

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	03/09/2024 13:17 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	02/09/2024 19:40 (SGT)
Exact Location of Accident	Near Blk 426, Singapore
Additional Location Information	FROM AYE TOWARDS CLEMENTI AVENUE 6 NEAR EXIT 11
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGX6556P
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TENG JINGHUA
NRIC No	SXXXX828H
Email Address	JHTENG1995@GMAIL.COM
Mobile Phone No	(Phone) +65-98392406
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Volvo
Model	S60
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	1969
Vehicle Fuel	-
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	HL Assurance Pte Ltd
Policy Number / Cover Note Number	MP316766

DRIVER

Name of Driver	TENG JINGHUA
NRIC No	SXXXX828H
Date Of Birth	02/04/1966
Occupation	Indoor
Driving Pass Date	08/09/2006
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	18 YEARS
Gender	Male
Mobile Number	(Phone) +65-98392406
Alt. Phone Number	-
Email Address	JHTENG1995@GMAIL.COM
Address	BLK 48A TOH TUCK ROAD
Address complement	#04-06
Postcode	596740
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	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?	No
Was any injured conveyed to hospital by ambulance?	-
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 SKETCH PLAN AND POLICE REPORT T/20240903/7024

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHA1121C
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
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)	-

SKETCH PLAN**IMPORTANT NOTICE**

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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 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.

Policyholder's Signature / Date & Time

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

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

Sketch Plan

Describe Circumstance of the Accident

REFER TO POLICE REPORT T/20240903/7024

Declaration

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

[Signature] 03/09/2024

Policyholder's Signature / Date & Time

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

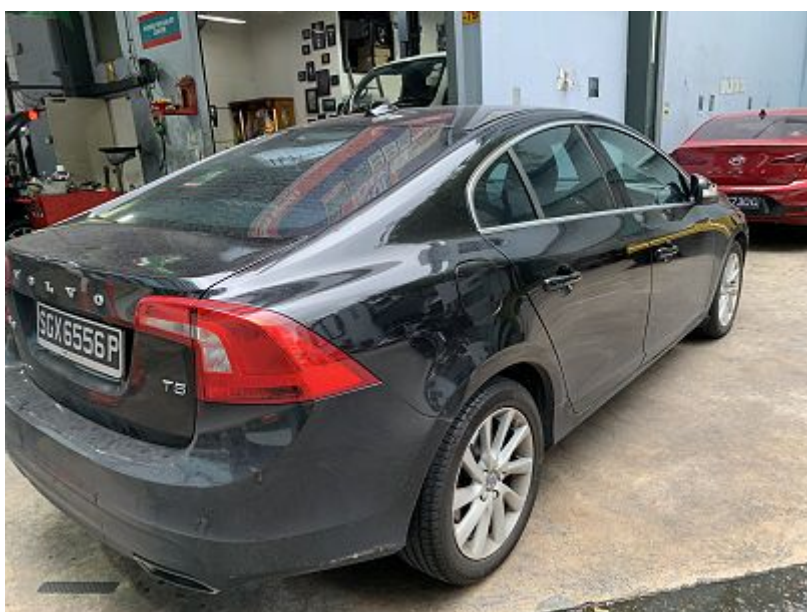
[Signature]

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

SUZANA BIE EDROS













**SINGAPORE
POLICE FORCE**



T/20240903/7024

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

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Report No. T/20240903/7024

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 03/09/2024 12:05		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: Teng Jinghua			Address: 48A Toh Tuck Road #04-06 SINGAPORE 596740		
ID Type / ID No.: NRIC NO / S2710828H			Contact No.: Home/Office: Mobile: 98392406		
Nationality: SINGAPORE CITIZEN			Email: jhteng1995@gmail.com		
Sex: Male	Age: 58	Date of Birth: 02/04/1966	Type of Informant: Driver		
Race: Chinese			Language: English		
Occupation: Electrical engineer			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 02/09/2024 19:40	Type of Location: slip road from AYE to Clementi Ave 6
Location: CLEMENTI AVENUE 3				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGX6556P	Motor car	VOLVO	S60 T5 A/T ABS D/AIRBAG 2WD	Black		0
SHA1121C	Taxi					0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date



**SINGAPORE
POLICE FORCE**



T/20240903/7024

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

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Report No. T/20240903/7024

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
SGX6556P	HL ASSURANCE PTE. LTD	MP316766	31/03/2021	30/03/2025

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	Teng Jinghua		ID No. S2710828H
Related Vehicle	SGX6556P (Motor car)		Contact No. 98392406
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)	NIL	Degree of Injury	NIL

Brief Details.

The accident happened in moving off from AYE towards Clementi Ave 6. The traffic is very slow. When I am driving slowly, one blue color Taxi (plate number: SHA1121C) came from right hand rear side during lane changing and swiped on my car, causing my right side mirror bounced back and the casing lost, and also some scratches on the front-side fence. One 'pong' sound can be heard when the hit/swipe happened (from the video). The taxi paused for a second and then drove off. I honked and flashed light since the traffic is very slow and I am behind him. However, the taxi didn't response.

I have two videos (with audio) captured from my front and rear dash camera.



**SINGAPORE
POLICE FORCE**

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



T/20240903/7024

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Report No. T/20240903/7024

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / HRT /
MOHAMMAD ABDILLAH BIN PALIL
Contact No.: 65476902

NP168

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

Date/Time:
03/09/2024 12:05

Classification Of Case:



CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1996

ROAD TRANSPORT ACT, 1987 (MALAYSIA)

MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

Form X1	
CERTIFICATE NUMBER	MP316766
Type of Coverage	Comprehensive
Sum Insured	Market Value
Own Damage Excess	SGD1,500.00
Windscreen Excess	SGD100.00
1. Index Mark and Registration Number of Vehicle	SGX6556P
2. Chassis/Vehicle Identification No.	YV1FS40LDH2434505
3. Name of Policyholder	TENG, JINGHUA
4. Effective date of the Commencement of Insurance for the purposes of Insurance for the purposes of the Act	31 Mar 2024
5. Date of Expiry of Insurance	30 Mar 2025
6. Persons or Classes of Persons entitled to drive*	
01. TENG, JINGHUA	02. N/A
03. N/A	04. N/A
05. N/A	06. N/A
(b) Any other person who is driving on the Policyholder's order or with his/her permission.	
*Provided that the person driving is permitted in accordance with the licensing or other laws or laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.	
7. Limitations as to use*	
Use only for social domestic and pleasure purposes and for the Policyholder's business or profession. The Policy does not cover use for hire or reward, racing, pace-making, reliability trial, speed testing, the carriage of goods (other than samples) in connection with any trade or business or use for any purpose in connection with the Motor Trade.	
*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.	
Please note that the Own Damage Excess will be halved if claims related repairs are done at HL Assurance Approved Workshops listed in the attached.	
This Certificate is not transferable to a new owner of the Motor Vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to HL Assurance Pte. Ltd. Within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).	
Hire Purchase Company	

I/WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or any Amendment, Act or Acts passed in substitution thereof.

HL ASSURANCE PTE. LTD.

Issue on: 06 Feb 2024

Authorized Signature

HL Assurance Pte. Ltd. A member of the Group being formed

11 Keppel Road, #11-01 ABI Plaza, Singapore 089057 Tel: 65 6702 0202 Fax: 65 6922 6002 E-MAIL: hl@hl.com.sg www.hl.com.sg

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