

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 26/10/2022 15:19 (SGT)
Reported by Both
Date of Accident 22/10/2022 11:30 (SGT)
Exact Location of Accident Enggor St & Tg Pagar Rd, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMX7832P

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner MUHAMMAD NAZRI BIN SHAHAR
NRIC No SXXXX761C
Email Address N-77@HOTMAIL.COM
Mobile Phone No (Phone) +65-92270077
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Nissan
Model Note
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 hire
Transmission Auto
CC 1500

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited
Policy Number / Cover Note Number 5121301849-01

DRIVER

Name of Driver MUHAMMAD NAZRI BIN SHAHAR
NRIC No SXXXX761C
Date Of Birth 18/07/1977
Occupation Indoor

Date Of Driving Pass	27/09/2010
Driving experience	12 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-92270077
Alt. Phone Number	-
Email Address	N-77@HOTMAIL.COM
Address	280 YISHUN STREET 22
Address complement	05-340
Postcode	760280
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	Collision - Cross Junction
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?	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

PLEASE REFER TO SKETCH PLAN AND POLICE REPORT ATTACHED

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	SNF5P
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)	1

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	MUHAMMAD NAZRI BIN SHAHAR
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	14 DAYS MC
Injured person in which vehicle?	SMX7832P
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	Yes




SKETCH PLAN

IMPORTANT NOTICE

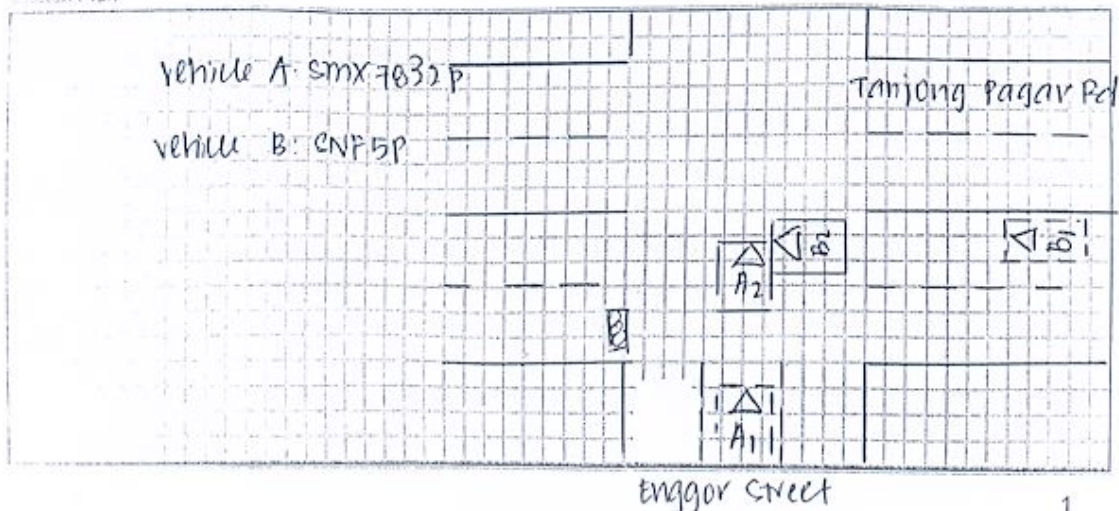
1. Please report correctly the details of the accident to speed up the claims process.
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 5. Any false reporting may be referred to the Traffic Police Department for investigation.
This report will be forwarded by the insurers to the GIA Records Management 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.


Signature / Date & Time


Driver's Signature (if driver is not the policyholder) / Date & Time


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

Sketch Plan



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



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

















**SINGAPORE
POLICE FORCE**



T/20221025/7033

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

1 of 3

Report No. T/20221025/7033

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/10/2022 14:09		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: MUHAMMAD NAZRI BIN SHAHAR			Address: 280 YISHUN STREET 22 #05-340 SINGAPORE 760280		
ID Type / ID No.: NRIC NO / S7719761C			Contact No.: Home/Office: Mobile: 92270077		
Nationality: SINGAPORE CITIZEN			Email: N-77@HOTMAIL.COM		
Sex: Male	Age: 45	Date of Birth: 18/07/1977	Type of Informant: Driver		
Race: Malay			Language: English		Institution / School Name:
Occupation: Technician			Driving Licence Information: Class:		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 22/10/2022 11:30	Type of Location: X-Junction
Location: TANJONG PAGAR ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head On				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of
SMX7832P	Car	NISSAN	NOTE 1.2 CVT ABS D/AIRBAG 2WD 5DR	Red	Seriously Damaged	0
SNF5P	Car	PORSCHE			Seriously Damaged	0



**SINGAPORE
POLICE FORCE**



T/20221025/7033

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

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Report No. T/20221025/7033

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMX7832P	NTUC Income Insurance Co-Operative Limited	5121301849-01	19/03/2022	18/03/2023

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	MUHAMMAD NAZRI BIN SHAHAR	ID No.	S7719761C
Related Vehicle	SMX7832P (Car)	Contact No.	92270077
Hospital/Clinic	SINGAPORE GENERAL HOSPITAL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	22/10/2022	Date	23/10/2022
No. of Days granted Medical Leave	14	Degree of	Serious

Brief Details.

On 22/10/2022 at about 11:30hr, I was driving my vehicle - SMX7832P, along Enggor Street. I was travelling along the middle lane whilst approaching the traffic junction which was green in my favour. At the junction, vehicle number - SNF5P, beat the red light and collided onto my vehicle's front right portion.

Subsequently, I felt great pain on my entire right side of my body and the ambulance was called for. Traffic police then attended the scene and I was conveyed to the hospital from the accident scene. I was discharged on 23/10/2022 evening with 14days medical leave.



**SINGAPORE
POLICE FORCE**

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



T/20221025/7033

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Report No. T/20221025/7033

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 / TP1B /
GOH WEI LI
Contact No.: 65476394

NP168

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

Date/Time:
25/10/2022 14:09

Classification Of Case:

