

## 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 ..... 22/11/2022 16:53 (SGT)  
Reported by ..... Driver  
Date of Accident ..... 18/11/2022 21:55 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... CLEMENTI ROAD  
Country/State of Loss ..... Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... GBC8402G

#### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... RENTHRU  
Company Reg No ..... 5XXXX634K  
Email Address ..... dylanbeh@hotmail.com  
Mobile Phone No ..... (Phone) +65-86954967  
Alternative Phone No ..... -

#### VEHICLE PARTICULARS

Manufacturer ..... Mitsubishi  
Model ..... Fuso  
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 ..... Commercial vehicle  
Transmission ..... Auto  
CC ..... 2199

#### INSURANCE COMPANY

Name of Insurance Company ..... China Taiping Insurance (Singapore) Pte. Ltd.  
Policy Number / Cover Note Number ..... DMCVSNW00137532200

#### DRIVER

Name of Driver ..... MUHAMMAD FIRDAUS BIN AMZAH  
NRIC No ..... SXXXX859Z  
Date Of Birth ..... 23/12/1991  
Occupation ..... Outdoor

Date Of Driving Pass .....	02/06/2011
Driving experience .....	11 YEARS AND 5 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-86537170
Alt. Phone Number .....	-
Email Address .....	firz.kiloq@gmail.com
Address .....	BLK 813A CHOA CHU KANG AVENUE 7 #16-587
Address complement .....	-
Postcode .....	681813
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Hirer
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 .....	Side Swipe
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) .....	4
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 .....	-

#### PASSENGER 1

Name .....	WIFE
Gender .....	Female

#### PASSENGER 2

Name .....	SON
Gender .....	Male

#### PASSENGER 3

Name .....	DAUGHTER
Gender .....	Female

#### 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 ATTACHED REPORT

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 ..... SNF9436U  
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) ..... -

**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

21/11/22

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

22/11/2022

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

**Sketch Plan**

AS PER ATTACHED

vJun2022

1

Describe Circumstance of the Accident

*P/s refer to the police report: T/20221119/7066*

## Declaration

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



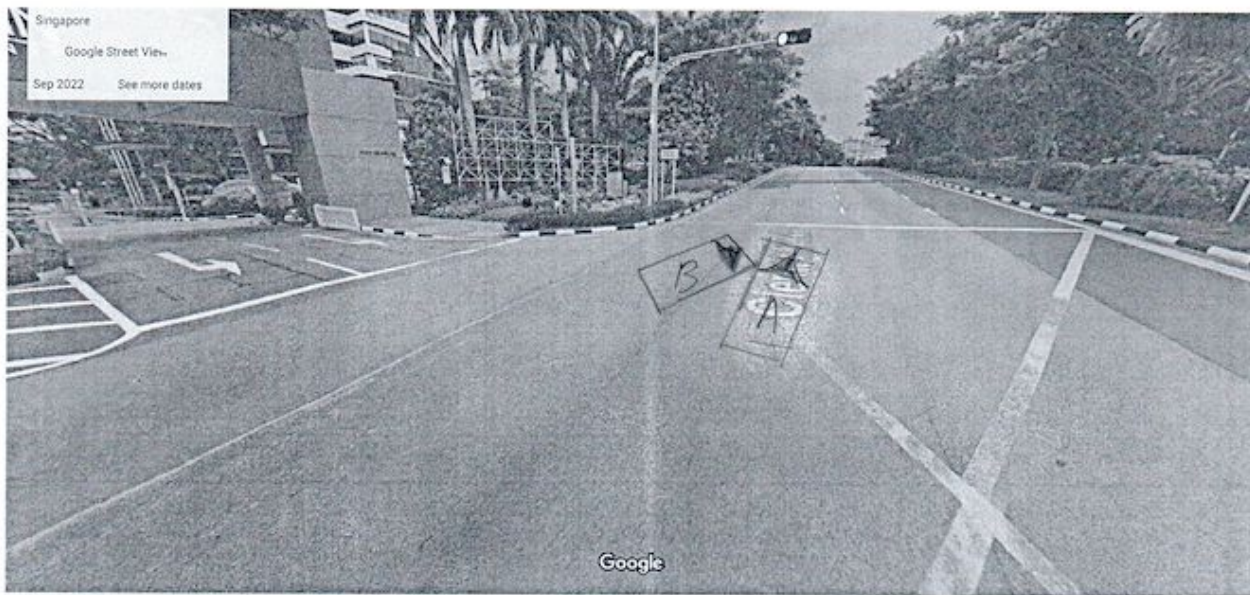
Policyholder's Signature / Date &amp; Time

*21/11/22*Actual Driver's Signature (if driver is not the policyholder)  
/ Date & Time*22/11/2022*Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)

11/21/22, 2:16 PM

535 Clementi Rd - Google Maps

Google Maps 535 Clementi Rd



A - GBL8402G  
B - SNF9436U



**SINGAPORE  
POLICE FORCE**



T/20221119/7066

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

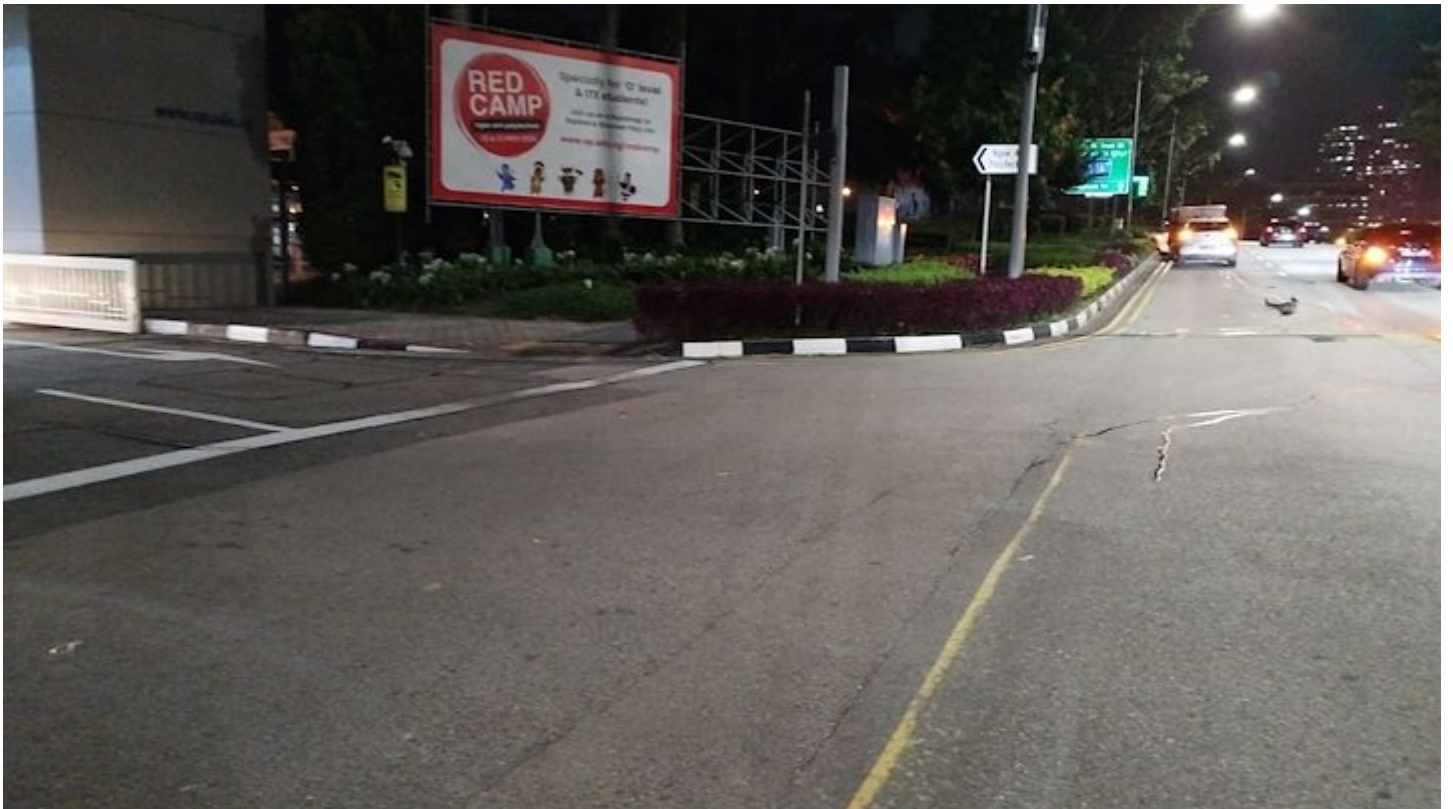
2 of 3  
Report No. T/20221119/7066

**CONTINUATION OF REPORT**

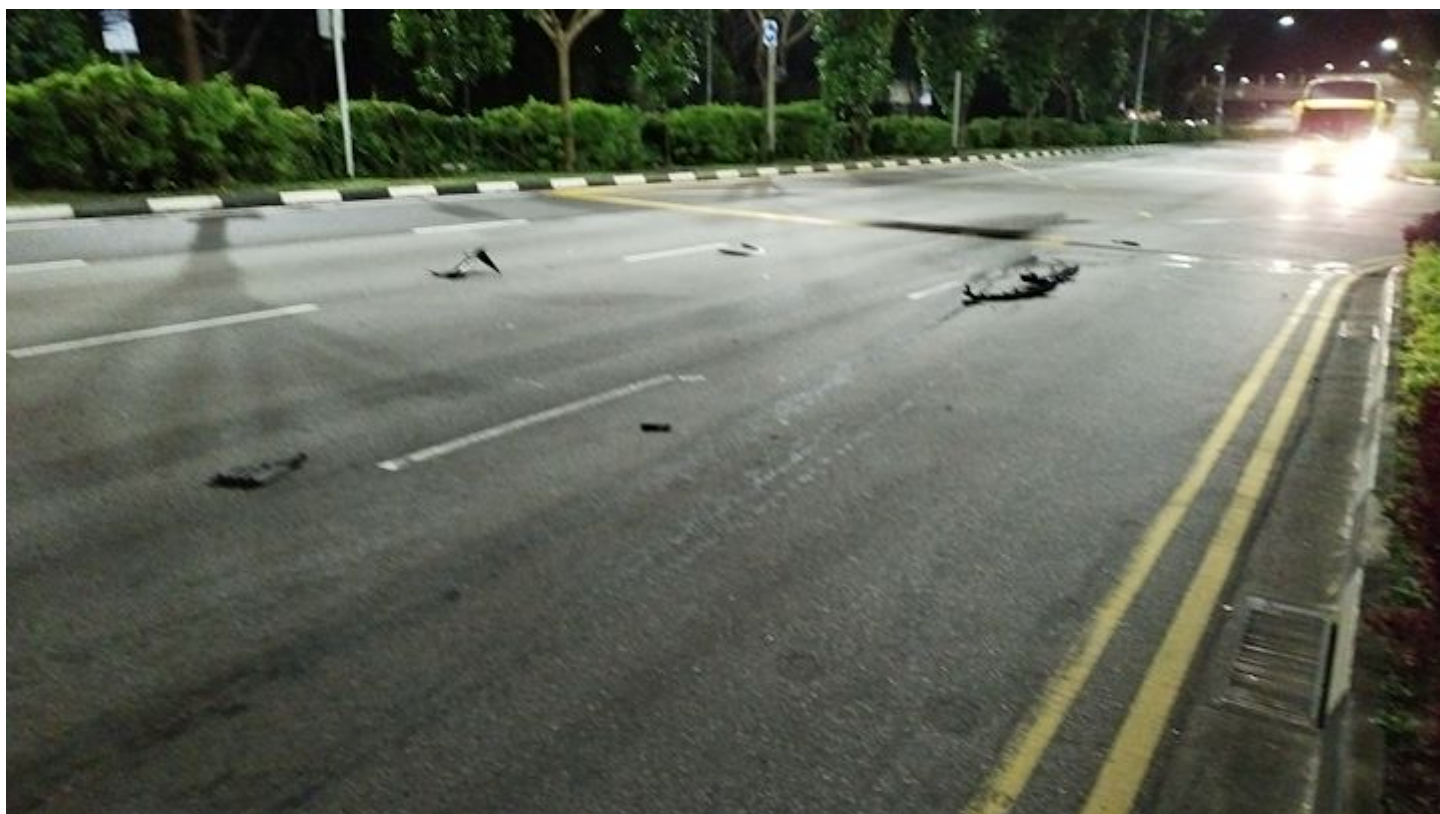
Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	MUHAMMAD FIRDAUS BIN AMZAH	ID No.	S9146859Z
Related Vehicle	GBC8402G (Lorry)	Contact No.	86537170
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL
Driver			
Name	TERESA NYSHA GOMEZ	ID No.	S9843951Z
Related Vehicle	SNF9436U (Car)	Contact No.	96411104
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3A Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

