

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	27/02/2023 14:55 (SGT)
Reported by	Driver
Date of Accident	20/10/2022 13:20 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	OLD TOH TUCK RD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLZ5973E
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	ABDUL KAHAR BIN ABDUL RAHIM
NRIC No	S1818550D
Email Address	kahars@gmail.com
Mobile Phone No	(Phone) +65-97505966
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Fiat
Model	BRAVO 1.4L 150HP MANUAL TURBO ABS AIRBAG
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 - Reporting only
Vehicle Category	Private hire
Transmission	Manual
CC	1369

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMHCSNW00011262200

DRIVER

Name of Driver	RAIHAN HAKIM BIN ABDUL KAHAR
NRIC No	S9435914G
Date Of Birth	29/09/1994
Occupation	Indoor

Date Of Driving Pass	07/10/2013
Driving experience	9 YEARS
Gender	Male
Mobile Number	(Phone) +65-96738791
Alt. Phone Number	-
Email Address	rhak94@gmail.com
Address	11 WOODLANDS DR. 72 #14-31
Address complement	-
Postcode	738094
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Child
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	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 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	SHD5964U
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	ANDREW CHENG MAN WAI
NRIC No	S2594370H
Contact Number	(Phone) +65-94894899
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2

SKETCH PLAN

VEH NO: SLZ 5973E
INSURER: China Taiping
DATE OF ACC: 20/10/22 @ 13:20

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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

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

Sketch Plan

PLEASE
TURN
OVER

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

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

(45)


















**SINGAPORE
POLICE FORCE**


T/20230216/7016

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

Report No. T/20230216/7016

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/02/2023 10:52		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: RAIHAN HAKIM BIN ABDUL KAHAR			Address: 11 WOODLANDS DRIVE 72 #14-31 SINGAPORE 738094		
ID Type / ID No.: NRIC NO / S9435914G			Contact No.: Home/Office: Mobile: 96738791		
Nationality: SINGAPORE CITIZEN			Email: RHAK94@GMAIL.COM		
Sex: Male	Age: 28	Date of Birth: 29/09/1994	Type of Informant: Driver		
Race: Malay			Language: English		Institution / School Name:
Occupation:			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 20/10/2022 13:20	Type of Location: Y-Junction
Location: OLD TOH TUCK ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SHD5964U	Car	TOYOTA	Prius	Red	Slightly Damaged	2
SLZ5973E	Car					0



**SINGAPORE
POLICE FORCE**



T/20230216/7016

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

Report No. T/20230216/7016

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	ANDREW CHENG MAN WAI	ID No.	S2594370H
Related Vehicle	SHD5964U (Car)	Contact No.	94894899
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	Slight
Driver			
Name	RAIHAN HAKIM BIN ABDUL KAHAR	ID No.	S9435914G
Related Vehicle	SLZ5973E (Car)	Contact No.	96738791
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

Brief Details.

I am writing to you to inform you that I was involved in a minor accident with another car on 20th October 2022. The location was Toh Tuck Road Exit from PIE (Towards Tuas). Our Policy Number is DMHCSNW00011262200 under China Taiping Insurance.

The other party involved was a red taxi. The taxi driver was also ferrying a passenger at that time. As we were approaching the end of the y junction to filter onto the main road, the taxi driver made a sudden stop and my car could not stop in time despite braking. This resulted in a minor collision with minimal damages. As the impact was not significant, there was only a small bump in the taxi's bumper. I have pictures to prove it too.

We then drove onto the main road and stopped at the side to exchange particulars and take photos. The driver of the taxi mentioned that his passenger wanted to leave as she was in a rush and her office was just walking distance from the accident area. She was visibly unhurt and was able to walk as per normal. The taxi driver was also unhurt and was able to discuss what happened during the accident. He did not show any signs of injury. After exchanging details, we went our separate ways. No injury was done and there was no need for me to file a police report at that time.

However, my insurance have notified me that the taxi driver wish to make claims against me and this also included bodily injuries. I feel that this was unjust as I was in contact with the



**SINGAPORE
POLICE FORCE**



T/20230216/7016

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

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Report No. T/20230216/7016

CONTINUATION OF REPORT

taxi driver on the day itself as well as the next day and he did not tell me of any injury. I was then advised to file a police report for record purposes as the taxi driver claims that he was injured despite not showing any effects when the accident happened. As seen from the images, the damages were not extensive and very minor and I find it hard to believe that he was injured during the accident.



**SINGAPORE
POLICE FORCE**



T/20230216/7016

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

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Report No. T/20230216/7016

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 / TPB /
MOHAMAD ZULFAZDLI BIN ABDULLAH
Contact No.: 65476204

NP168

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

Date/Time:
16/02/2023 10:52

Classification Of Case:



Date : 24/02/2023

To : Accident Reporting Centre (ARC)

I / We hereby approve (driver's name) RAIHAN HAKIM BIN ABDUL KAHAR

NRIC/FIN S9435914G, ~~our employee / employee of~~ SON OF

ABDUL KAHAR BIN ABDUL RAHIM to drive our m/vehicle no. SLZ5973E

and to file the accident report (Third Party claims/Own Damage Claims/Reporting

Only) which occurred on (date) 20/10/2022 @ (time) 13:20

along (location) OLD TOH TUCK RD.

* Relationship between Insured and driver's company: --

Thank you.

Regards,



* SIGN & STAMP at the above *

Name of Owner : ABDUL KAHAR BIN ABDUL RAHIM

NRIC / ROC : S1818550D

Contact No : 97505966

Email : kahars@gmail.com