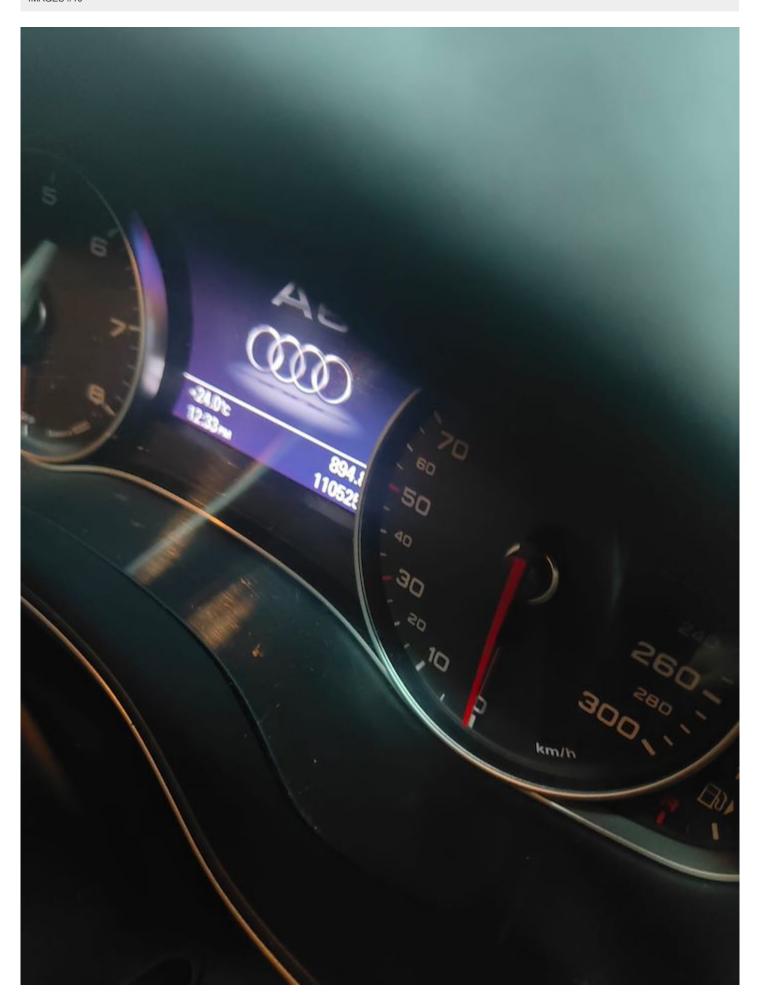












### CONFIDENTIAL

Annex E

### NOTICE OF COMPLIANCE

This is to confirm that Chang Poh Nah, S7517846H, H/P 88232828, residing at Blk 468B Admiralty Dr #13-31 S(752468) has reported to the Police a non-injury traffic accident which occurred at along CTE before Ang Mo Kio Ave 5 near lamp post 18F on 05/09/2022 at about 0830hrs.

Involving the following vehicles:

- · SFD2828Z (Complainant's vehicle)
- FBP903L (Rider: Muhammad Aliffi, S9431135G Blk 56 Lengkok Bahru #02-445, H/P 98009445)

Complainant was driving along CTE near L/P 18F when the rider hit complainant's vehicle from the back.

The damage of complainant's vehicle were scratches and cracks on the rear right side. The bumper and exhaust pipe were damaged as well.

2 This accident was reported to the Police within 24 hours of its occurrence, Then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap

Rank/Name of Issuing Officer: Sgt (3) Wan Farah Dina

Date: 05/09/2022 Time: 1125hrs

276.

S/D Ref: 22

SEMBAWANG NPC

Tal: 1300-5549999 Fax: 68522499

Police Post/Unit: Sembawang Neighbourhood-Police Centre

Original - to be issued to informant Duplicate - to be submitted to Traffic Police

CONFIDENTIAL

