

# 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 First Submission	16/08/2024 14:55 (SGT)
Reported by	Actual Driver
Date of Accident	14/08/2024 11:20 (SGT)
Exact Location of Accident	25 Kaki Bukit Rd 2, Singapore 417850
Additional Location Information	KAKI BUKIT WAREHOUSE COMPLEX
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBE6002E
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	CHYE HENG HUAT ENGINEERING PTE LTD

### VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Dyna
Variant	-
Vehicle Category	Goods vehicle
Transmission	Manual
CC	2982

### INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5112423903

### DRIVER

Name of Driver	TAN POH CHENG
NRIC No	S0847794I
Address	BLK 541 WOODLANDS DRIVE 16 #11-51
Address complement	-
Postcode	730541
Does Driver Own Other Vehicles?	No

### GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Collided into Parked Vehicle
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Weather Conditions

Clear

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Was anybody injured in the Accident?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	2
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

CIRCUMSTANCES OF ACCIDENT

I ACCIDENTALLY REVERSED INTO THE LORRY (B) FRONT LEFT DOOR WHEN I WAS MAKING MY WAY OUT TO THE EXIT. NO DAMAGE TO MY VEHICLE.

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	GY3663C
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Goods vehicle
Name of Driver	-
Insurance Company Name	-



Describe Circumstance of the Accident

I accidentally reversed into the long (B) front left door when I was making my way out to the exit. No damage to my vehicle.

Declaration

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

If you wish to claim against your own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim can be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more details.



Policyholder's Signature (Date & Time)

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



Witnessed by Reporting Officer's Personnel (Name as in NRIC) and

























**TOYOTA MOTOR CORPORATION JAPAN**  
**MODEL** KDY231R-1LMKY  
**ENGINE** 1KD-FETV  
**FRAME No.** JTF-AT35Y80K205413 2982  
**COLOR** 199  
**TRIM** EA13  
**PLANT** P11  
**OPTION**  
**TRANS./AXLE** R451 A06B 833

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