

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 | 06/03/2023 17:40 (SGT) |
| Reported by | Driver |
| Date of Accident | 05/03/2023 07:00 (SGT) |
| Exact Location of Accident | Singapore |
| Additional Location Information | OUTSIDE NO. 20 JALAN JORAN |
| Country/State of Loss | Singapore |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------------|--------|
| Vehicle Registration Number | SJP61X |
|-----------------------------------|--------|

INSURED/POLICYHOLDER

| | |
|--------------------------------|----------------------|
| Is company? | Yes |
| Name Of Registered Owner | AJ JETTING PTE LTD |
| Company Reg No | 2XXXXX346W |
| Email Address | sahhem84@yahoo.com |
| Mobile Phone No | (Phone) +65-96938699 |
| Alternative Phone No | - |

VEHICLE PARTICULARS

| | |
|--|---------------------------|
| Manufacturer | Toyota |
| Model | Harrier |
| 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 | Private car |
| Transmission | Auto |
| CC | 1986 |

INSURANCE COMPANY

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

DRIVER

| | |
|----------------------|------------------------------|
| Name of Driver | MOHAMED IBRAHIM SAHUL HAMEED |
| NRIC No | SXXXX961H |
| Date Of Birth | 28/01/1984 |
| Occupation | Indoor |

| | |
|--|------------------------------|
| Date Of Driving Pass | 25/04/2013 |
| Driving experience | 9 YEARS AND 11 MONTHS |
| Gender | Male |
| Mobile Number | (Phone) +65-96938699 |
| Alt. Phone Number | - |
| Email Address | sahhem84@yahoo.com |
| Address | BLK 256A SUMANG WALK #02-609 |
| Address complement | - |
| Postcode | 821256 |
| Is the driver the policyholder? | No |
| If No, Relationship of the Driver with the Insured | Employee |
| 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 | Collided into Parked Vehicle |
| Weather Conditions | DRIZZING |
| Road Surface | Wet |

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 | Serangoon North Neighbourhood Police Post |
| Police Station Address | Blk 108 Serangoon North Avenue 1 #01-709 Singapore 550108 |
| Was notice of intended Prosecution given? | No |
| If yes, against whom? | - |

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT T/20230306/2068

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 | SKB2158A |
| 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) | - |

Describe Circumstance of the Accident

Refer to Police Report No. T/20230306/2068

Declaration

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

Policyholder's Signature / Date & Time



06/03/2023

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



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

SKETCH PLAN

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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.

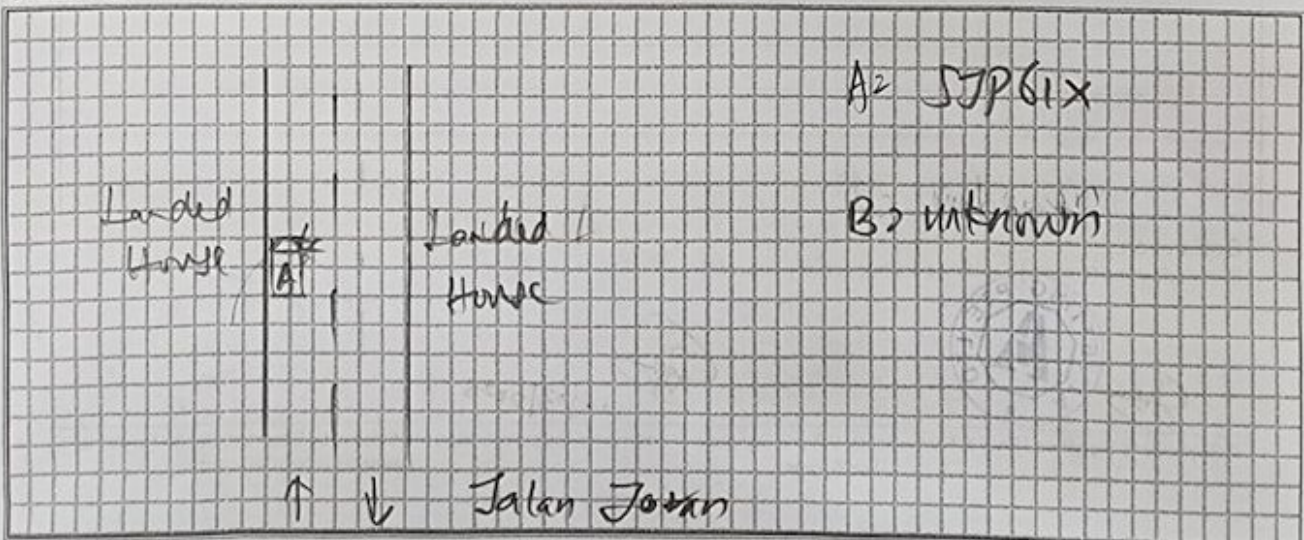

Policyholder's Signature / Date & Time




06/03/2023
Actual Driver's Signature (if driver is not the policyholder) / Date & Time


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

Sketch Plan



vJun2022

1























**SINGAPORE
POLICE FORCE**

T/20230306/2068

3 of 3

Police Station Of Origin:
Serangoon North NPP
108 Serangoon North Ave 1 #01-709
SINGAPORE 550108
Tel No: 1800-2849999

Report No. T/20230306/2068

CONTINUATION OF REPORT**Sketch Plan**

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature of Officer Recording The Report:

F /
SI ABDUL RASHID BIN
ABDULLAH

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
06/03/2023 15:57

Officer In Charge Of Case:
TP / GIA /
SR STAFF SGT FAHKRUL RAZI BIN SUHAIME
Contact No.: 65470000

Classification Of Case:

NP168



**SINGAPORE
POLICE FORCE**



T/20230306/2068

Police Station Of Origin:
Serangoon North NPP
108 Serangoon North Ave 1 #01-709
SINGAPORE 550108
Tel No: 1800-2849999

2 of 3

Report No. T/20230306/2068

CONTINUATION OF REPORT

| Details of Person Involved | | | |
|-----------------------------------|------------------------------|--|----------------------------------|
| Any Pedestrian Involved: No | | | |
| No. of Pedestrians Injured: NIL | | Use of Pedestrian Crossing: NA | |
| Driver | | | |
| Name | MOHAMED IBRAHIM SAHUL HAMEED | ID No. | S8484961H |
| Related Vehicle | SJP61X (Car) | Contact No. | 96938699 |
| Hospital/Clinic | NIL | Class of Driving Licence & Expiry Date | Class: 3A Date of Expiry: NIL |
| Date Treatment | NIL | Date Discharge | NIL |
| No. of Days granted Medical Leave | NIL | Degree of Injury | NIL |

Brief Details.

On 05/03/2023 @1330hrs, I had parked my car outside house No.20 Jalan Joran. On 06/03/2023 @0700hrs when I returned to my car, I discovered some scratches and dented marks on the right side of my car between the right front tyre and front door. There was a note left behind on my windscreen by the other driver indicating that his vehicle had brushed against my vehicle and told me to contact him (90120801) to settle the matter. However I have been trying to contact the said person and my insurance company also tried to contact the person but there was no response. I was advised by my insurance company to lodge an accident report regarding the matter. There is no name or vehicle number left by the person. I have a camera installed in my car but it was not in recording mode when the engine was off.



SINGAPORE POLICE FORCE



T/20230306/2068

1 of 3

Police Station Of Origin:
Serangoon North NPP
108 Serangoon North Ave 1 #01-709
SINGAPORE 550108
Tel No: 1800-2849999

Report No. T/20230306/2068

REPORT OF A TRAFFIC ACCIDENT

| | | |
|--|------------------|--------------------------|
| Date/Time Report Made: 06/03/2023 15:57 | Vide Report No.: | Station Diary No.: 24 |
|--|------------------|--------------------------|

Informant's Particulars

| | | | | | |
|---|------------|------------------------------|--|--|----------------------------|
| Name of Informant: MOHAMED IBRAHIM SAHUL HAMEED | | | Address: APT BLK 256A SUMANG WALK #02-609 SINGAPORE 821256 | | |
| ID Type / ID No.: NRIC NO / S8484961H | | | Contact No.: Home/Office: Mobile: 96938699 | | |
| Nationality: SINGAPORE CITIZEN | | | Email: | | |
| Sex: Male | Age: 39 | Date of Birth: 28/01/1984 | Type of Informant: Driver | | |
| Race: Indian | | | Language: English | | Institution / School Name: |
| Occupation: Director | | | Driving Licence Information: Class: 3A Date of Expiry: | | |

General Information of the Accident

| | | | | |
|---|----------------------|--------------------|--|-------------------------------------|
| Type of Accident: | Non-Injury Others | Drink Drive: No | Date/Time of Accident: 06/03/2023 07:00 | Type of Location: Straight Road |
| Location: JALAN JORAN | | | | |
| Weather: | | Road Surface: | | Road Speed Limit: |
| Traffic Flow: One Way | | Traffic Control: | | Traffic Volume: |
| Type of Collision: Moving Vehicle Against - Parked Vehicle | | | | Anyone conveyed by ambulance: No |

Details of Vehicle Involved

| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
|-------------|------|--------|---------|-------|------------------|-----------------|
| SJP61X | Car | TOYOTA | HARRIER | Black | Slightly Damaged | 0 |

Details of Vehicle Insurance

| Vehicle No. | Insurance Company | Insurance No | Effective | Expiry Date |
|-------------|---------------------------------------|-----------------|------------|-------------|
| SJP61X | ALLIANZ INSURANCE SINGAPORE PTE. LTD. | SP2003386253-01 | 25/11/2022 | 24/11/2023 |