

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	01/11/2022 09:50 (SGT)
Reported by	Both
Date of Accident	31/10/2022 17:18 (SGT)
Exact Location of Accident	Near 77 Serangoon Garden Way, Singapore 555973
Additional Location Information	STOKESAY DRIVE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBJ1488T
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	SINCERELEAD GARAGE PTE LTD
Company Reg No	201706891H
Email Address	SPARROWSLOGS@GMAIL.COM
Mobile Phone No	(Phone) +65-67341869
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Hiace
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	2982

INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	SP2002269346

DRIVER

Name of Driver	MOHAMAD FADZLI BIN ABDUL HALIM
NRIC No	S8109861A
Date Of Birth	31/03/1981
Occupation	Outdoor

Date Of Driving Pass
Driving experience
Gender
Mobile Number
Alt. Phone Number
Email 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

22/03/2015
7 YEARS AND 7 MONTHS
Male
(Phone) +65-87939008
-
SINCERELEAD@HOTMAIL.COM
BLK 362 YISHUN RING ROAD
#02-1608
760362
No
Employee
No
-
-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident
Weather Conditions
Road Surface

Collision - Head to Rear
Clear
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 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

REFER TO POLICE REPORT NO. T/20221031/7060 DATED 31/10/2022

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 EY902Z
Vehicle Manufacturer Honda
Vehicle Model Accord
Vehicle Variant -

Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	KOH YOUNG CHIN
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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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' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purposes(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



Witnessed by Reporting Centre Personnel

Sketch Plan

VEH A: GBJ1488T

VEH B: EY90Z




STOKESAY CR 2


Describe Circumstances of the Accident


As per 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



**SINGAPORE
POLICE FORCE**



T/20221031/7060

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

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Report No. T/20221031/7060

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 31/10/2022 17:18	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: MOHAMAD FADZLI BIN ABDUL HALIM			Address: 362 YISHUN RING ROAD #02-1608 SINGAPORE 760362		
ID Type / ID No.: NRIC NO / S8109861A			Contact No.: Home/Office: Mobile: 87939008		
Nationality: SINGAPORE CITIZEN			Email: MDFADZLIABDULHALIM@GMAIL.COM		
Sex: Male	Age: 41	Date of Birth: 31/03/1981	Type of Informant: Driver		
Race: Malay			Language: English		Institution / School Name:
Occupation: Deliveryman			Driving Licence Information: Class:		Date of Expiry:

General Information of the Accident

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 31/10/2022 14:10	Type of Location: Straight Road
Location: STOKESAY DRIVE				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Rear to rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
EY90Z	Car	HONDA	Accord	White		0
GBJ1488T	Van					0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**

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



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Report No. T/20221031/7060

CONTINUATION OF REPORT

Driver Name	KOH YOUNG CHIN	ID No.	S7410991H
Related Vehicle	EY90Z (Car)	Contact No.	84449009
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL
Driver Name	MOHAMAD FADZLI BIN ABDUL HALIM	ID No.	S8109861A
Related Vehicle	GBJ1488T (Van)	Contact No.	87939008
Hospital/Clinic	SILVER CROSS MEDICAL CENTRE PTE LTD	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	31/10/2022	Date	31/10/2022
No. of Days granted Medical Leave	03	Degree of	Slight

Brief Details.

On the stated time and date, I turned into Stoke Say Drive and stopped my vehicle as there was an incoming vehicle, suddenly, I felt a great impact on my rear and notice EY90Z had reversed and hit onto my vehicle. The driver of EY90Z admit to his mistake and we exchanged particulars. I did not feel well after the accident and went to see the doctor. I was given 3 days MC.



**SINGAPORE
POLICE FORCE**



T/20221031/7060

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Report No. T/20221031/7060

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

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 /
MUHAMMAD NOOR BIN ABDUL RAHMAN
Contact No.: 65476219

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

Date/Time:
31/10/2022 17:18

Classification Of Case:

NP168