

# 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 .....	10/04/2023 17:34 (SGT)
Reported by .....	Actual Driver
Date of Accident .....	10/04/2023 09:00 (SGT)
Exact Location of Accident .....	ECP, Singapore
Additional Location Information .....	TOWARDS CITY
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SNH6293Z
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### INSURED/POLICYHOLDER

Is company? .....	Yes
Name Of Registered Owner .....	COMFORTDELGRO RENT A CAR PTE LTD
Company Reg No .....	198105775H
Email Address .....	dannyng@cdgrentacar.com.sg
Mobile Phone No .....	(Phone) +65-81823543
Alternative Phone No .....	(Office) +65-68820888

### VEHICLE PARTICULARS

Manufacturer .....	Nissan
Model .....	Serena
Variant .....	-
Exact purpose for which vehicle was being used at time of accident .....	Private hire
Are you claiming under your own insurance policy for repair to your vehicle? .....	No - Reporting only
Vehicle Category .....	Private hire
Transmission .....	Manual
CC .....	1198

### INSURANCE COMPANY

Name of Insurance Company .....	India International Insurance Pte Ltd
Policy Number / Cover Note Number .....	D18MFL0003414_03

### DRIVER

Name of Driver .....	ZAINAL ABIDIN BIN JAFFAR
NRIC No .....	S9315071F
Date Of Birth .....	06/05/1993
Occupation .....	Outdoor

Date Of Driving Pass .....	05/05/2015
Driving experience .....	7 YEARS AND 11 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-81823543
Alt. Phone Number .....	-
Email Address .....	dannyng@cdgrentacar.com.sg
Address .....	BLK 289 TAMPINES STREET 22 #07-456
Address complement .....	-
Postcode .....	520289
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 .....	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 .....	3
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) .....	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 .....	UNKNOWN
Gender .....	Male

#### PASSENGER 2

Name .....	UNKNOWN
Gender .....	Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	No
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

ON 10/04/23 AT AROUND 0900HRS I WAS DRIVING VEHICLE A (SNH6293Z) AT ECP TOWARDS CITY. AS I WAS TRAVELLING IN LANE 3, VEHICLE B (GBF5738S) SUDDENLY JAMMED BRAKE WHICH CAUSED ME TO NOT BRAKE ON TIME AND HIT VEHICLE B REAR. AS I WENT OUT OF THE CAR, VEHICLE C (GBJ3277Y) WAS ALSO INVOLVED IN THE COLLISION. WE STOPPED AND EXCHANGED PARTICULARS AND NO ONE WAS INJURED AT THE MOMENT

#### 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 .....	GBF5738S
Vehicle Manufacturer .....	Toyota
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle
Name of Driver .....	TIO TIONG YEW
NRIC No .....	S6824683J
Contact Number .....	-
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 .....	GBJ3277Y
Vehicle Manufacturer .....	Toyota
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle
Name of Driver .....	KAZI MOHAMMAD DIDAR
Passport No/FIN .....	G2145346W
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**

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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.

**FLASH ACCIDENT  
REPORTING OFFICER**

FRO ZIKRUL



Policyholder's Signature / Date &  
Time

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

Witnessed by Reporting Centre Personnel

**Sketch Plan**

10/04/23 1300HRS



A-SNH6293Z  
B-GBF5738S  
C-GBJ3277Y

ECP TOWARDS CITY

## Describe Circumstances of the Accident

ON 10/04/23 AT AROUND 0900HRS I WAS DRIVING VEHICLE A (SNH6293Z) AT ECP TOWARDS CITY. AS I WAS TRAVELLING IN LANE 3, VEHICLE B (GBF5738S) SUDDENLY JAMMED BRAKE WHICH CAUSED ME TO NOT BRAKE ON TIME AND HIT VEHICLE B REAR. AS I WENT OUT OF THE CAR, VEHICLE C (GBJ3277Y) WAS ALSO INVOLVED IN THE COLLISION. WE STOPPED AND EXCHANGED PARTICULARS AND NO ONE WAS INJURED AT THE MOMENT

## 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  
10/04/23 1300HRS

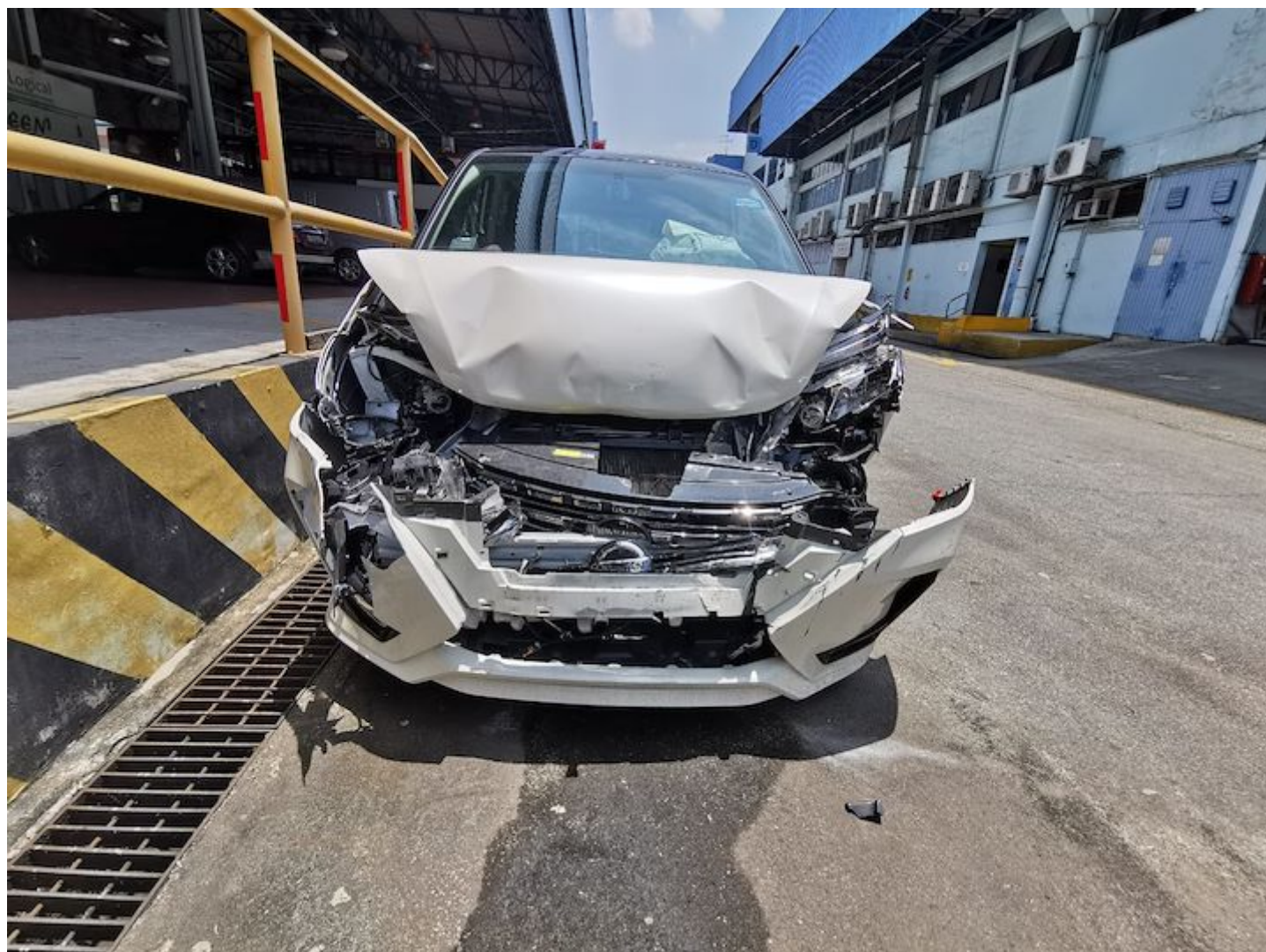
**FLASH ACCIDENT  
REPORTING OFFICER**  
FRO ZIKRUL



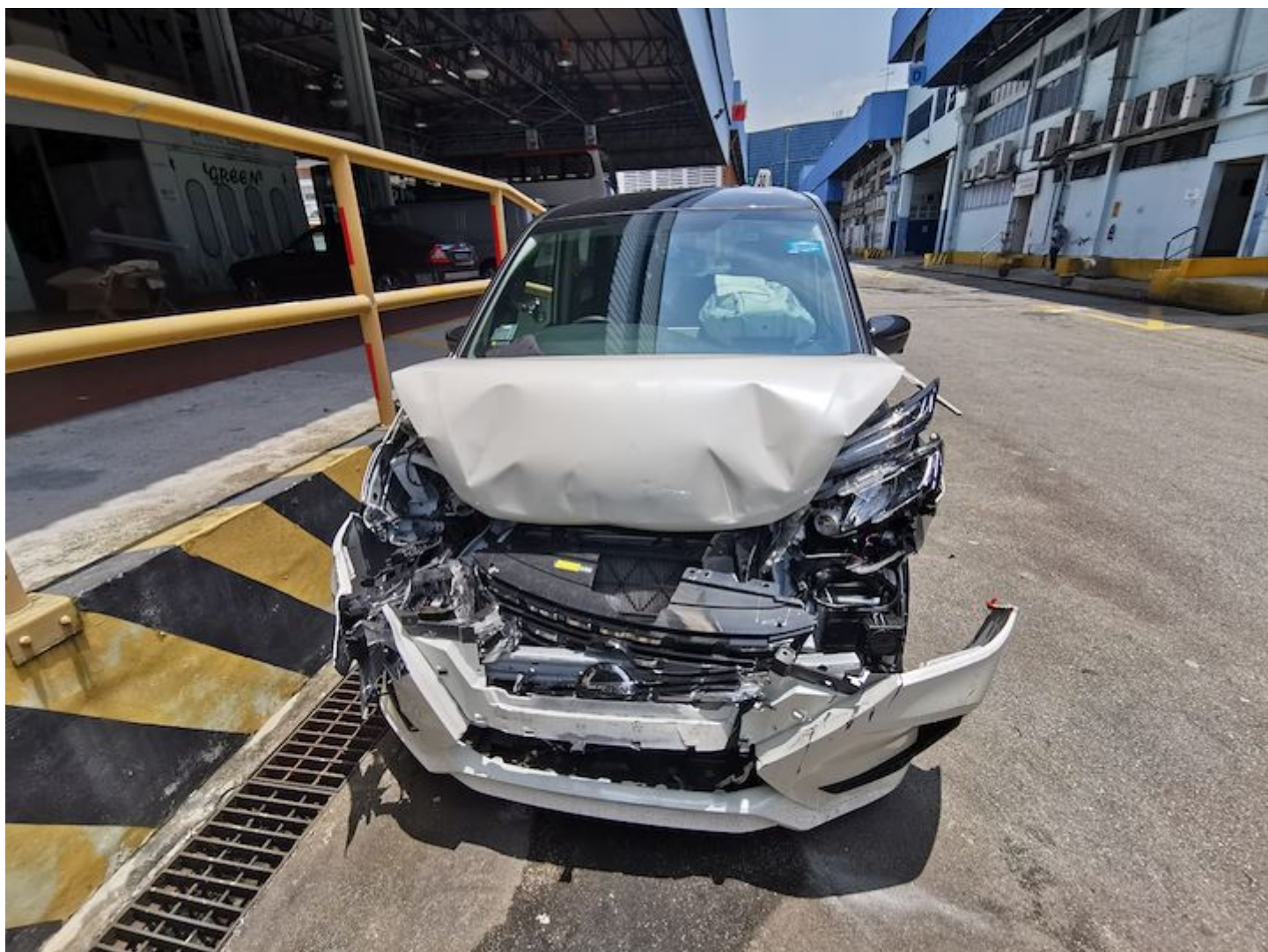
Witnessed by Reporting Centre Personnel



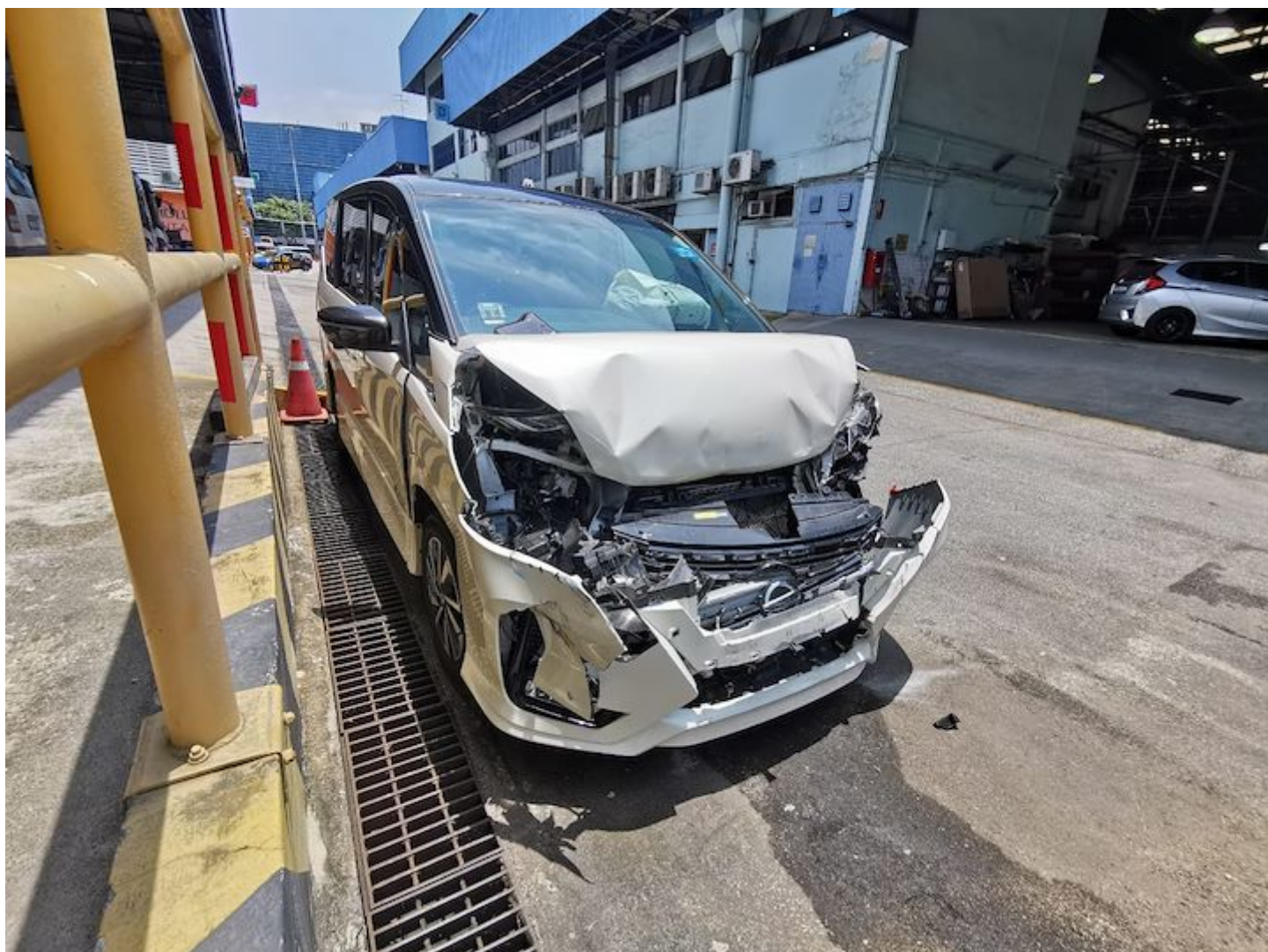




















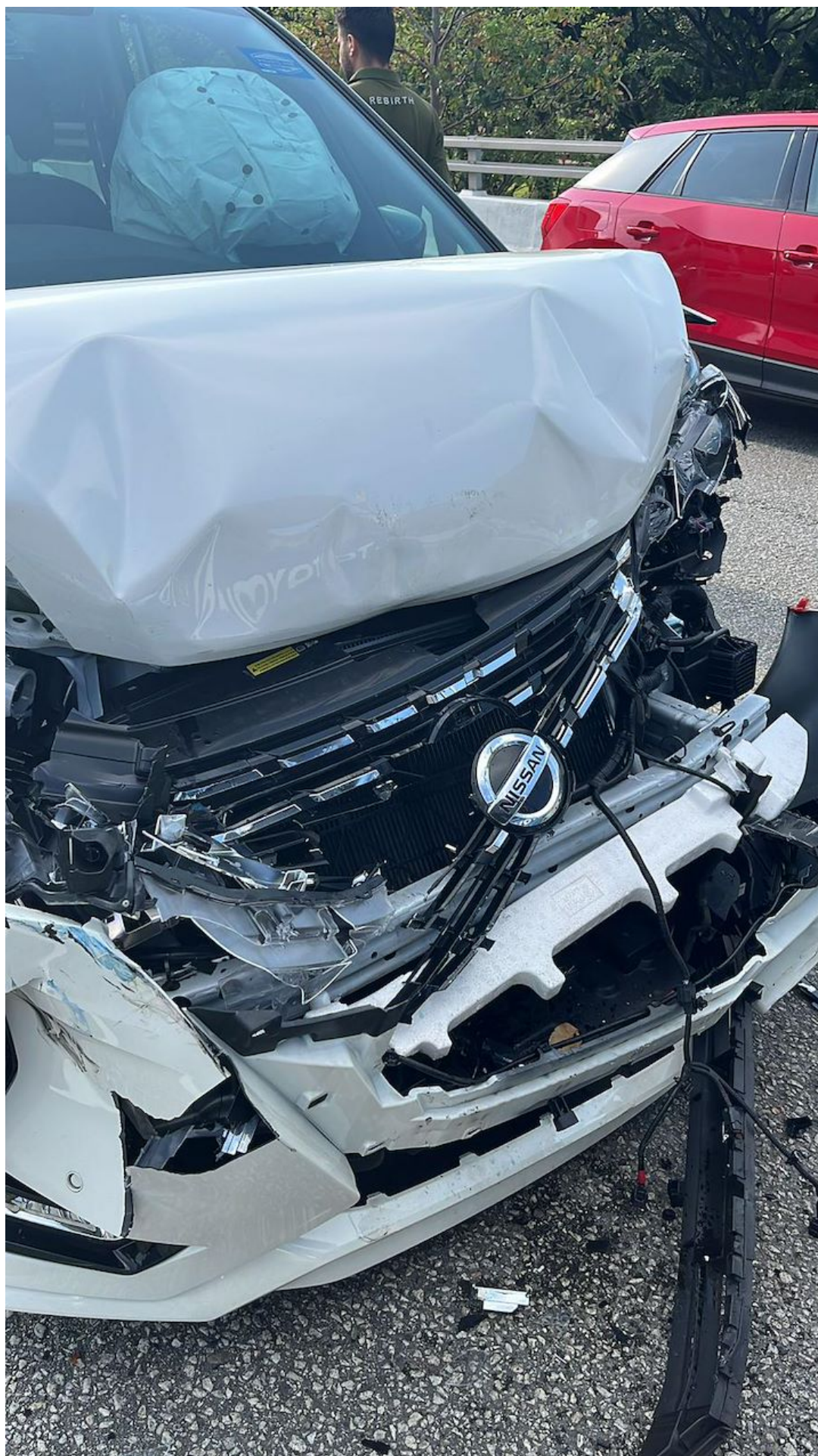


























**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

### ADDENDUM

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No: SJ0G234A001Z Vehicle Registration No: SNH8293Z  
 Name (as shown in NRIC): COMFORTDELORO RENT-A-CAR PTE LTD NRIC/FIN/Passport No: 1XXXXXX775H  
 (\*Vehicle Driver/Vehicle Owner) (\*) Please delete as appropriate  
 Address: \_\_\_\_\_ Singapore ( )  
 Contact (Tel): \_\_\_\_\_ Mobile No.: \_\_\_\_\_  
 Email Address: \_\_\_\_\_  
 Date of Accident: 10/04/2023 Time of Accident: 09:00  
 Place of Accident: ECP, Singapore  
 Insurance Company: India International Insurance Pte Ltd

**(B) ADDITIONAL INFORMATION /AMENDMENTS:**

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

ATTACHED VEHICLE PHOTOS

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Policyholder / Driver's Signature  
Date:

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:  
Date: 12.04.2023

GIARMC Addendum Form