

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	13/09/2022 16:45 (SGT)
Reported by	Driver
Date of Accident	12/09/2022 19:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	Bartley Rd East by Upper Paya Lebar Rd
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKW2105S
-----------------------------------	----------

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	SITI AISHAH BINTI KASMURI
NRIC No	S8272398F
Email Address	CTAISHAH05@YAHOO.COM.SG
Mobile Phone No	(Phone) +65-92722791
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mazda
Model	5
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	2000

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5129474974

DRIVER

Name of Driver	JOHANNES ASMIRA BIN JAFFAR
Passport No/FIN	S8115293D
Date Of Birth	15/05/1981
Occupation	Indoor

Date Of Driving Pass	25/05/2001
Driving experience	21 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98206781
Alt. Phone Number	-
Email Address	Jotoast5@gmail.com
Address	BLK 253 KIM KEAT AVENUE #01 - 132
Address complement	-
Postcode	310253
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	Collision - Head to Rear
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
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)	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	Tanglin Division Headquarters
Police Station Phone No	(Phone) +65-18003910000
Alt. Police Station Phone No	(Fax) +65-63964900
Police Station Address	21 Kampong Java Road Singapore 228892
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

Refer to Police report.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	Advise to send to motorvideo@income.com.sg

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJA925H
Vehicle Manufacturer	-
Vehicle Model	-

Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	Tan Sin Tee
Contact Number	(Phone) +65-91080109
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	3

Describe Circumstance of the Accident

Refer to Police Report

Declaration

I/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 3/09/2022 1440hrs

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

SKETCH PLAN**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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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.

8. Consent under the Personal Data Protection Act (PDPA)

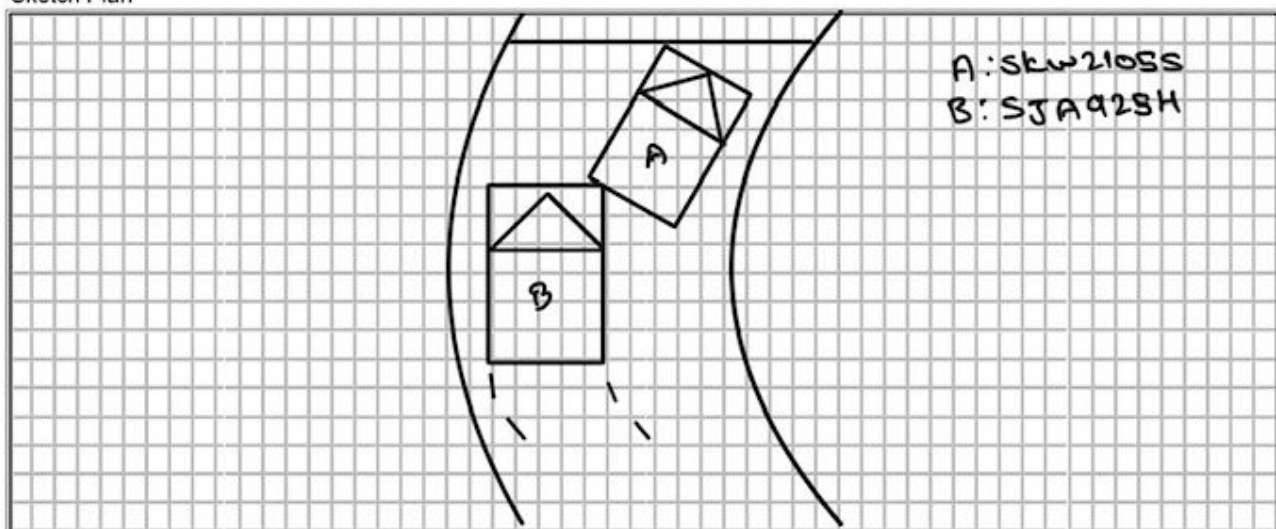
I understand, acknowledge, agree and consent that:

- (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.

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time 12/09/2022 1440hrs

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

Sketch Plan







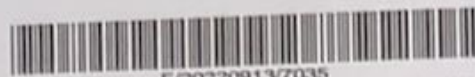








**SINGAPORE
POLICE FORCE**



E/20220913/7035

1 of 2

Report No. E/20220913/7035

POLICE REPORT (NP299)

Police Station Of Origin
Tanglin Division HQ
21 Kampong Java Road SINGAPORE
228892
Tel No: 1800-3910000

Date/Time Report Made 13/09/2022 15:50	Vide Report No.	Station Diary No.
Name Of Informant JOHANNES ASMIRA BIN JAFFAR	Address 253 KIM KEAT AVENUE #01-132 SINGAPORE 310253	
ID Type / ID No. NRIC NO / S8115293D	Contact No. Home/Office:	Mobile: 98206781
Nationality SINGAPORE CITIZEN	Email Address JOTOAST5@GMAIL.COM	
Occupation Government tax and excise official	Sex Male	Age 41
Institution/School Name	Date of Birth 15/05/1981	Race Malay
Date/Time Of Incident 12/09/2022 18:55 - 12/09/2022 19:00	Location Of Incident BARTLEY ROAD	

Brief details.

On the above mentioned date, time and place, my car, plate number SKW1205S, was stationary while waiting for the traffic to clear, for me to make a safe u-turn to Bartley Road East towards Braddell Road. I was alone in my car during the incident. While i was waiting for the traffic to clear, i felt a forceful jerk. Another car, with plate number SJA925H which was driven by one TAN SIN TEE NRIC: SXXXX683J, had rear ended my car. I went for a medical consultation on 13/09/2022 as I was experiencing headaches, neck pains and back pains. I was then given 3 days of Sick Leave from Toa Payoh polyclinic. I was then informed to put up this police report for reporting purposes.

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: 13/09/2022 15:50
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE
POLICE FORCE**



E/20220913/7035

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. E/20220913/7035

Subjects Involved			
Victim			
Person Name	JOHANNES ASMIRA BIN JAFFAR		
ID Type	NRIC NO	ID No	S8115293D
Gender	Male	Age	41
Race	Malay	Language	English
Occupation	Government tax and excise official	Address	253 KIM KEAT AVENUE #01-132 SINGAPORE 310253
Mobile No	98206781	Is Informant A Victim?	Yes
Person Name	JOHANNES ASMIRA BIN JAFFAR (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
report has been authenticated.
No signature is required.

Date/Time:
13/09/2022 15:50

Classification Of Case:

