

## 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 .....	23/03/2023 17:12 (SGT)
Reported by .....	Actual Driver
Date of Accident .....	23/03/2023 08:00 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	UPPER PAYA LEBAR ROAD TOWARDS PAYA LEBAR ROAD AFTER BARTLEY ROAD EAST
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	GBJ4861D
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#### INSURED/POLICYHOLDER

Is company? .....	Yes
Name Of Registered Owner .....	MLS LOGISTIC SERVICES PTE LTD
Company Reg No .....	201414455W
Email Address .....	LAWRENCE_TAY@MLSSG.COM
Mobile Phone No .....	(Phone) +65-96974870
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Toyota
Model .....	Hiace
Variant .....	-
Exact purpose for which vehicle was being used at time of accident .....	-
Are you claiming under your own insurance policy for repair to your vehicle? .....	No - Claiming third party
Vehicle Category .....	Goods vehicle
Transmission .....	Auto
CC .....	3000

#### INSURANCE COMPANY

Name of Insurance Company .....	Income Insurance Limited
Policy Number / Cover Note Number .....	5122098467-01

#### DRIVER

Name of Driver .....	MOHAMMAD RAFFE BIN KAMIS
NRIC No .....	S7616728A
Date Of Birth .....	30/05/1976

Occupation .....	Indoor
Date Of Driving Pass .....	23/07/1999
Driving experience .....	23 YEARS AND 8 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-96912401
Alt. Phone Number .....	-
Email Address .....	EIKHEN_K@YAHOO.COM
Address .....	101B CANBERRA STREET #07-46 S752101
Address complement .....	-
Postcode .....	-
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 .....	Collision - Head to Rear
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? .....	Yes
Was any injured conveyed to hospital by ambulance? .....	Yes
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 .....	MacPherson Neighbourhood Police Post
Police Station Phone No .....	(Phone) +65-18007449999
Alt. Police Station Phone No .....	(Fax) +65-65476366
Police Station Address .....	Blk 54 Pipit Road #01-82/84 Singapore 370054
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED POLICE REPORT.

#### 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 TRAFFIC POLICE

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	FBL4789U
Vehicle Manufacturer .....	-

Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Motorcycle
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) .....	-

## INJURED PERSONS DETAILS

### INJURED 1

Name of injured person .....	VEHICLE B'S RIDER
Gender .....	Male
Phone No .....	-
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	-
Injured person in which vehicle? .....	FBL4789U
Were seat belts worn? .....	-
Was this injured conveyed to hospital by ambulance? .....	Yes

**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/are 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

*Path*

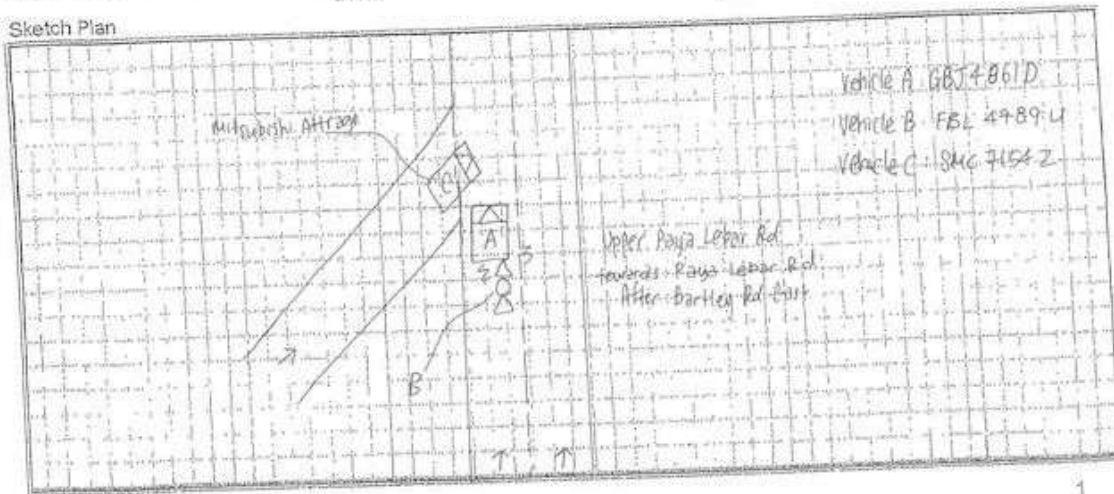
Driver's Signature (if driver is not the policyholder) / Date & Time

*Path*

15-25  
23/3/25

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

**Sketch Plan**



**Describe Circumstance of the Accident**

As of above date and time, I was driving my vehicle (G8J4861D) along Upper Paga Lebar Rd towards Paga Lebar Rd on the left lane of a 2 lane Rd. Somewhere after Bartley Rd Exit, Vehicle C (SMC71592) pop out from the slip Rd after hrs. Giveway line I immediately braked to avoid the collision with Vehicle C and suddenly, Vehicle B (FBL47894) collided into the rear right portion of my vehicle.

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



Policyholder's Signature / Date & Time

*[Signature]*

*[Signature]*

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

15.25  
23/3/23



Witnessed by Reporting Centre Personnel  
(Name as in NRICID card)


**SINGAPORE  
POLICE FORCE**


T/20230323/2051

1 of 3

Report No. T/20230323/2051

Police Station Of Origin:  
MacPherson NPP  
54 Pipit Road #01-82/84 SINGAPORE  
370054  
Tel No: 1800-7449999

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 23/03/2023 12:51		Vide Report No.: F/20230323/0058		Station Diary No.: 13	
<b>Informant's Particulars</b>					
Name of Informant: MOHAMMAD RAFFE BIN KAMIS			Address: APT BLK 101B CANBERRA STREET #07-45 SINGAPORE 752101		
ID Type / ID No.: NRIC NO / S7616728A			Contact No.: Home/Office: Mobile: 96912401		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 46	Date of Birth: 30/05/1976	Type of Informant: Driver		
Race: Boyanese			Language:		
Occupation: DELIVERY DRIVER			Driving Licence Information: Class: 3 Date of Expiry:		

<b>General Information of the Accident</b>					
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 23/03/2023 08:00	Type of Location: Straight Road	
Location:  UPPER PAYA LEBAR ROAD					
Weather: Clear		Road Surface: Dry			
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBL4789U	Motorcycle	HONDA			Slightly Damaged	0
GBJ4861D	Van	TOYOTA	HIACE		Slightly Damaged	0
SMC7154Z	Car	MITSUBISHI	ATTRAGE		No Damage	0



**SINGAPORE  
POLICE FORCE**



T/20230323/2051

2 of 3

Police Station Of Origin:  
MacPherson NPP  
54 Pipit Road #01-82/84 SINGAPORE  
370054  
Tel No: 1800-7449999

Report No. T/20230323/2051

**CONTINUATION OF REPORT****Brief Details.**

On 23 March 2023, at about 0800hrs onwards, I am driving my Van (GBJ4861D) along Upper Paya Lebar Road towards Paya Lebar Road on the left lane. Upon passing the Junction of Bartley Road and Bartley Road east, there is a slip road to merge in from Bartley Road East whereby a Car (SMC7154Z) Mitsubishi approaching fast and at that point of time I was travelling on the left lane along the Upper Paya Lebar Road. I observed that the said Car had already crossed the give way line as such I honked at him to get his attention. Both of us E-Brake and came to a stop to avoid the collision. After a complete stop, I suddenly felt an Impact from the back of my Van where I spotted a Motorcycle (FBL4789U) collided on the rear right side of my vehicle. The Rider fell down on the road. Subsequently ambulance and Traffic Police came, and the rider was conveyed to the Hospital. The Motorcycle and my Van sustained damages. I am not injured. That is all.



**SINGAPORE  
POLICE FORCE**



T/20230323/2051

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Report No. T/20230323/2051

Police Station Of Origin:  
MacPherson NPP  
54 Pipit Road #01-82/84 SINGAPORE  
370054  
Tel No: 1800-7449999

**CONTINUATION OF REPORT**

Signature of Officer Recording The Report:  
G /  
SGT 2 YIP YONG NAN

Signature Of Informant:

Signature Of Interpreter:  
Not applicable

Date/Time:  
23/03/2023 12:51

Officer In Charge Of Case:  
TP / GIT /  
STAFF SGT SITI NORHAFIDAH BINTE HANAFI  
Contact No.: 65476202

Classification Of Case:

NP168