

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	08/05/2023 18:30 (SGT)
Reported by	Actual Driver
Date of Accident	02/05/2023 22:40 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ALONG BIDEFORD ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBF8819Y
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	MYCOOL PTE LTD
Company Reg No	2XXXXX880R
Email Address	mycool7818@hotmail.com
Mobile Phone No	(Phone) +65-92348136
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Dyna
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Reporting only
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	2982

INSURANCE COMPANY

Name of Insurance Company	Lonpac Insurance Bhd
Policy Number / Cover Note Number	Z23VC05016746

DRIVER

Name of Driver	MUSTAFA MOHAMMED
Passport No/FIN	GXXXX387M
Date Of Birth	14/12/1979
Occupation	Outdoor

Date Of Driving Pass	19/10/2022
Driving experience	7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91752142
Alt. Phone Number	-
Email Address	mycool7818@hotmail.com
Address	APT BLK 193A GUILLEMARD ROAD
Address complement	# 02-0A
Postcode	399725
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	Side Swipe
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)	2
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	PANDIAN KALIDOSS
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Geylang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18008486999
Alt. Police Station Phone No	(Fax) +65-68486799
Police Station Address	1 Cassia Link Singapore 397618
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE ATTACHED POLICE REPORT - T/20230503/2007

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	SKP8239L
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	RAYMOND ISALAH PWA HWEE CHIEW
NRIC No	SXXXX097A
Contact Number	(Phone) +65-88985352
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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 4. The signature and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
 5. Any like reporting may be referred to the Traffic Police Department for investigation.
 6. This report will be forwarded by the insurers to 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 submission 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.
6. Consent Under the Personal Data Protection Act (PDPA)
- I understand and 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 disclosures 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

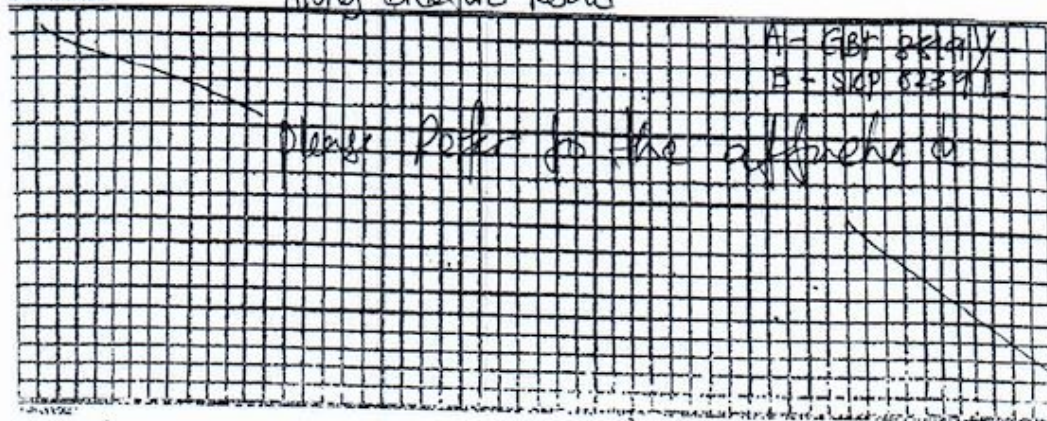
[Signature]
8/05/2023

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

[Signature] 8/5/2023
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Sketch Plan

Along Bideford Road



Describe Circumstance of the Accident

Please Refer to the attached
Police Report
- 7/20230503/2007 -

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

[Signature]
08/05/2023

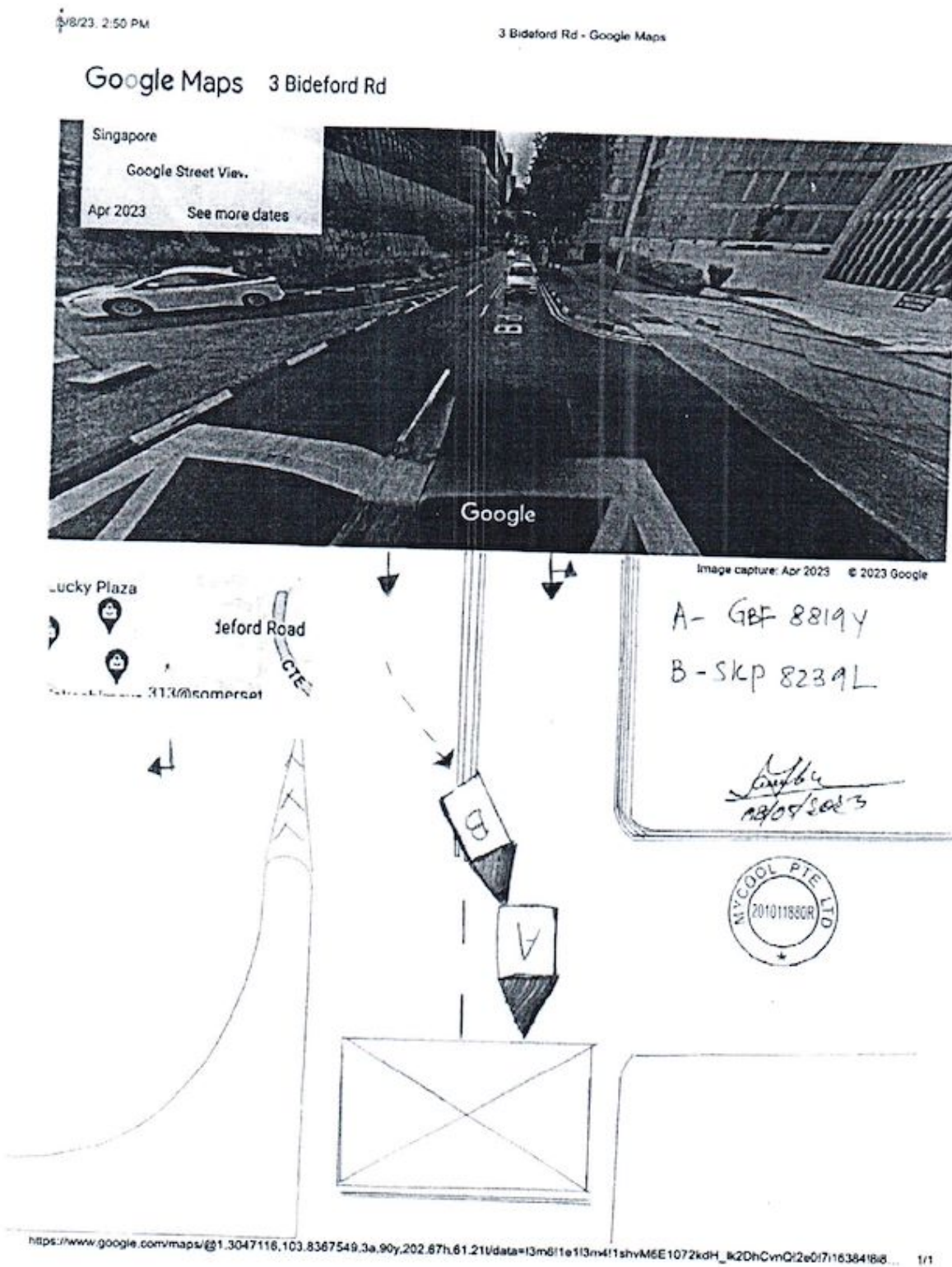
Actual Driver's Signature (if driver is not the policyholder)
/ Date & Time

[Signature] 8/5/2023

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

v2jun2022

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**SINGAPORE
POLICE FORCE**



T/20230503/2007

Police Station Of Origin:
Geylang N.P.C
1 Cassia Link SINGAPORE 397618
Tel No: 1800-8486999

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Report No. T/20230503/2007

CONTINUATION OF REPORT

Brief Details.

On 2/5/2023 at about 2240hrs, I was driving my company's registered lorry bearing registration plate number GBF8819Y along Bideford road. It is a two-lane road and I was driving on the left lane. Traffic was moderately congested at that time. I was before the yellow box before the traffic light junction. The traffic lights was red at the time as such my lorry was in a stationary position. A car bearing registration plate number SKP8239L then cut across the continuous double white line from the right lane at a 45 degree angle and collided with the rear of my lorry. I have taken photographs of the accident. There is no camera installed in my lorry. No one was injured.













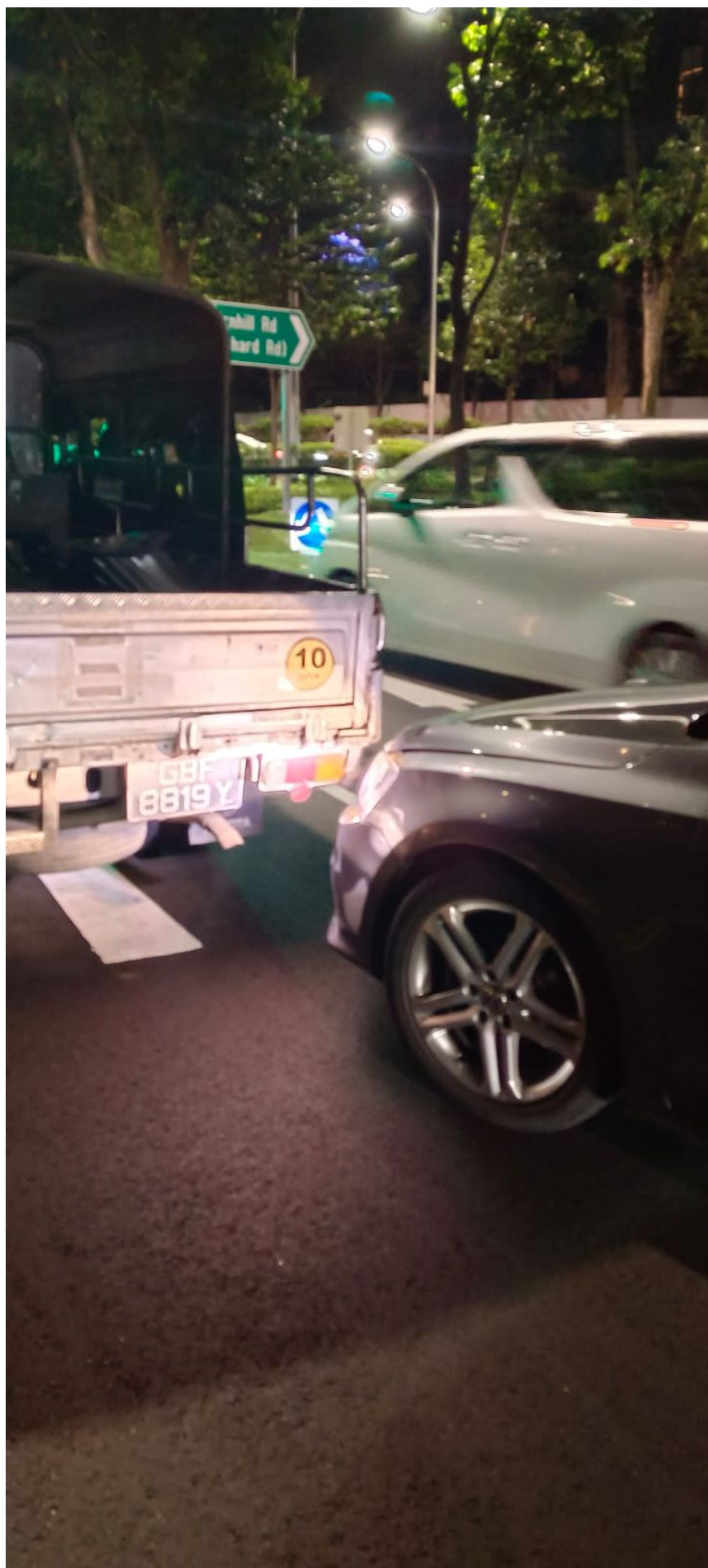















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T/20230503/2007

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Report No. T/20230503/2007

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 03/05/2023 01:06		Vide Report No.:		Station Diary No.: 23
Informant's Particulars				
Name of Informant: MUSTAFA MOHAMMED		Address: APT BLK 193A GUILLEMARD ROAD #02-0A SINGAPORE 399725		
ID Type / ID No.: FIN NO / G7580387M		Contact No.: Home/Office: Mobile: 91752142		
Nationality: BANGLADESHI		Email:		
Sex: Male	Age: 43	Date of Birth: 14/12/1979	Type of Informant: Driver	
Race: Bangladeshi		Language:		
Occupation: CONSTRUCTION WORKER		Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 02/05/2023 22:40	Type of Location: Straight Road
Location: BIDEFORD ROAD				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		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
GBF8819Y	Lorry	TOYOTA	DYNA 3.0 MANUAL	Silver	No Damage	0
SKP8239L	Car			Silver	Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



T/20230503/2007

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Geylang N.P.C
1 Cassia Link SINGAPORE 397618
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POLICE FORCE**

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Geylang N.P.C
1 Cassia Link SINGAPORE 397618
Tel No: 1800-8486999



T/20230503/2007

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Report No. T/20230503/2007

CONTINUATION OF REPORT

Signature of Officer Recording The Report:
G /
SGT 3 TAN CHUAN SIN

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIA /
SSI TAY CHUN KEEN
Contact No.: 65476436

NP168

Signature Of Informant:

Date/Time:
03/05/2023 01:06

Classification Of Case: