

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	11/10/2024 15:10 (SGT)
Reported by	Actual Driver
Date of Accident	10/10/2024 08:05 (SGT)
Exact Location of Accident	AYE, Singapore
Additional Location Information	TOWARDS TUAS
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDU9898J
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	SONG TECK PTE LTD
Company Reg No	2XXXXX184K
Email Address	ENGDAVID.1965@GMAIL.COM
Mobile Phone No	(Phone) +65-81897061
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Prius
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	1797
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	5147720746

DRIVER

Name of Driver	ENG CHIN KUAN
NRIC No	SXXXX874C
Date Of Birth	23/03/1965
Occupation	Outdoor
Driving Pass Date	15/06/2019
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	5 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96217443
Alt. Phone Number	-
Email Address	ENGDAVID.1965@GMAIL.COM
Address	609 BEDOK RESERVOIR RD
Address complement	#03-644
Postcode	470609
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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	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)	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	PASSENGER 1
Gender	Male

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 SLG9754U
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 ENG CHIN KUAN
Gender Male
Phone No -
Address -
Address Complement -
Post Code -
Approximate Age Years Old -
Injuries Sustained 3 DAYS MC
Injured person in which vehicle? SDU9898J
Were seat belts worn? Yes
Was this injured conveyed to hospital by ambulance? No

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(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.

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

A = SDU 4898J
B = SLG 9754U

AYE towards Tugs

Describe Circumstance of the Accident

Refer to Police Report

T/ 20241010 / 7124

Declaration

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


Policyholder's Signature / Date & Time


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


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



**SINGAPORE
POLICE FORCE**



T/20241010/7124

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

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Report No. T/20241010/7124

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/10/2024 23:18		Vide Report No.:		Station Diary No.:
Informant's Particulars				
Name of Informant: ENG CHIN KUAN		Address: 609 BEDOK RESERVOIR ROAD #03-644 SINGAPORE 470609		
ID Type / ID No.: NRIC NO / S1695874C		Contact No.: Home/Office: Mobile: 96217443		
Nationality: SINGAPORE CITIZEN		Email: ENGDAVID.1965@GMAIL.COM		
Sex: Male	Age:	Date of Birth: 23/03/1965	Type of Informant: Driver	
Race: Chinese		Language: English		
Occupation: Self employed		Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 10/10/2024 08:05	Type of Location:
Location: AYER RAJAH EXPRESSWAY				
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
SDU9898J	Motor car					1

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



**SINGAPORE
POLICE FORCE**



T/20241010/7124

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

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Report No. T/20241010/7124

CONTINUATION OF REPORT

Driver			
Name	ENG CHIN KUAN	ID No.	S1695874C
Related Vehicle	SDU9898J (Motor car)	Contact No.	96217443
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 ferrying a male passenger on board vehicle SDU9898J.

I was travelling straight on the extreme right lane along AYE towards Tuas direction.

As the vehicle in front stopped I gradually follow suit.

Suddenly vehicle SLG9754U came from behind and hit onto my vehicle's rear portion.

The impact was great and caused both my hands to slip and hit onto my steering.

After a while I start to feel pain on my neck shoulder and back areas.

I then proceeded to LifePlus medical group bedok to seek treatment and I was given 3 days MC.



**SINGAPORE
POLICE FORCE**

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



T/20241010/7124

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Report No. T/20241010/7124

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / AEIT /
PHNG KAR SOON
Contact No.: 65476439

NP168

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

Date/Time:
10/10/2024 23:18

Classification Of Case: