Your NCD will be affected due to late reporting Actual e-Filling Submission Date & Time: 10/10/2020 11:16

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 Authorised Driver.
- 3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or witholding 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

aforesaid.	ACCIDENT STATEMENT
	ACCIDENT STATEMENT
Date Of Report	10/10/2020 10:39
Date Of Accident	26/09/2020 10:50
Exact Location Of Accident	DAIRY FARM ROAD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJH9999Z
Insured/Policyholder	
Name Of Registered Owner	ADHAM JAWAHAR
NRIC No	SXXXX479E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92385205
Alternative Phone No	OFFICE-92385205
Vehicle Particulars	
Manufacturer	BMW
Model	5351
Exact Purpose for which vehicle was being used at time of accident	PTE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
f No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5083300917-04
Cover Note Number	
Driver	
Name of Driver	ADUAM IAWAUAD

Name of Driver ADHAM JAWAHAR

NRIC No SXXXX479E

Date Of Birth 14/02/1965

Occupation INDOOR

Date Of Driving Pass 23/04/1996

Driving Experience 24 YEARS AND 5 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-92385205

Fax Number

Contact Number OFFICE-92385205

EMail Address NOEMAIL

Address BLK 19 #07-26 JALAN MEMBINA TIONG BAHRU COURT

Postcode 163019

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured **OWNER**

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

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 this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

2

Was any body injured in the Accident?

NO

Was any injured conveyed to hospital by

ambulance?

NO

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

Number of Passengers (Including Driver)

Passenger 1

NAME:

2

: COLLEAGUE

GENDER:

: MALE

Details of Police Action

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

Police Station Name **BUKIT MERAH WEST NPC**

ROAD: 500 BUKIT MERAH VIEW #01-01, POSTCODE: 159682, Police Station Address

COUNTRY: SINGAPORE

TEL NO: - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Police Station Contact

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

Remarks/ Reasons: CANNOT BE UPLOADED

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number TP125C

Vehicle Make/Model/Colour MOTORCYCLE/WHITE

Details Of Properties

Vehicle Category MOTORCYCLE

Name of Driver MUHAMAD IMRAN BIN NASOHA

NRIC/Passport Number

Contact Number 97772714 Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)





Police Station Of Origin: Bukit Merah West N.P.C 500 Bukit Merah View #01-01 SINGAPORE 159682 1 of 3 Report No. T/20200926/2122

Tel No: 1800-3779999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/09/2020 19:16			Vide Report No.: J/20200926/0093		Station Diary No.: 39	
Informant'	s Particul	ars			6	
Name of Informant:			Address:			
ADHAM JAWAHAR			APT BLK 19 JALAN MEMBINA #07-26 SINGAPORE 163019			
ID Type / II	O No.:		Contact No.:			
NRIC NO / S2691479E			Home/Office: Mobile: 92385205			
Nationality:			Email:			
SINGAPOR	RE CITIZE	N				
Sex: Age: Date of Birth:		Type of Informant:				
Male	55	14/02/1965	Driver			
Race:		Language:	Institution /	School Name:		
Indian						
Occupation	1:		Driving Licence Information	:		
engineering director			Class:	Date of Exp	piry:	

General Informati	on of the Accident					
Type of Accident:	Non-Injury Government Vehicle		Drink Drive: No	Date/Time of Accident: 26/09/2020 10:50		Type of Location: Straight Road
Logation:						
DAIRY FARM RO	AD					· · · · · · · · · · · · · · · · · · ·
Weather:	*	Road S	urface:		Road	Speed Limit:
Clear		Dry				
Traffic Flow: Traffic		Traffic (ffic Control:		Traffic Volume:	
One Way Traffic		fic Light - Working		Moderate		
Type of Collision: Between Moving \	/ehicles - Head To Re	ear		ı		ne conveyed by llance:

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJH9999Z	Car	BMW	535I 3.0L AT D/AB 2WD 4DR GAS/D SR HUD	White	Slightly Damaged	01
TP125C	Motorcycle					0

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





2 of 3

Report No. T/20200926/2122

Police Station Of Origin: Bukit Merah West N.P.C 500 Bukit Merah View #01-01 SINGAPORE 159682

Tel No: 1800-3779999

CONTINUATION OF REPORT

Details of V	ehicle Insurance			
The second secon		Insurance No	Effective	Expiry Date
SJH9999Z	NTUC Income Insurance Co-Operative	5083300917-04	26/08/2020	25/08/2021
	Limited			

Brief Details.

On 26/09/2020 at about 1050hrs, I was driving my vehicle (SJH9999Z) along Dairy Farm Road , slip road into Upper Bukit Timah Road. As I entered the slip road, I stopped behind the stop line and looked out for oncoming vehicles on the right. Before I moved off, suddenly a Police motorcycle (TP125C) hit me on the rear of my vehicle. I would like to state that I am not injured and . I have an in-car camera installed in my vehicle.

The following damages incurred to my vehicle:

- 1) Rear left side of vehicle dented
- 2) Exhaust pipe damaged
- 3) The rear light damaged.





Police Station Of Origin: Bukit Merah West N.P.C 500 Bukit Merah View #01-01 SINGAPORE 159682 Tel No: 1800-3779999

Report No. T/20200926/2122

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the **report number** as reference.

Signature Of Informant:
Date/Time:
26/09/2020 19:16
Classification Of Case:

Sketch Plan #4 Pg. 1

SKETCH PLAN

IMPORTANT NOTICE

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- The 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 lodgment 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:
 - 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or

(ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time:

6/10/2020

1. in agraca

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

IDAC BUKIT BATOK (VAC)
511 Bukit Batok Street 23
Singapore 659545
Tel: 6560 3312 Fax: 6569 0722
Email: vacbb@singnet.com.sg

Name:

NRIC/FIN No .:

Sketch Plan #5 Pg. 1	
SKETCH PLAN Bulcit Timch Road	Police motor aycle TP1250 35'H 9999'Z double lame
DESCRIBE CIRCUMSTANCES OF THE ACCIDENT	
from Dicry From Stip load Road, I Stopped at to for the engoing troops police motor cycle (IT white / XI 900) hit my bacle. Since it is a police and so many police	when I am driving to Britist Timely the Ship road wontry c to closer at P 125C - m/cycle / Yamela/ ear at the Vehicle Ambulance Officers come reported pour also given later Treported pour also At J/2020 0926/0093 At done (as motrucked sput in wisting) an per Nova
DECLARATION I/We declare the foregoing particulars are true in every respect.	IDAC BUNIT DATOK (VA)C) 511 Bukit Batok Street 23 Singapore 659545 Tel: 6560 3312 Fax: 6569 0722 Email: vacbb@singnet.com.sg
Policyholder's Signature Date & Time: Oct 2020 Driver's Signature (If driver is not the policyholder) Date & Time:	Reporting Centre Personnel's Signature Name: NRIC/FIN No.:

11:00 am











Accident Photo

















