

# 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 .....	15/08/2024 12:51 (SGT)
Reported by .....	Actual Driver
Date of Accident .....	14/08/2024 07:25 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	ANG MO KIO ST 52
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	GBF8473K
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### INSURED/POLICYHOLDER

Is company? .....	Yes
Name Of Registered Owner .....	CA M&E ENGINEERING PTE LTD
Company Reg No .....	2XXXXX189G
Email Address .....	IRENE@CA-ME.COM.SG
Mobile Phone No .....	(Phone) +65-87211190
Alternative Phone No .....	-

### VEHICLE PARTICULARS

Manufacturer .....	Toyota
Model .....	Hiace
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 - Claiming third party
Vehicle Category .....	Commercial vehicle
Transmission .....	Manual
CC .....	2982
Vehicle Fuel .....	-
First Registration Date .....	-
Chassis no .....	-
Effective Date/Time of Ownership .....	-

### INSURANCE COMPANY

Name of Insurance Company .....	Income Insurance Limited
Policy Number / Cover Note Number .....	5099161579-06

### DRIVER

Name of Driver .....	TAN SIEW CHYE
NRIC No .....	SXXXX204G
Date Of Birth .....	05/09/1962
Occupation .....	Outdoor
Driving Pass Date .....	16/02/1983
Driving License Pass Class .....	3
Driving License Validity .....	Valid
Driving experience .....	41 YEARS AND 6 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-90067372
Alt. Phone Number .....	-
Email Address .....	IRENE@CA-ME.COM.SG
Address .....	509 ANG MO KIO AVE 8
Address complement .....	#08-2750
Postcode .....	560509
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? .....	Yes
Was any injured conveyed to hospital by ambulance? .....	No
Was any other vehicle or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	1
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 .....	-

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Traffic Police
Police Station Phone No .....	(Phone) +65-65470000
Alt. Police Station Phone No .....	(Fax) +65-65474900
Police Station Address .....	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO ATTACH

#### 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 .....	SJN64Z
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 .....	TAN SIEW CHYE
Gender .....	Male
Phone No .....	-
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	3 DAYS MC
Injured person in which vehicle? .....	GBF8473K
Were seat belts worn? .....	-
Was this injured conveyed to hospital by ambulance? .....	No



Describe Circumstance of the Accident

Refer Police Report No. T/20240814 /7099

Declaration

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

X



Policyholder's Signature / Date & Time

*[Signature]*

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



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





























**SINGAPORE  
POLICE FORCE**



T/20240814/7099

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

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Report No. T/20240814/7099

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 14/08/2024 19:59	Vide Report No.:	Station Diary No.:
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Informant's Particulars			
Name of Informant: TAN SIEW CHYE		Address: 509 ANG MO KIO AVENUE 8 #08-2750 SINGAPORE 560509	
ID Type / ID No.: NRIC NO / S1521204G		Contact No.: Home/Office: Mobile: 90067372	
Nationality: SINGAPORE CITIZEN		Email: SIEWCHYE62@GMAIL.COM	
Sex: Male	Age: 61	Date of Birth: 05/09/1962	Type of Informant: Driver
Race: Chinese		Language: English	
Occupation: Driver		Driving Licence Information: Class: Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 14/08/2024 07:20	Type of Location:
Location: ANG MO KIO STREET 52				
Weather:		Road Surface:		
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision:				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBF8473K	Motor van				Seriously Damaged	0
SJN64Z	Motor car				Seriously Damaged	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA





**SINGAPORE  
POLICE FORCE**



T/20240814/7099

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

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Report No. T/20240814/7099

CONTINUATION OF REPORT

Driver			
Name	TAN SIEW CHYE	ID No.	S1521204G
Related Vehicle	GBF8473K (Motor van)	Contact No.	90067372
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 (MC)	03	Degree of Injury	Serious

**Brief Details.**

On the stated date and time, i was driving my vehicle GBF8473K along Ang Mo Kio Street 52 with my seatbelt on.

There was a big lorry travelling in front of me.

SJN64Z was stationary along the said road at the bus stop.

The big lorry moved to right side of the lane to drive past the said stationary vehicle.

I followed suit.

After the big lorry had driven past the stationary SJN64Z, SJN64Z suddenly swerved out into my vehicle's path without signalling.

I immediately jammed on my brakes and swerved to my right to avoid the collision but could not do so.

The vehicle had collided onto my vehicle front left portion, causing my vehicle to rock sideways violently. The impact was huge which caused my left knee to knock against the dashboard, my chest also knocking against the steering wheel and i felt pain on my left wrist too as i was holding onto the gear stick.

Upon alighting, i realised vehicle SJN64Z had crashed into my vehicle front left portion, leaving it badly damaged. Vehicle SJN64Z was attempting to make a illegal U turn into the HDB carpark on the opposite road.

I took some photos and left shortly.

Later in the afternoon, i started feeling pain on my neck, shoulders and lower back. The pain on my left wrist and chest also got worse. I decided to seek medical treatment at Intemedical Teck Ghee near my place while travelling back home.

I was given 3 days MC for injuries caused by the accident.

I will be seeking follow up treatment if the pain persists.





**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000



T/20240814/7099

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Report No. T/20240814/7099

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / AEIT /  
MUHAMMAD NOOR BIN ABDUL RAHMAN  
Contact No.: 65476219

NP168

Signature Of Informant:  
The identity of the person making this report has been  
authenticated by Singpass. No signature is required.

Date/Time:  
14/08/2024 19:59

Classification Of Case: