

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	19/06/2023 18:19 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	17/06/2023 17:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ALONG PAYA LEBAR ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMP7812P
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	MOHAMED AZIZ BIN MATSOM
NRIC No	SXXXX202C
Email Address	azizsiti555@gmail.com
Mobile Phone No	(Phone) +65-98346770
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	Avante
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	1591

INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance Pte Ltd
Policy Number / Cover Note Number	SD22V11927/VPC/R00

DRIVER

Name of Driver	MOHAMED AZIZ BIN MATSOM
NRIC No	SXXXX202C
Date Of Birth	28/10/1960
Occupation	Indoor

Date Of Driving Pass	26/03/1985
Driving experience	38 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98346770
Alt. Phone Number	-
Email Address	azizsiti555@gmail.com
Address	APT BLK 731 TAMPINES STREET 71
Address complement	# 11-29
Postcode	520731
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	5
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)	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	SITI SURIANI BINTE SAJARI
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Bedok South Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002448999
Alt. Police Station Phone No	(Fax) +65-62446558
Police Station Address	20 Chai Chee Drive Singapore 469045
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO THE ATTACHED POLICE REPORT - T/20230617/2111

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	SD CARD HAD BEEN HANDED OVER TO THE TRAFFIC POLICE OFFICERS.

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLW5653U
Vehicle Manufacturer	Toyota
Vehicle Model	Estima
Vehicle Variant	-
Vehicle Colour	White
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	SKQ5855Y
Vehicle Manufacturer	Nissan
Vehicle Model	X-trail
Vehicle Variant	-
Vehicle Colour	Red
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	SMW6495R
Vehicle Manufacturer	Mazda
Vehicle Model	3
Vehicle Variant	-
Vehicle Colour	Gray
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 4

Vehicle Registration Number	SBS6647X
Vehicle Manufacturer	Mercedes
Vehicle Model	Citaro
Vehicle Variant	-
Vehicle Colour	White
Vehicle Category	Commercial vehicle
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 MOHAMED AZIZ BIN MATSOM
 Gender Male
 Phone No (Phone) +65-98346770
 Address APT BLK 731 TAMPINES STREET 71
 Address Complement # 11-29
 Post Code 520731
 Approximate Age Years Old -
 Injuries Sustained MINOR CONCUSSION-GIVEN 3 DAYS OF MC
 Injured person in which vehicle? SMP7812P
 Were seat belts worn? Yes
 Was this injured conveyed to hospital by ambulance? Yes

INJURED 2

Name of injured person SITI SURIANI BINTE SAJARI
 Gender Female
 Phone No -
 Address -
 Address Complement -
 Post Code -
 Approximate Age Years Old -
 Injuries Sustained MINOR CONCUSSION-GIVEN 3 DAYS OF MC
 Injured person in which vehicle? SMP7812P
 Were seat belts worn? Yes
 Was this injured conveyed to hospital by ambulance? Yes

SKETCH PLAN

IMPORTANT NOTICE


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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.

3. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

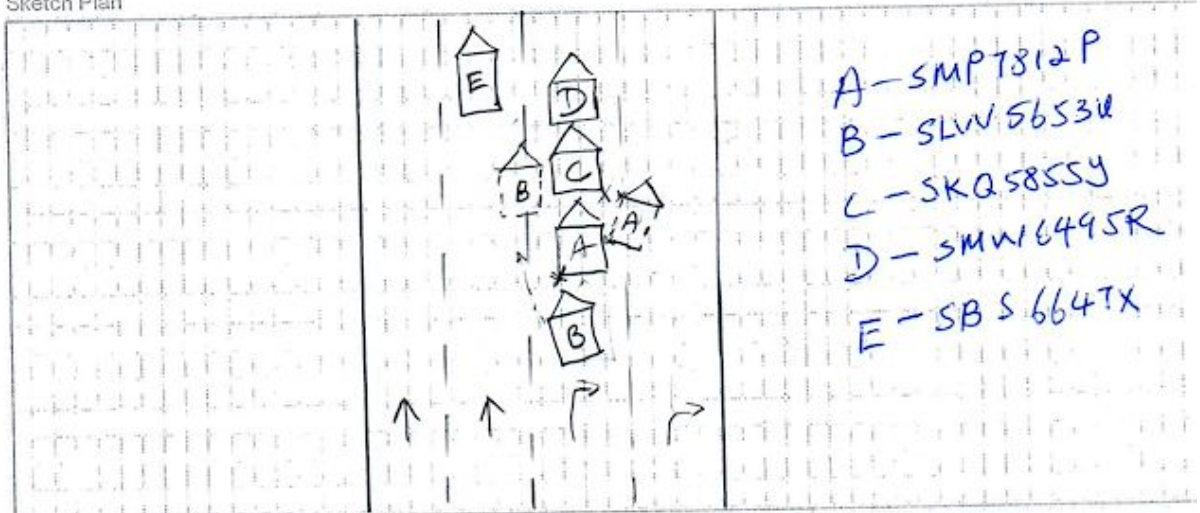
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.

 19/06/23
Policyholder's Signature / Date & Time

 19/06/23
Driver's Signature (if driver is not the policyholder) / Date & Time

 19/6/2023
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)

Sketch Plan



Describe Circumstance of the Accident

Refer to the police Report T/20230617/
2111

Declaration

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

 19/06/23
Policyholder's Signature / Date & Time

 19/06/23
Driver's Signature (if driver is not the policyholder) / Date & Time

 19/6/2023
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)



**SINGAPORE
POLICE FORCE**



T/20230617/2111

Police Station Of Origin:
Bedok South NPP
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

2 of 3

Report No. T/20230617/2111

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	MOHAMED AZIZ BIN MATSOM	ID No.	S1435202C
Related Vehicle	SMP7812P (Car)	Contact No.	98346770
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	17/06/2023	Date Discharge	17/06/2023
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Passenger			
Name	SITI SURIANI BINTE SAJARI	ID No.	S6807062G
Related Vehicle	SMP7812P (Car)	Contact No.	98211745
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	17/06/2023	Date Discharge	17/06/2023
No. of Days granted Medical Leave	03	Degree of Injury	Slight

Brief Details.

On 17/06/2023 at around 1730 hrs, I was driving home from Sims Avenue, along Paya Lebar Road. I saw the traffic light turned red, thus, I stopped and everything was okay.

Suddenly, I saw a car traveling at speed without any sign of slowing down from the rear mirror. Thus, I tried to switch to the lane on my right but there was a vehicle that was stopped there.

This was when I felt a sudden impact from my vehicle's rear, I then alighted from the car with my wife to see what happened. That is when I realised that I was hit by a vehicle, SLW5653U (Toyota Estima). I checked on them and they were generally okay except that the 2 aunty in the vehicle was feeling quite painful.

Thus, I called for police assistance and the ambulance came to the accident site as well. In total, 6 people were conveyed to Changi General Hospital. I wish to state that the in-car camera SD card had been handed over to the traffic police officers that were at the accident site.















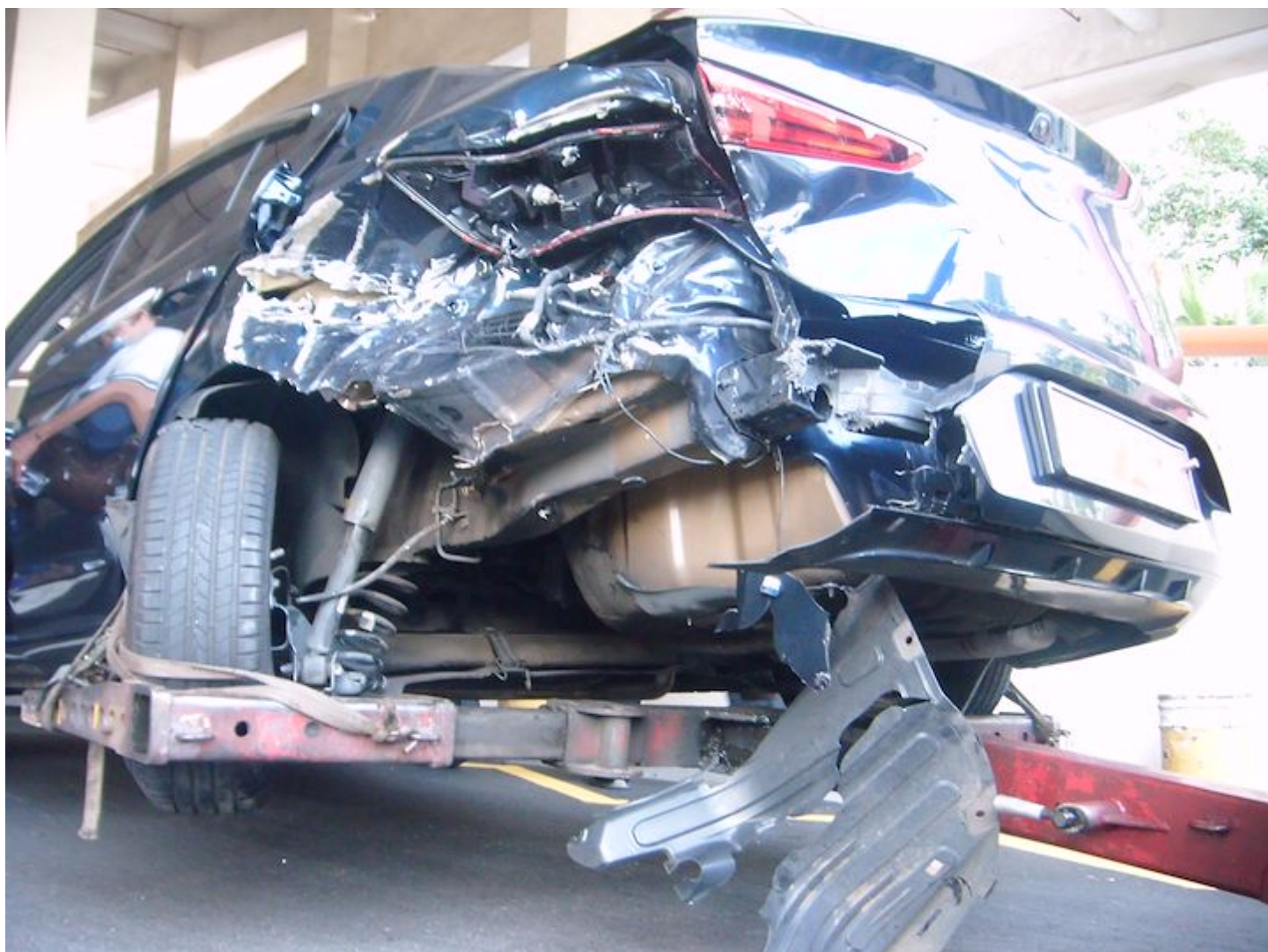
















**SINGAPORE
POLICE FORCE**



T/20230617/2111

Police Station Of Origin:
Bedok South NPP
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

1 of 3
Report No. T/20230617/2111

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 17/06/2023 23:28	Vide Report No.: G/20230617/0143	Station Diary No.: 53
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Informant's Particulars

Name of Informant: MOHAMED AZIZ BIN MATSOM	Address: APT BLK 731 TAMPINES STREET 71 #11-129 SINGAPORE 520731		
ID Type / ID No.: NRIC NO / S1435202C	Contact No.: Home/Office: Mobile: 98346770		
Nationality: SINGAPORE CITIZEN	Email:		
Sex: Male	Age: 62	Date of Birth: 28/10/1960	Type of Informant: Driver
Race: Malay	Language: English		
Occupation: WAREHOUSE ASSISTANT	Driving Licence Information: Class: 2B,3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 17/06/2023 17:30	Type of Location: X-Junction
Location: PAYA LEBAR ROAD				
Weather: Clear		Road Surface: Dry		
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SBS6647X	Bus/Coach/Minibus	MERCEDES BENZ	CITARO	White	Slightly Damaged	0
SKQ5855Y	Car	NISSAN	X-TRAIL	Red	Seriously Damaged	3
SLW5653U	Car	TOYOTA	ESTIMA	White	Seriously Damaged	5
SMP7812P	Car	HYUNDAI	AVANTE	Blue	Seriously Damaged	1
SMW6495R	Car	MAZDA	3	Grey	Slightly Damaged	1



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POLICE FORCE**



T/20230617/2111

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Tel No: 1800-2448999

2 of 3

Report No. T/20230617/2111

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Date Treatment	17/06/2023	Date Discharge	17/06/2023
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Passenger			
Name	SITI SURIANI BINTE SAJARI	ID No.	S6807062G
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Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
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**SINGAPORE
POLICE FORCE**



T/20230617/2111

Police Station Of Origin:
Bedok South NPP
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

3 of 3

Report No. T/20230617/2111

CONTINUATION OF REPORT

Signature of Officer Recording The Report:
G /
SGT 3 NG GIM LONG

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /
SGT 3 MUHAMMAD AFIQ BIN RAHMAT
Contact No.: 65476171

Signature Of Informant:

Date/Time:
17/06/2023 23:28

Classification Of Case:

NP168