

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	26/07/2024 20:26 (SGT)
Reported by	Actual Driver
Date of Accident	25/07/2024 09:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	DEFU LANE 10
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	5151S
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	INDECO ENGINEERS (PTE) LTD
Company Reg No	1XXXXX130G
Email Address	Jacktan@motorexpress.com.sg
Mobile Phone No	(Phone) +65-97373599
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	TM SANTA FE 2.4 GDI AT 4WD
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 - Reporting only
Vehicle Category	Government
Transmission	Auto
CC	2199

INSURANCE COMPANY

Name of Insurance Company	Allied World Assurance Company, Ltd
Policy Number / Cover Note Number	BVMTSB0002462400

DRIVER

Name of Driver	KUM KWOK WAH
NRIC No	SXXXX288A
Date Of Birth	21/10/1954
Occupation	Indoor

Driving Pass Date	09/03/1976
Driving experience	48 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97373599
Alt. Phone Number	-
Email Address	Jacktan@motorexpress.com.sg
Address	2C Upper Boon Keng Road
Address complement	#14-668
Postcode	383002
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	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?	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

PLEASE REFER TO POLICE REPORT : T/20240725/2080 LODGED AT TRAFFIC POLICE

BRIEF DETAILS

ON THE ABOVEMENTIONED DATE AND TIME, V1 (QX1439J) WAS DRIVING ALONG SAID ROAD AND COLLIDED WITH V2 (GBK5834X). BOTH WERE AT THE JUNCTION. V1 WAS FOLLOWING V2 CLOSELY FROM BEHIND. V1 EXPECTED V2 TO DRIVE OFF AFTER STOPPING AT THE JUNCTION BUT V2 DID NOT AND V1 ENDED UP COLLIDING INTO V2. V1 IS AN INDECO CONTRACTOR THEREFORE A BLUE-PLATE NUMBER (5151S) WAS HUNG AT THE REAR SIDE. BOTH EXCHANGED PARTICULARS. NOBODY WAS INJURED.
V1-KUM KWOK WAH // S0157288A // 97373599
V2-TAN CHEE SENG // S1686794B // 98563360

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	GBK5834X
Vehicle Manufacturer	Toyota
Vehicle Model	HIACE VAN TURBO 5DR MT
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)	-

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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

**VERIFY BY AJAX MARS (ARC)
REPORTING OFFICER
MOHAMED SHARIL BIN SATAR**

Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

REFER TO ATTACHED ACCIDENT DIAGRAM

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As police report

DECLARATION

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

Policyholder's Signature
Date & Time:

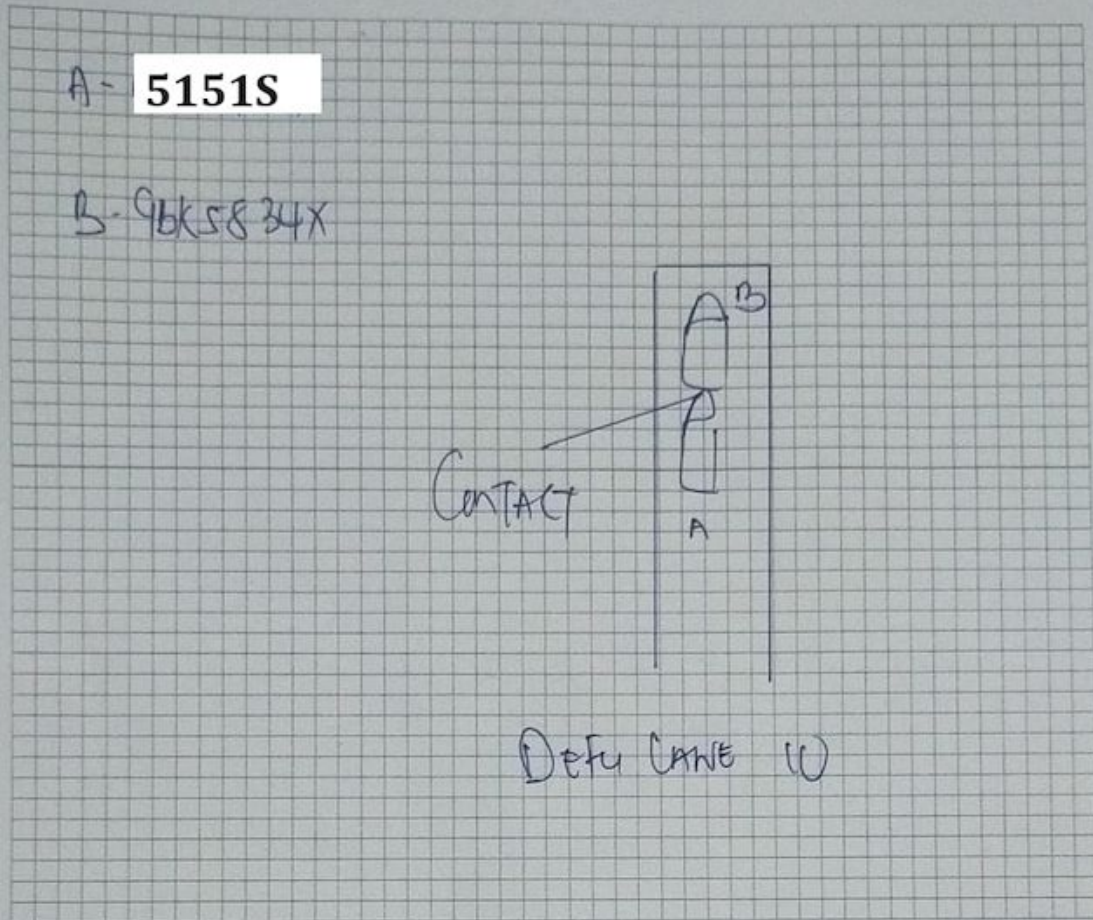
Driver's Signature
(If driver is not the policyholder)
Date & Time:

**VERIFY BY AJAX MARS (ARC)
REPORTING OFFICER
MOHAMED SHARIL BIN SATAR**

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

ACCIDENT DIAGRAM

Ver. 30042021



VERIFIED BY AJAX MARS (ARC)
REPORTING OFFICER
MOHAMED SHARIL BIN SATAR

Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:





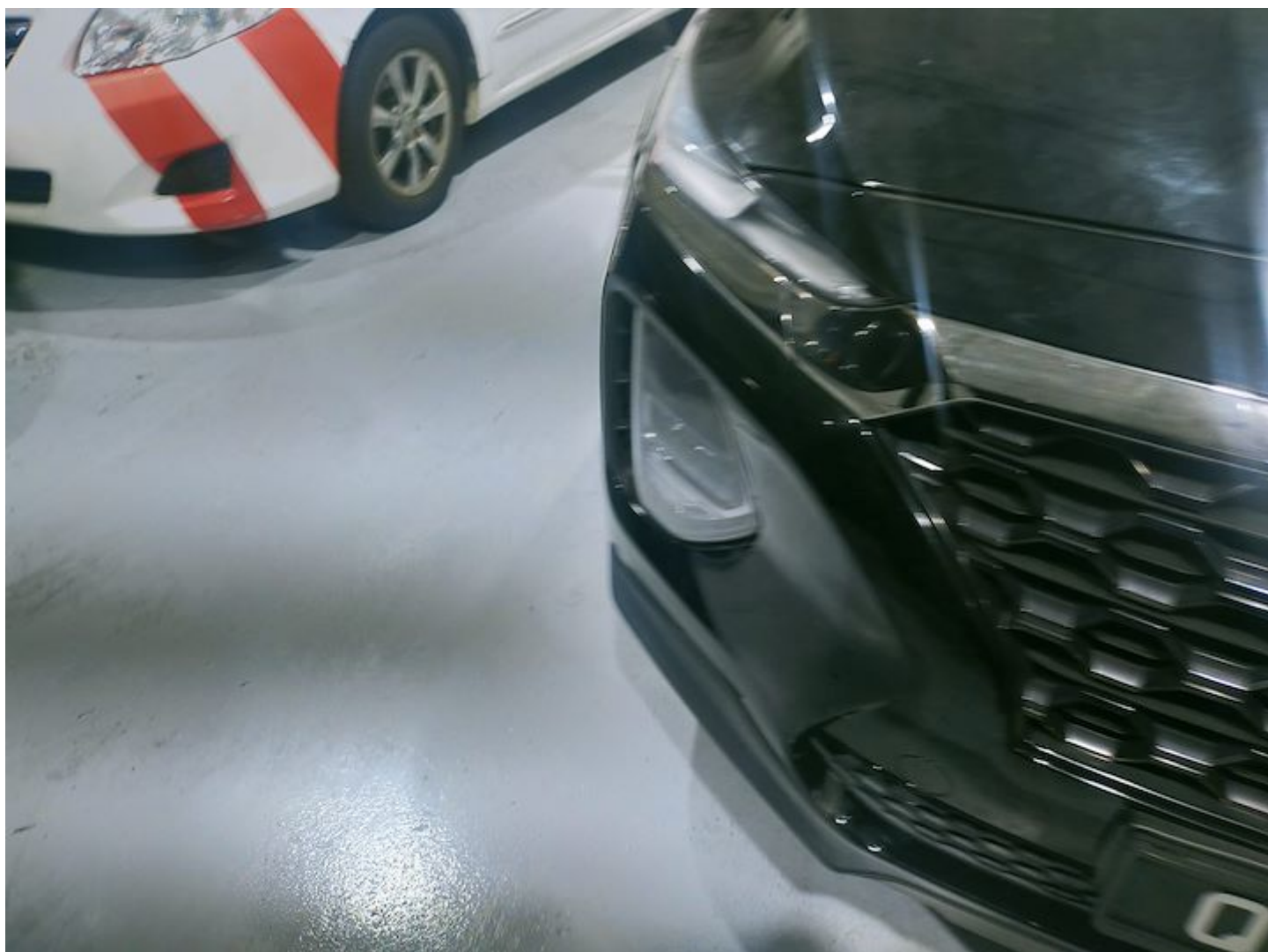





















**SINGAPORE
POLICE FORCE**


T/20240725/2080

1 of 3

Report No. T/20240725/2080

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

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/07/2024 18:12		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: KUM KWOK WAH			Address: 2C UPPER BOON KENG ROAD #14-668 KALLANG HEIGHTS SINGAPORE 383002		
ID Type / ID No.: NRIC NO / S0157288A			Contact No.: Home/Office: Mobile: 97373599		
Nationality:			Email:		
Sex: Male	Age: 69	Date of Birth: 21/10/1954	Type of Informant: Driver		
Race:			Language:		
Occupation: DRIVER			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Police Vehicle	Drink Drive: No	Date/Time of Accident: 25/07/2024 09:30	Type of Location:
Location: DEFU LANE 10				
Weather: Clear		Road Surface: Dry		
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of Passenger
GBK5834X	Motor van	TOYOTA	HIACE VAN TURBO 5DR MT	Silver	Slightly Damaged	0
QX1439J	POLICE VEHICLE	HYUNDAI	TM SANTA FE 2.4 GDI AT 4WD	Black	Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



T/20240725/2080

2 of 3

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

Report No. T/20240725/2080

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TAN CHEE SENG	ID No.	S1686794B
Related Vehicle	GBK5834X (Motor van)	Contact No.	98563360
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL
Driver			
Name	KUM KWOK WAH	ID No.	S0157288A
Related Vehicle	QX1439J (POLICE VEHICLE)	Contact No.	97373599
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

ON THE ABOVEMENTIONED DATE AND TIME, V1 (QX1439J) WAS DRIVING ALONG SAID ROAD AND COLLIDED WITH V2 (GBK5834X). BOTH WERE AT THE JUNCTION. V1 WAS FOLLOWING V2 CLOSELY FROM BEHIND. V1 EXPECTED V2 TO DRIVE OFF AFTER STOPPING AT THE JUNCTION BUT V2 DID NOT AND V1 ENDED UP COLLIDING INTO V2. V1 IS AN INDECO CONTRACTOR THEREFORE A BLUE-PLATE NUMBER (5151S) WAS HUNG AT THE REAR SIDE. BOTH EXCHANGED PARTICULARS. NOBODY WAS INJURED.

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**SINGAPORE
POLICE FORCE**

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



T/20240725/2080

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Report No. T/20240725/2080

CONTINUATION OF REPORT

Signature of Officer Recording The
TP /
SC2 MOHAMED ARIE HERZUAN
BIN HERMAN

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
25/07/2024 18:12

Officer In Charge Of Case:
TP / DDGVT /
SR STAFF SGT MUHAMMAD ISMAIL BIN
AMZAH
Contact No.: 65476232

Classification Of Case:

NP168