**Brief Details.**

on 18/11/2022 at around 9:55 PM, I was From Clementi making my way to Al-Azhar Restaurant via Clementi Rd, As I was passing by Ngee Ann Poly entrance, Which is a Controlled T-Junction and the carriageway towards Bukit Timah consist of 4lanes , as I was approaching the junction I slowed down as I noticed a car was coming out to the carriageway and I was on the 3rd lane, as I reaching the T-Junction I Realize the car is still moving out and joining the carriageway I Horned to Alert The Driver that there's on coming traffic, but the car joining the carriageway overextended the turn and the car hit the side of my lorry, I managed to swerve slightly to the right just before we came in contact, and luckily that reduce the impact of our collision





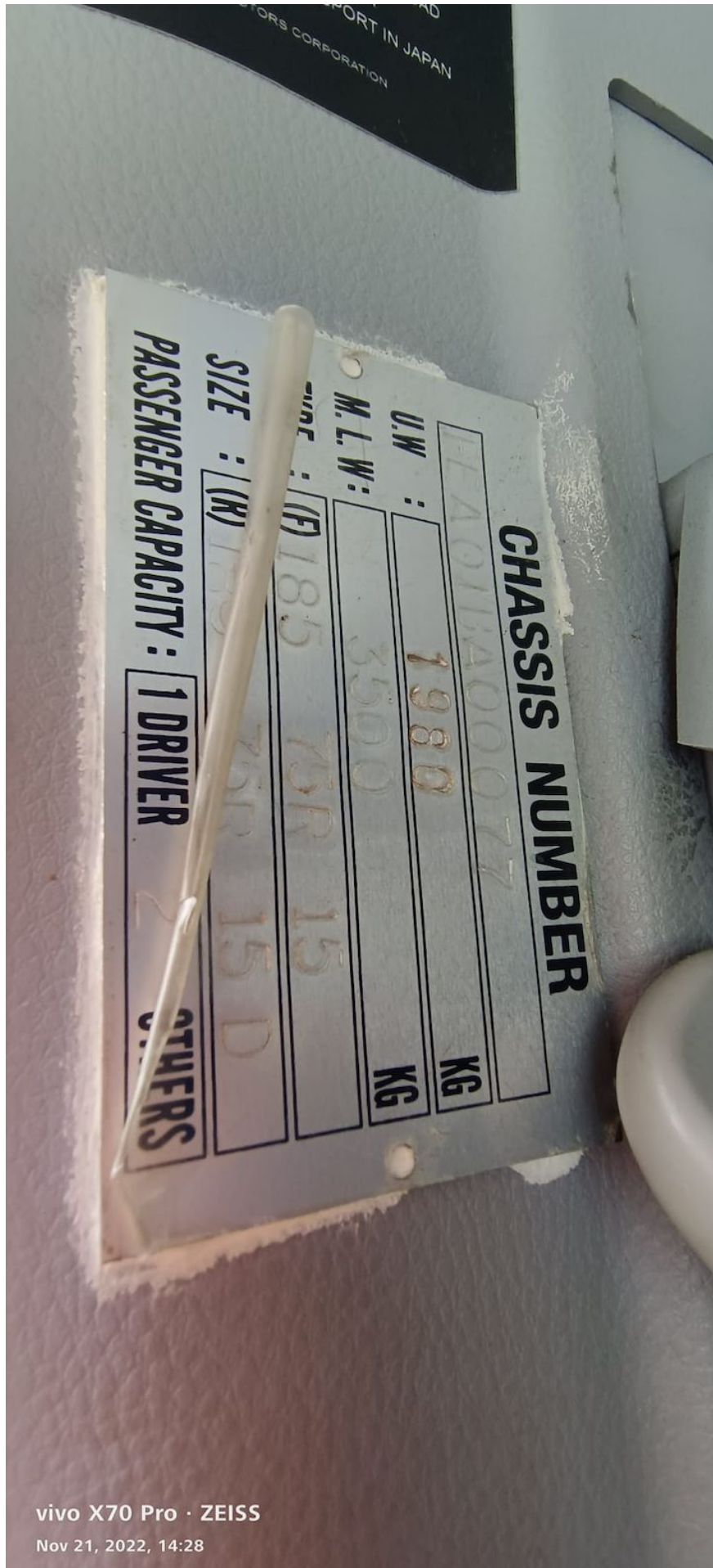


























**SINGAPORE  
POLICE FORCE**



T/20221119/7066

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

1 of 3

Report No. T/20221119/7066

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 19/11/2022 23:36		Vide Report No.: T/20221119/7003		Station Diary No.:
<b>Informant's Particulars</b>				
Name of Informant: MUHAMMAD FIRDAUS BIN AMZAH		Address: 813A CHOA CHU KANG AVENUE 7 #16-587 SINGAPORE 681813		
ID Type / ID No.: NRIC NO / S9146859Z		Contact No.: Home/Office: Mobile: 86537170		
Nationality: SINGAPORE CITIZEN		Email: firz.ki.log@gmail.com		
Sex: Male	Age: 30	Date of Birth: 23/12/1991	Type of Informant: Driver	
Race: Indonesian		Language: English	Institution / School Name:	
Occupation:		Driving Licence Information: Class:		Date of Expiry:

<b>General Information of the Accident</b>				
Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 18/11/2022 21:55	Type of Location: T-Junction
Location:  CLEMENTI ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 60 Km/h	
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
GBC8402G	Lorry					0
SNF9436U	Car			Silver	Seriously Damaged	0



**SINGAPORE  
POLICE FORCE**



T/20221119/7066

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

2 of 3  
Report No. T/20221119/7066

**CONTINUATION OF REPORT**

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	MUHAMMAD FIRDAUS BIN AMZAH	ID No.	S9146859Z
Related Vehicle	GBC8402G (Lorry)	Contact No.	86537170
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	TERESA NYSHA GOMEZ	ID No.	S9843951Z
Related Vehicle	SNF9436U (Car)	Contact No.	96411104
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3A Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

**Brief Details.**

on 18/11/2022 at around 9:55 PM, I was From Clementi making my way to Al-Azhar Restaurant via Clementi Rd, As I was passing by Ngee Ann Poly entrance, Which is a Controlled T-Junction and the carriageway towards Bukit Timah consist of 4lanes , as I was approaching the junction I slowed down as I noticed a car was coming out to the carriageway and I was on the 3rd lane, as I reaching the T-Junction I Realize the car is still moving out and joining the carriageway I Horned to Alert The Driver that there's on coming traffic, but the car joining the carriageway overextended the turn and the car hit the side of my lorry, I managed to swerve slightly to the right just before we came in contact, and luckily that reduce the impact of our collision



**SINGAPORE  
POLICE FORCE**



T/20221119/7066

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

3 of 3

Report No. T/20221119/7066

**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

NP168

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

Date/Time:  
19/11/2022 23:36

Classification Of Case: