

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	22/03/2023 12:56 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	21/03/2023 12:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	YISHUN AVE 8
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SME5700A
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	NOORHISHAM BIN HUSSIN
NRIC No	S7770836G
Email Address	nr_hshm@yahoo.com.sg
Mobile Phone No	(Phone) +65-91387982
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	FREED 1.5G CVT
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 car
Transmission	Auto
CC	1496

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5104208616-04

DRIVER

Name of Driver	NOORHISHAM BIN HUSSIN
NRIC No	S7770836G
Date Of Birth	03/03/1977
Occupation	Indoor

Date Of Driving Pass	16/10/2009
Driving experience	13 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91387982
Alt. Phone Number	-
Email Address	nr_hshm@yahoo.com.sg
Address	BLK 351D CANBERRA RD #02-281
Address complement	-
Postcode	754351
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	4
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	3
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	NORMAYAH BTE MD RAHIM
Gender	Female

PASSENGER 2

Name	NUR AISYAH BINTE NOORHISHAM
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Woodlands Division Headquarters
Police Station Phone No	(Phone) +65-18004660000
Police Station Address	1 Woodlands St 12 Singapore 738622
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER POLICE REPORT : L/20230322/7020

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	WILL SUBMIT TO INSURER

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SND5893U
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	KOH YONG MING,CLEMENT
NRIC No	S8706057H
Contact Number	(Phone) +65-94570757
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	GBC1413X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	LOU BEI AN
NRIC No	S1288685C
Contact Number	(Phone) +65-82894477
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SNH1586L
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	DYLAN TAN SIANG AUN
NRIC No	T0205143A
Contact Number	(Phone) +65-85909940
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	NOORHISHAM BIN HUSSIN
Gender	Male

Phone No	(Phone) +65-91387982
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SME5700A
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	No

INJURED 2

Name of injured person	NORMAYAH BTE MD RAHIM
Gender	Female
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SME5700A
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

VEH NO: SME 5700A
 INSURER: Income
 DATE OF ACC: 21/3/23
@ 1200hrs

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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

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

Describe Circumstance of the Accident

** NOTE : PLEASE TAKE NOTE THAT YOUR INSURER HAVE 14DAYS TIME FRAME for you to submit OWN DAMAGE Claim under your Own Comprehensive policy. Pls check your policy for more information.

() Claim Own Policy (☒) Claim Third party () Reporting Only

() Claim OD/ TP at other workshop ()

Sketch Plan

A = SME 5700 A
B = SND 5893 U
Koh Yong Ming, Clement
S87 06057H
hp: 94570757

C = GBC 1413 X
Lou Bei An
S1288685C
hp: 82894477

D = SNH 1586 L
Dylan Tan Siang Ann
70205143A
hp: 85909940

Doa = 21/3/23
Time = 1200hrs
Ins = in come

Refer to police report: L/20230322/7020

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**



L/20230322/7020

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POLICE REPORT (NP299)

Report No. L/20230322/7020

Police Station Of Origin
Woodlands Division HQ
1 Woodlands Street 12 SINGAPORE 738622
Tel No:1800-4660000

Date/Time Report Made 22/03/2023 11:06	Vide Report No.			Station Diary No.
Name Of Informant NOORHISHAM BIN HUSSIN	Address 351D CANBERRA ROAD #02-281 SINGAPORE 754351			
ID Type / ID No. NRIC NO / S7770836G	Contact No. Home/Office: Mobile: 			

Brief details.

Accident occurred on extreme right lane on Yishun Ave 8. I stopped my car behind 1st Car (Mazda) as traffic light was red. Suddenly, I felt a strong impact from the back and my car was pushed forward, causing it to hit the rear of Mazda Car.

I alighted from car and realised I was involved in a chain accident of total 4 vehicles including mine. I exchanged particulars with all parties and arranged for my car for towing to workshop. I have 2 passengers on board-my wife and daughter.

Both my wife and I went to GP to further assess injuries and was each given 3 days mc.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 22/03/2023 11:06
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE
POLICE FORCE**



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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. L/20230322/7020

Subjects Involved			
Victim			
Person Name	NOORHISHAM BIN HUSSIN		
ID Type	NRIC NO	ID No	S7770836G
Gender	Male	Age	46
Race	Malay	Language	English
Occupation	Electronics engineer	Address	351D CANBERRA ROAD #02-281 SINGAPORE 754351
Mobile No	91387982	Is Informant A Victim?	Yes
Person Name	Normayah Bte Md Rahim		
ID Type	NRIC NO	ID No	S7902776F
Gender	Female	Age	44
Race	Malay	Language	Malay
Occupation	Government licensing official	Address	351D Canberra Rd #02-281 SINGAPORE 754351
Home/Office No	66440034	Mobile No	91557302
Relation To Informant	Spouse		
Person Name	Nur 'Aisyah Binte Noorhishm		
ID Type	NRIC NO	ID No	T1006982Z
Gender	Female	Age	13
Race	Malay	Language	Malay

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 22/03/2023 11:06
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE
POLICE FORCE**



L/20230322/7020

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. L/20230322/7020

Occupation	Student	Address	351D Canberra Rd #02-281 SINGAPORE 754351
Home/Office No	66440034	Mobile No	91557302
Relation To Informant	Child		
Person Name	NOORHISHAM BIN HUSSIN (Informant)		

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 22/03/2023 11:06
Officer In-Charge Of Case:	Classification Of Case: