

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 20/04/2023 18:09 (SGT)
Reported by Both Policyholder and Actual Driver
Date of Accident 19/04/2023 12:10 (SGT)
Exact Location of Accident Lentor Ave, Singapore
Additional Location Information TOWARDS CTE/ANG MO KIO
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJF7790G

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner MOHAMMAD NORRAHMANI'IZHAMMUDDIN BIN SONNY
NRIC No SXXXX003I
Email Address izham_sonn@yahoo.com.sg
Mobile Phone No (Phone) +65-86116351
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Mitsubishi
Model Lancer
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 1499

INSURANCE COMPANY

Name of Insurance Company EQ Insurance Company Ltd
Policy Number / Cover Note Number DMPPHQ22-004589

DRIVER

Name of Driver MOHAMMAD NORRAHMANI'IZHAMMUDDIN BIN SONNY
NRIC No SXXXX003I
Date Of Birth 21/12/1984
Occupation Indoor

Date Of Driving Pass	14/09/2012
Driving experience	10 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-86116351
Alt. Phone Number	-
Email Address	izham_sonn@yahoo.com.sg
Address	BLK 357 YISHUN RING ROAD #02-1844
Address complement	-
Postcode	760357
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	Side Swipe
Weather Conditions	Raining
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

PLEASE REFER TO POLICE REPORT T/20230419/7033

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	WITH OWNER

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJJ8063U
Vehicle Manufacturer	Toyota
Vehicle Model	Estima

Vehicle Variant	-
Vehicle Colour	Black
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)	-

SKETCH PLAN

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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.

[Signature]
Policyholder's Signature / Date & Time

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

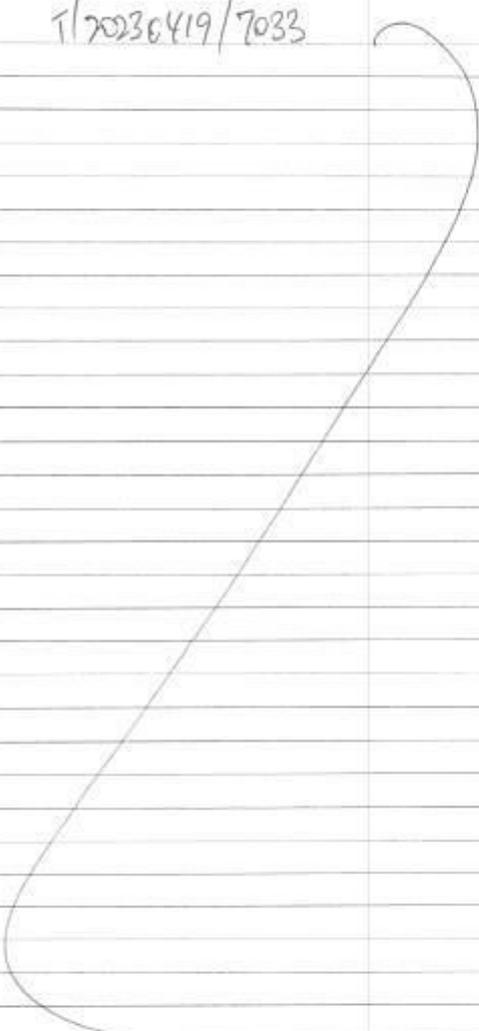
[Signature] 20/04/2023
Witnessed by Reporting Centre Personnel (Name(s) in NRIC ID Card)

Sketch Plan

LENIOR AVENUE TOWARDS CTE / ARLH MKO KIO



Describe Circumstance of the Accident
As per police report T/20230419/7033



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

 20/04/23
Policyholder's Signature / Date & Time

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

 20/04/2023
Witnessed by Reporting Centre Personnel
(Name as in NRK/NDI card)













**SINGAPORE
POLICE FORCE**

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



T/20230419/7033

1 of 3

Report No. T/20230419/7033

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/04/2023 13:31	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: MOHAMMAD NORRAHMAN'IZHAMMUDDIN BIN SONNY			Address: 357 YISHUN RING ROAD #02-1844 SINGAPORE 760357		
ID Type / ID No.: NRIC NO / S84410031			Contact No.: Home/Office: Mobile: 86116351		
Nationality: SINGAPORE CITIZEN			Email: IZHAM_SONN@YAHOO.COM.SG		
Sex: Male	Age: 38	Date of Birth: 21/12/1984	Type of Informant: Driver		
Race: Malay			Language: English		
Occupation: Occupational health and safety professional			Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 19/04/2023 12:10	Type of Location: Straight Road
Location: LOWER SELETAR CLOSE				
Weather: Cloudy		Road Surface: Dry		
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJF7790G	Car	MITSUBISHI	LANCER 1.5 MIVEC GLS 4A/T	Black		0
SJJ8063U	Car	TOYOTA	Estima	Black	Seriously Damaged	1



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



T/20230419/7033

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Report No: T/20230419/7033

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJF7790G	EQ INSURANCE COMPANY LTD.	DMPPHQ22-004589	11/06/2022	10/06/2023

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	MOHAMMAD NORRAHMAN'IZHAMMUDDIN BIN SONNY	ID No.	S84410031
Related Vehicle	SJF7790G (Car)	Contact No.	86116351
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 2B,2A,2,3 Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

i was travelling along lentor avenue towards ang mo kio / CTE (city) when a black Toyota Estima SJJ8063U attempted to change into my lane without indicating his signal. The said vehicle then side swiped my car made a run for it although i did horned to instruct him to stop at the shoulder lane of CTE to change particulars and assess the damage. The said driver then made a run for it and exit from CTE at Ang Mo Kio ave 5. I do have dashcam video however the time is not sync and accurate.



**SINGAPORE
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Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000



T/20230419/7033

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Report No. T/20230419/7033

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
RASHIDAH BINTE AZMAN
Contact No.: 65476902

NP168

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

Date/Time:
19/04/2023 13:31

Classification Of Case: