

# 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 witholding 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 05/09/2024 14:27 (SGT) Reported by **Actual Driver** e of Accident 01/09/2024 18:40 (SGT) Lact Location of Accident Airport Blvd., Singapore Additional Location Information Country/State of Loss Singapore

## **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SMF246Y

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner SZE KIM SOU

VEHICLE PARTICULARS

Manufacturer Mercedes Model E200 Variant icle Category Private hire Transmission Auto

CC 1991

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited Policy Number / Cover Note Number 5145370079

DRIVER

Name of Driver TAY POH SOON NRIC No S6844535C Address

BLK 121B EDGEDALE PLAINS #15-191

Address complement Postcode 822121

Does Driver Own Other Vehicles? No

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident Collision - Head to Rear

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident?

Was anybody injured in the Accident?

Was any other vehicle or property damaged?

Number of Passengers (Including Driver)

Translator's name

Translator's ID

Translator's phone number

Translator's email

Original language used in the statement

CIRCUMSTANCES OF ACCIDENT

## AS PER POLICE REPORT NO. T/20240905/2012

#### ATTACHMENT(S)

Are accident photos available for attachment?
Was there any video captured by Car Camera?

Yes No

## DETAILS OF OTHER VEHICLE PROPERTY 1

 Vehicle Registration Number
 GBG2132D

 Vehicle Manufacturer

 Vehicle Model

 Vehicle Variant

 Vehicle Colour

 Vehicle Category
 Commercial vehicle

 Name of Driver

 Insurance Company Name

#### SKETCH PLAN

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- 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 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 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.

#### 8. 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:

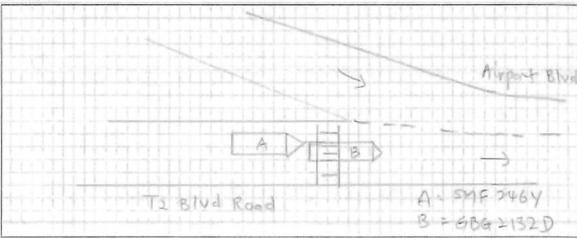
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to
- (ii) investigating the accident and/or my claims;
- (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (iv) administering 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.

Policyholder's Signature / Date & Time.

Actual Driver's Signature of driver is not the policyholder) / Date & Time 25/1/24

Witnessed by Reporting Centre Personnel (Name as in NRICIID card)

## Sketch Plan



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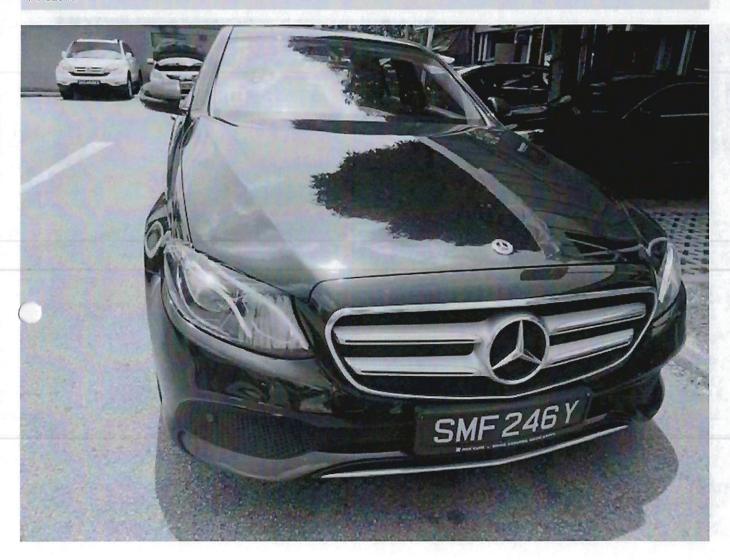
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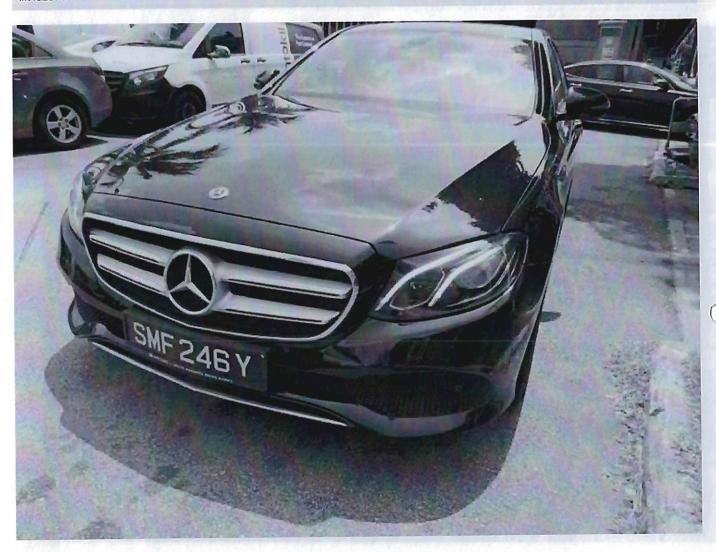




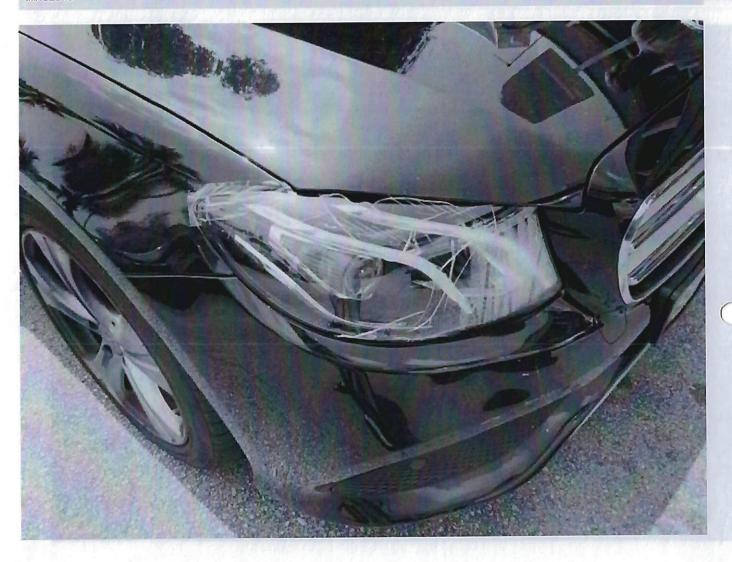








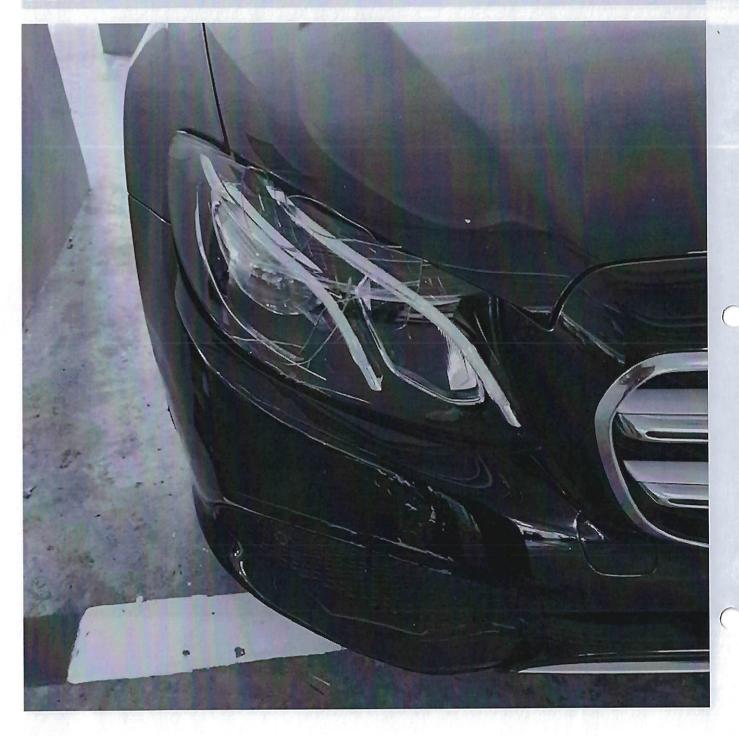






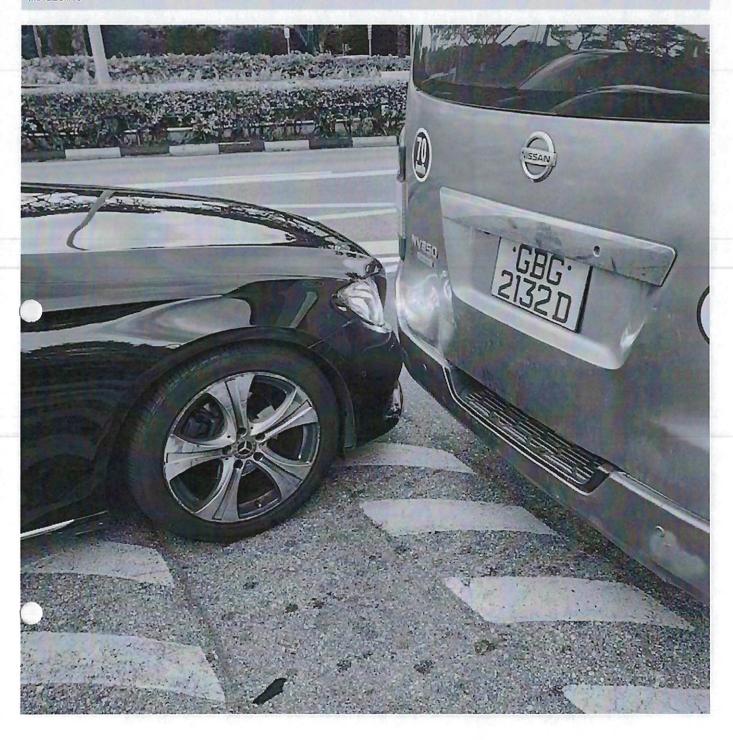
















Police Station Of Origin. Punggol N.P.C 151 Punggol Central SINGAPORE 828727 Tel No. 1800-6049999

Report No. T/20240905/2012

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/09/2024 10:43			Vide Report No.:	Station Diary No.: 26	
Informa	nt's Partici	ulars			
Name of Informant: TAY POH SOON			Address 121B EDGEDALE PLAINS #15-191 SINGAPORE 822121		
ID Type / ID No : NRIC NO / \$6844535C			Contact No : Home/Office:	Mobile: 85697224	
National SINGAP	ity: ORE CITIZ	'EN	Email:		
Sex: Male	Age: 55	Date of Birth: 06/11/1968	Type of Informant: Driver		
Race: Chinese			Language		
Occupation: LIMOUSINE DRIVER			Driving Licence Information: Class: 28.3	Date of Expiry	

Type of Accident:	Non Injury Others	Drink Drive; Na	Date/Time of Accident 01/09/2024 18:40	Type of Location Straight Road
Location: AIRPORT BO	ULEVARD			
Weather, Clear		Road Surface Uneven		
		Traffic Control, Not Controlled		Traffic Volume.
Traffic Flow: One Way		Not Controlled		LOUIS AL

Details of A	ehicle involve	iu iii		-		
Vehicle No.	Type	Make	Model	Color	Conditio	No of Passenge
G8G2132D	Motor van	NISSAN	HIACE NV350	Grey	Slightly Damaged	0
SMF246Y	Motor car	MERCEDES BENZ	E200	Black	Slightly Damaged	0



T/20240905/2012

Police Station Of Origin: Punggol N.P.C 151 Punggol Central SINGAPORE 828727 Tel No: 1800-6049999 2 el'3 Report No. T/20240905/2012

CONTINUATION OF REPORT

Brief Details.

On 01/09/24 at about 1840hrs, I was driving my vehicle SMF246Y along T2 Blvd road exiting to Airport Blvd road when the vehicle GBG2132D in front of me suddenly jammed brake which led to my vehicle rear ending his vehicle. We then alighted our vehicles, exchanged our contact details and took some photos of the damages. He agreed to settle the matter privately and at first we were still in contact however subsequently there was no response from his side. On 04/09/24 evening, my supervisor received a call regarding the insurance claim as such he instructed me to make a police report.





Police Station Of Origin: Punggol N.P.C 151 Punggol Central SINGAPORE 828727 Tel No: 1800-6049999 T/20240905/2012

Report No. 1/20240905/2012

CONTINUATION OF REPORT

Signature of Officer Recording The F / SGT 1 ANG SHENG NONG	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 05/09/2024 10:43
Officer in Charge Of Case: TP / GIA / SI TAN JEOK LENG Contact No.: 65476151	Classification Of Case:

NP188

## PRIVATE HIRE



