

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	29/05/2023 12:08 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	27/05/2023 12:20 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	TAMPINES AVENUE 10
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJN8922U
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	JAMALI BIN MD YUNUS
NRIC No	S7926073H
Email Address	LEOMALIOS@YAHOO.COM
Mobile Phone No	(Phone) +65-98500514
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Harrier
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	0

INSURANCE COMPANY

Name of Insurance Company	ECICS Limited
Policy Number / Cover Note Number	MPC22P00296200

DRIVER

Name of Driver	JAMALI BIN MD YUNUS
NRIC No	S7926073H
Date Of Birth	29/08/1979
Occupation	Indoor

Date Of Driving Pass	24/02/2015
Driving experience	8 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98500514
Alt. Phone Number	-
Email Address	LEOMALIOS@YAHOO.COM
Address	639 YISHUN STREET 61 #05-176
Address complement	-
Postcode	760639
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	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	4
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	No
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	LIM PEI QI
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Yishun North Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18008529999
Alt. Police Station Phone No	(Fax) +65-68522299
Police Station Address	31 Yishun Central Singapore 768827
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED

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	SHB6600Z
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SNK8311B
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SKZ5851K
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	JAMALI BIN MD YUNUS
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SJN8922U

Were seat belts worn? Yes
Was this injured conveyed to hospital by ambulance? No

INJURED 2

Name of injured person LIM PEI QI
Gender -
Phone No -
Address -
Address Complement -
Post Code -
Approximate Age Years Old -
Injuries Sustained -
Injured person in which vehicle? SJN8922U
Were seat belts worn? Yes
Was this injured conveyed to hospital by ambulance? No

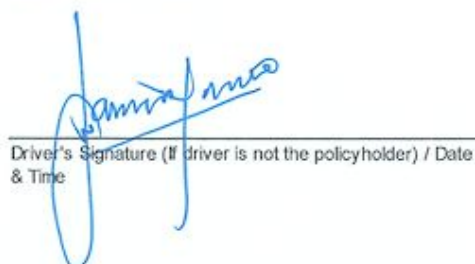
Describe Circumstances of the Accident

On 27.05.2023 about 1218hrs. I was travelling along
 Tanjong Ave 10. I followed front ~~traffic~~ vehicle brake. Suddenly,
 the vehicle B (SHB 6600Z) collided with my vehicle (SUU 89224)
 the impact from the cause my vehicle to surge forward
 and collided into the vehicle in front of me. I
 was involved in 4 vehicle chain-collision.

Declaration

We declare the foregoing particulars are true in every respect.

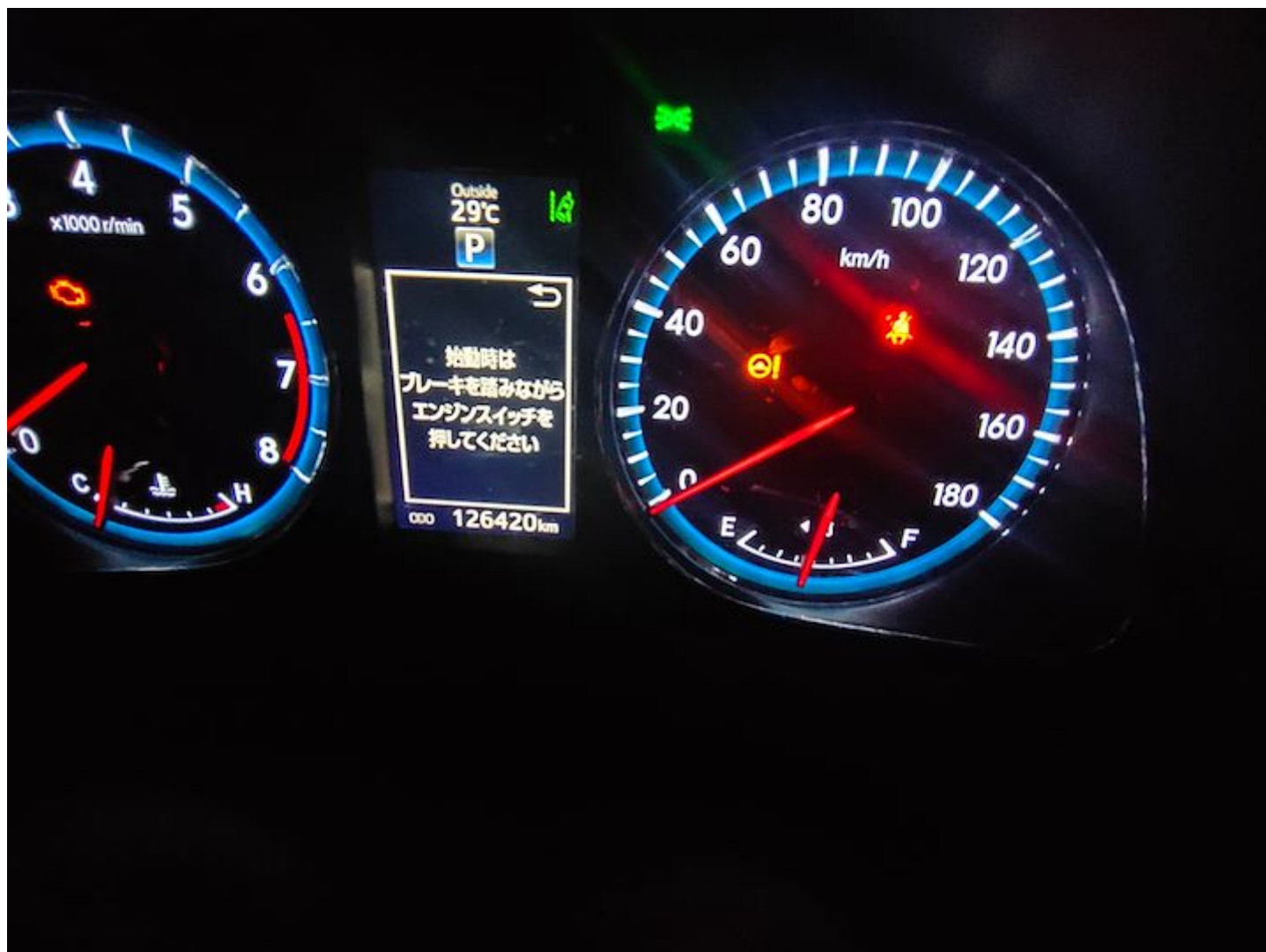

 Policyholder's Signature / Date &
 Time

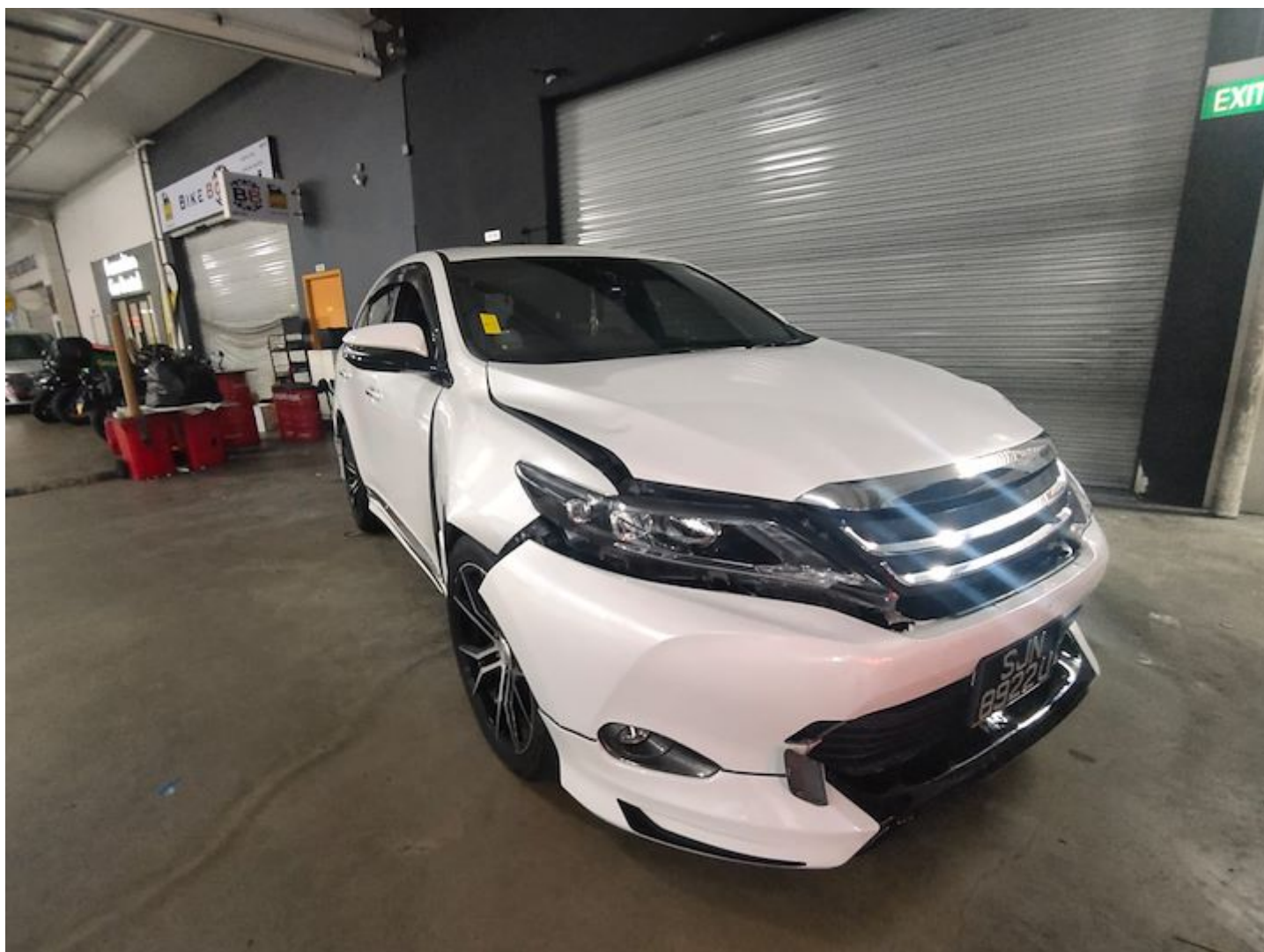

 Driver's Signature (If driver is not the policyholder) / Date
 & Time

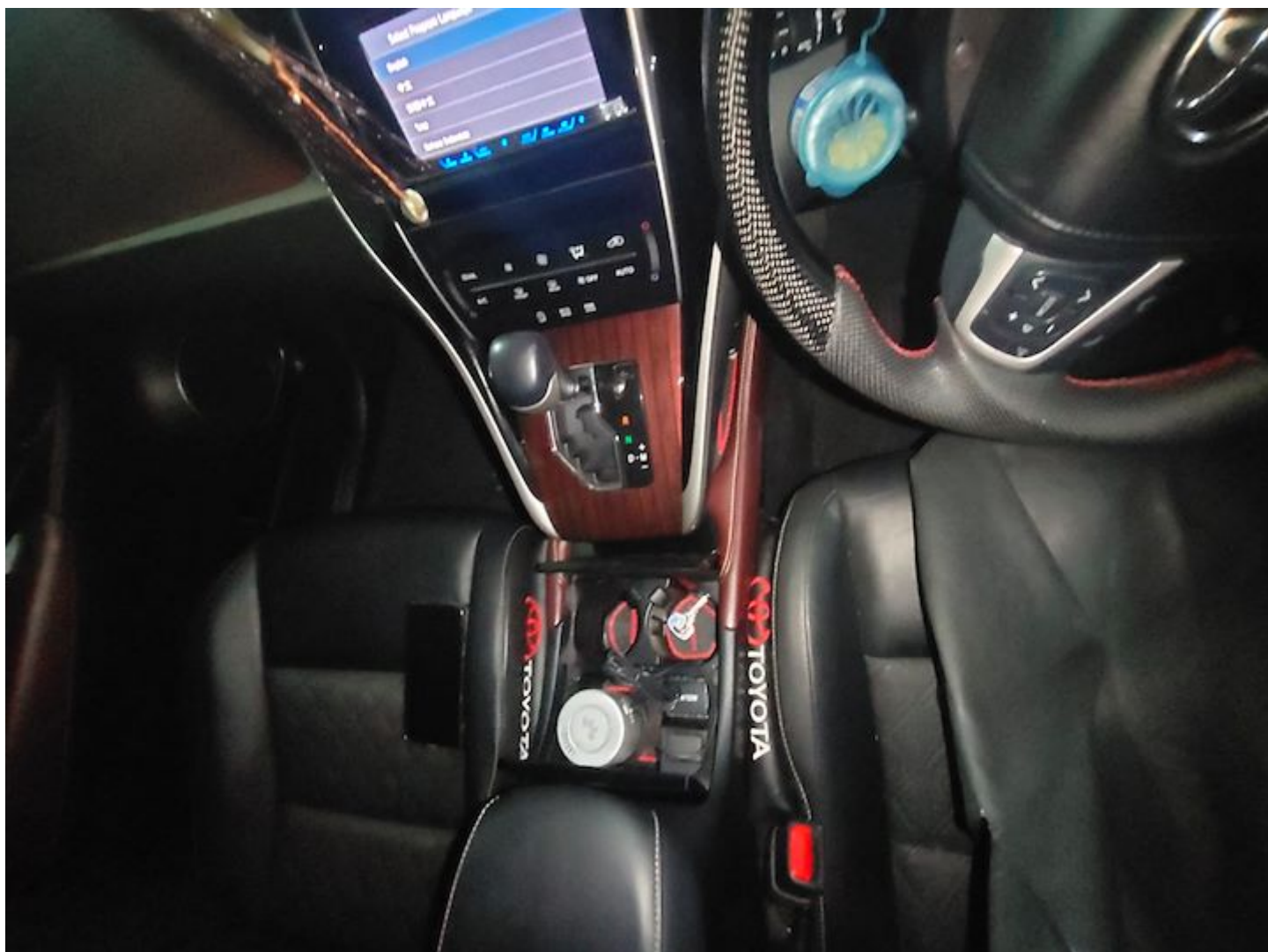
Witnessed by Reporting Centre
 Personnel





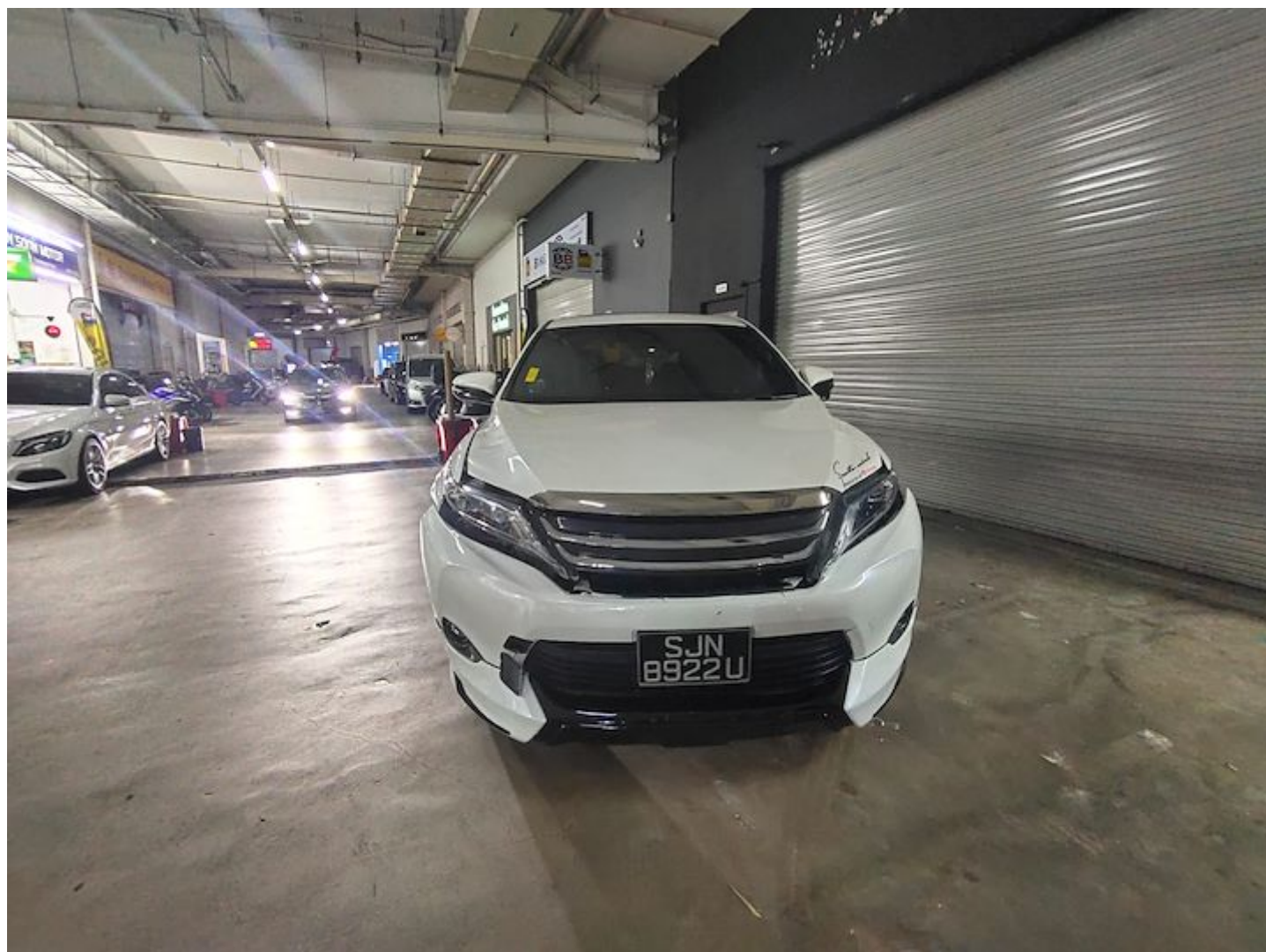
















 SINGAPORE POLICE FORCE		 T/20230527/2063
Police Station Of Origin: Yishun North N.P.C 31 Yishun Central SINGAPORE 768827 Tel No: 1800-8529999		5 of 5 Report No. T/20230527/2063
CONTINUATION OF REPORT		
Signature Of Officer Recording The Report: L / SGT 3 Lim Chuan Rui 		Signature Of Informant: 
Signature Of Interpreter: Not applicable		Date/Time: 27/05/2023 18:11
Officer In Charge Of Case: TP / AEIT / SI TAN JEOK LENG LESLIE Contact No.: 65476151		Classification Of Case:
NP166		


**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768927
Tel No: 1800-8529999



1/20230527/2063

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Report No. T/20230527/2063

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 27/05/2023 18:11	Vide Report No.:	Station Diary No.: 131
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Informant's Particulars

Name of Informant: JAMALI BIN MD YUNUS		Address: APT BLK 639 YISHUN STREET 61 #05-176 SINGAPORE 760639	
ID Type / ID No.: NRIC NO / S7926073H		Contact No.: Home/Office: Mobile: 98500514	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 43	Date of Birth: 29/08/1979	Type of Informant: Driver
Race: Malay		Language: English	
Occupation: PERSONAL TRAINER		Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 27/05/2023 12:20	Type of Location: Straight Road
Location: TAMPINES AVENUE 10				
Weather: Clear		Road Surface: Dry		
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		Traffic Volume: Heavy
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
SHB6600Z	Car	HYUNDAI		Blue	Slightly Damaged	0
SJN8922U	Car	TOYOTA	HARRIER PREMIUM 2.0 A	White	Seriously Damaged	1
SKZ5851K	Car	MAZDA		White	No Damage	0
SNK8311B	Car	HONDA		Red	Seriously Damaged	0



**SINGAPORE
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Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No. 1800-8529999



T/2023/0527/2063

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Report No. T/20230527/2063

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJN8922U	ECICS LIMITED	MPC22P00296200	06/12/2022	05/12/2023

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	UNKNOWN TAXI DRIVER		ID No.	NIL
Related Vehicle	SHB6600Z (Car)		Contact No.	91787914
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL

Passenger				
Name	LIN PEI QI		ID No.	S9234031G
Related Vehicle	SJN8922U (Car)		Contact No.	81861896
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	27/05/2023		Date Discharge	27/05/2023
No. of Days granted Medical Leave	03		Degree of Injury	Slight

Driver				
Name	JAMALI BIN MD YUNUS		ID No.	S7926073H
Related Vehicle	SJN8922U (Car)		Contact No.	98500514
Hospital/Clinic	UNIHEALTH 24-HR CLINIC		Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	27/05/2023		Date Discharge	27/05/2023
No. of Days granted Medical Leave	03		Degree of Injury	Slight


**SINGAPORE
POLICE FORCE**


T12023052712053

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Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

Report No. T12023052712053

CONTINUATION OF REPORT

Driver			
Name	KARTHIK S/O MARAN	ID No.	S8914522H
Related Vehicle	SKZ5851K (Car)	Contact No.	97505969
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	TEO PEI SHI	ID No.	S8921387H
Related Vehicle	SNK8311B (Car)	Contact No.	90223809
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	UNKNOWN LORRY DRIVER	ID No.	NIL
Related Vehicle	NIL	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 27/05/2023 at about 1220hrs, I was driving straight along Tampines Avenue 10, towards Bartley Road direction on Lane 1. After passing the junction with Tampines Ave 1, a red car (SNK8311B) suddenly braked. Hence, I also applied emergency brake. Upon, applying brakes, before my car could come to a stop, my car's (SJN8922U) was hit in the rear by a Taxi (SHB6600Z), causing my car's front to hit SNK8311B on the rear. I am not sure if SNK8311B hit onto the car in front of it, SKZ5851K.

Subsequently, the drivers all alighted from our cars and spoke to each other and exchanged particulars. The driver of SKZ5851K informed that while he was driving, an unidentified lorry jammed brake in front of his car, causing him to do an emergency brake. This caused the driver of SNK8311B to also do an emergency brake, leading to me (SJN8922U) doing an emergency brake. The unidentified lorry drove off before the driver of SKZ5851K could see the plate number.



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999



T12023352712153

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Report No. T12022052712063

CONTINUATION OF REPORT

Sequence of the vehicles line up as follow:

- 1st: unidentified lorry
- 2nd: SKZ5851K
- 3rd: SNK8311B
- 4th: SJN8922U
- 5th: SHB6600Z

My wife (passenger of SJN8922U) and I had seen a doctor and both of us were given three days MC.