

# 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 ..... 07/09/2022 17:01 (SGT)  
Reported by ..... Both  
Date of Accident ..... 03/09/2022 10:00 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... INFRONT OF BLK 255 YISHUN RG RD AT Y17 CAR PARK, LOT. 377  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SLB4151T

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... JUMNI BINTI ALI  
NRIC No ..... S1420446F  
Email Address ..... rizman\_johnny88@live.com  
Mobile Phone No ..... (Phone) +65-81862384  
Alternative Phone No ..... -

### VEHICLE PARTICULARS

Manufacturer ..... Toyota  
Model ..... COROLLA AXIO 1.5X A  
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 ..... Etiqa Insurance Pte Ltd  
Policy Number / Cover Note Number ..... MA020982

### DRIVER

Name of Driver ..... JUMNI BINTI ALI  
NRIC No ..... S1420446F  
Date Of Birth ..... 07/07/1960

Occupation .....	Indoor
Date Of Driving Pass .....	29/11/2002
Driving experience .....	19 YEARS AND 10 MONTHS
Gender .....	Female
Mobile Number .....	(Phone) +65-81862384
Alt. Phone Number .....	-
Email Address .....	rizman_johnny88@live.com
Address .....	BLK 255 YISHUN RING RD #06-1119
Address complement .....	-
Postcode .....	760255
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 .....	Hit and run / Vandalism / Damaged whilst parked
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) .....	0
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? .....	Yes
Reasons for not uploading a video of the accident .....	SD CARD WITH TRAFFIC POLICE.

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	QX4927Y
Vehicle Manufacturer .....	-

Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Government
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

VEH NO: SLB 4151T

INSURER: Etiga

DATE OF ACC: 03/9/22 @ 10:00 am

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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 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) (45)

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

B1K255 Yishun Rg Rd  
at 417 Car park, lot. 377

Third Party = QX4927Y



Refer to Police Report No: T/20220903/7021

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)

(YS)

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**SINGAPORE  
POLICE FORCE**


T/20220903/7021

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

1 of 3

Report No. T/20220903/7021

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 03/09/2022 12:16		Vide Report No.: L/20220903/0070		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: JUMNI BINTI ALI			Address: 255 YISHUN RING ROAD #06-1119 SINGAPORE 760255		
ID Type / ID No.: NRIC NO / S1420446F			Contact No.: Home/Office: Mobile: 81862384		
Nationality: SINGAPORE CITIZEN			Email: rizman_johnny88@live.com		
Sex: Female	Age: 62	Date of Birth: 07/07/1960	Type of Informant: Vehicle Owner		
Race: Boyanesse			Language: English		Institution / School Name:
Occupation: Unemployed			Driving Licence Information: Class: 3		Date of Expiry:

<b>General Information of the Accident</b>				
Type of Accident:	Non-Injury Police Vehicle	Drink Drive: No	Date/Time of Accident: 03/09/2022 10:00	Type of Location: Car Park
Location:  YISHUN RING ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: Moving Vehicle Against - Parked Vehicle				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
QX4927Y	Police Patrol Car					0
SLB 4151T	Car	TOYOTA	Corolla Axio	Grey	Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date



**SINGAPORE  
POLICE FORCE**



T/20220903/7021

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

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Report No. T/20220903/7021

## CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLB 4151T	ETIQA INSURANCE BERHAD	MA020982		

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Vehicle Owner			
Name	JUMNI BINTI ALI	ID No.	S1420446F
Related Vehicle	SLB 4151T (Car)	Contact No.	81862384
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

## Brief Details.

On the 3/9/2022, at approximately 1000hrs, I went down to wash my car but I was approached by a few officers informing me that reversing police patrol car hit the front, left side of my car, Model: Toyota Corolla Axio 1.6, Colour: Grey, Vehicle Registration Number: SLB 4151T, which was parked at Lot Number:377 at Carpark Y17 (infront of Block 255 Yishun Ring Road). The location of the parked car is at my place of residences. The officer in charge also collected 1x Sandisk Micro SD from my in-car camera to be brought back to the Traffic Police.



**SINGAPORE  
POLICE FORCE**



T/20220903/7021

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

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Report No. T/20220903/7021

**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 /  
YUS MASTARI I KHAZALI  
Contact No.: 65476347

This report is lodged at Yishun North NPC Kiosk 1  
NP168

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

Date/Time:  
03/09/2022 12:16

Classification Of Case:





# SINGAPORE POLICE FORCE ACKNOWLEDGEMENT SLIP

Ref: Report No: 1/20220903/0070

I, SS H. H. Z  
(Recipient's Name, Contact No. / NRIC or Passport No. / Rank and No.)

of Traffic Police  
(Address / Police Station / NPC / NPP)

hereby acknowledge receipt of the below mentioned items of:

1 one San Disk ultra 64GB micro SD card.  
2  
3  
4  
5  
6  
7  
8  
9  
10

from Jumini Binti Ali 31420446F #P: 81862384.  
(Name, NRIC or Passport No. / Rank and No.)

of SLB 4151 T. Toyota / Silver  
(Address / Police Station / NPC / NPP)

on 3/9/2022 at 1030.  
(Date) (Time)

Witnessed by / \* Handed over by:  
(\* Delete if applicable)

Received by:

[Signature]  
(Signature)

JUMINI 1420446F  
(Name, NRIC or Passport No. / Rank and No.)

[Signature]  
(Signature)

SS H. H. Z.  
(Name, Contact No. / NRIC or Passport No. / Rank and No.)

Other Remarks: 10 Ismail. 65476185.



**SINGAPORE  
POLICE FORCE**  
SAFEGUARDING EVERY DAY

## CASE CARD

Report Number: 2/20220903/0070

Traffic Accident along B1K255 Yishun Ring Rd. Lot 377

Involving vehicles: QX 44274 X SLB 41517

On 3/9/22 at about 10am (am) / pm.

With reference to the above, you are advised to lodge a traffic accident report online via the Police E-Services website (<https://eservices.police.gov.sg>) within 24 hours.

NP319E (2019)

You are required to be present at Traffic Police on  
at am / pm to meet the Investigation Officer to assist in the investigation.

Please bring along your :-

- a) Identity Card / Passport / Work Pass
- b) Driving License / Vocational License
- c) Vehicle Insurance / Medical Certificate
- d) Any other relevant documents (e.g. Video footages)

If you are unable to keep to the appointment, please contact:

IC: 10 Ismail

TEL: 6547 6185

Investigation Branch: 6547 6391

Email: [SPF\\_TP\\_Invest\\_Branch@spf.gov.sg](mailto:SPF_TP_Invest_Branch@spf.gov.sg)

NP319E (2019)