

## 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 .....	21/10/2024 13:32 (SGT)
Reported by .....	Actual Driver
Date of Accident .....	21/10/2024 10:00 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	PUNGGOL ROAD
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SHD9878J
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#### INSURED/POLICYHOLDER

Is company? .....	Yes
Name Of Registered Owner .....	TRANS-CAB SERVICES PTE. LTD
Company Reg No .....	200303878K
Email Address .....	CLAIMS@TRANSCAB.COM.SG
Mobile Phone No .....	(Phone) +65-65552222
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Toyota
Model .....	OTHERS
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 .....	Taxi
Transmission .....	Auto
CC .....	1798
Vehicle Fuel .....	Petrol
First Registration Date .....	-
Chassis no .....	-
Effective Date/Time of Ownership .....	-

#### INSURANCE COMPANY

Name of Insurance Company .....	Income Insurance Limited
Policy Number / Cover Note Number .....	5140725663-01

#### DRIVER

Name of Driver .....	LEONG SHIH YI
NRIC No .....	S1100131I
Date Of Birth .....	21/02/1955
Occupation .....	Outdoor
Driving Pass Date .....	19/12/1975
Driving License Pass Class .....	3
Driving License Validity .....	Valid
Driving experience .....	48 YEARS AND 10 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-91834078
Alt. Phone Number .....	-
Email Address .....	CLAIMS@TRANSCAB.COM.SG
Address .....	BLK 58 LENGKOK BAHRU
Address complement .....	#08-507
Postcode .....	150058
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? .....	No
Was any injured conveyed to hospital by ambulance? .....	-
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 .....	UNKNOWN
Gender .....	Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Bukit Merah East Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18002369999
Alt. Police Station Phone No .....	(Fax) +65-62204360
Police Station Address .....	391 New Bridge Road Police Cantonment Complex Block A Singapore 088762
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT NO :  
T/20241021/2018

Are accident photos available for attachment? ..... Yes  
 Was there any video captured by Car Camera? ..... Yes  
 Reasons for not uploading a video of the accident ..... VIDEO WILL BE SUBMITTED TO TRANSCAB

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number ..... SJQ4541X  
 Vehicle Manufacturer ..... -  
 Vehicle Model ..... -  
 Vehicle Variant ..... -  
 Vehicle Colour ..... -  
 Vehicle Category ..... Private car  
 Name of Driver ..... NG SHAO WEI  
 NRIC No ..... S9939350E  
 Contact Number ..... -  
 Address ..... -  
 Address complement ..... -  
 Postcode ..... -  
 Insurance Company Name ..... -  
 Nature Of Damage ..... -  
 Details of property damaged in accident ..... -  
 No. Of Passenger (Including Driver) ..... 1

**SKETCH PLAN**

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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 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  
21/10/2024  
13:30

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

YUNOS S099951

Sketch Plan

	<p><b>A - SHD9878J</b></p> <p><b>B - SJQ4541X</b></p>
<p><b>PUNGGOL ROAD</b></p>	

Describe Circumstance of the Accident

REFER TO POLICE REPORT NO :  
T/20241021/2018

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 21102024 13:30



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

MOHAMMAD YUNOS  
S099951

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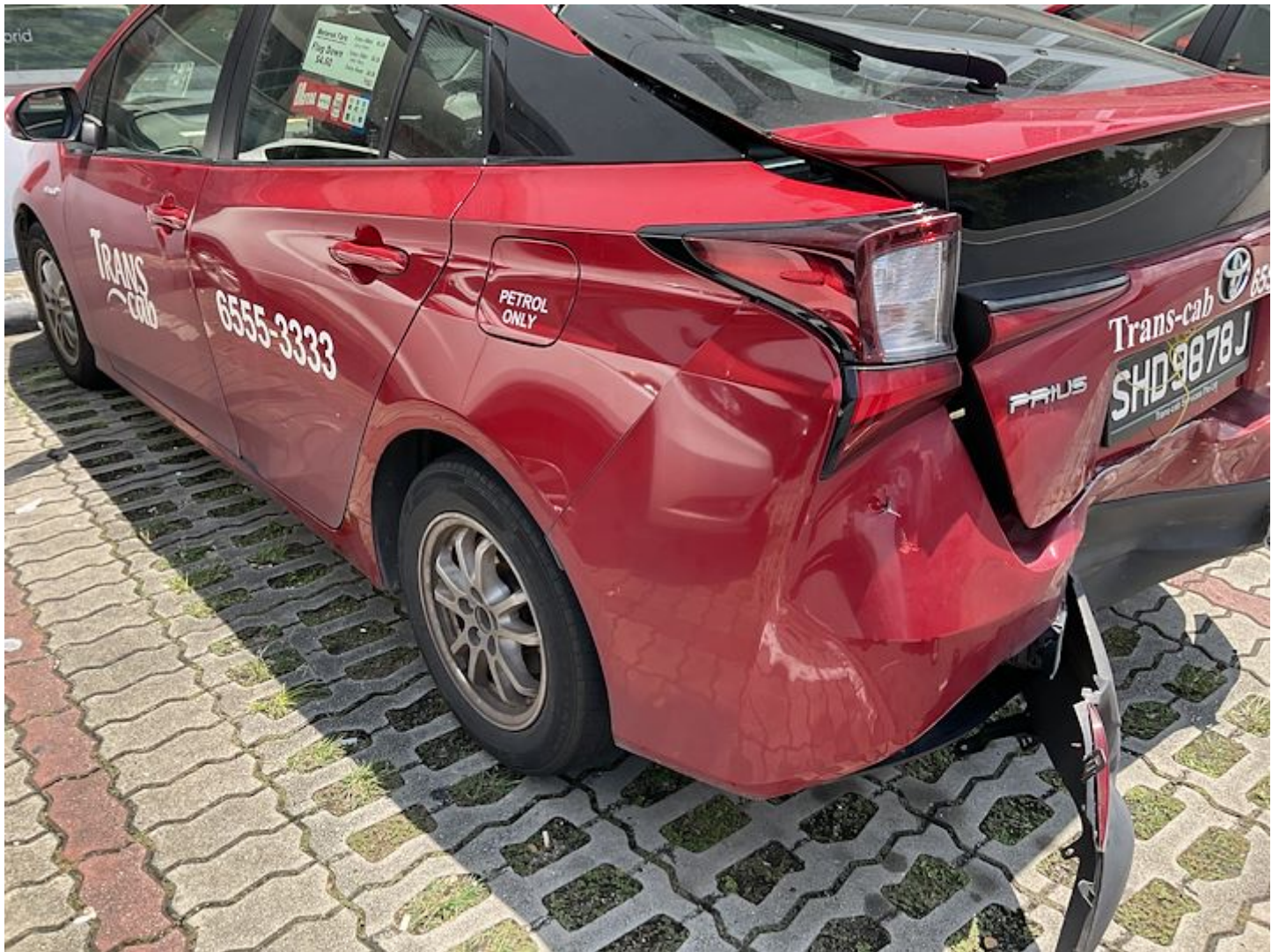






















**SINGAPORE  
POLICE FORCE**



T/20241021/2018

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Report No. T/20241021/2018

Police Station Of Origin:  
Bukit Merah West N.P.C  
500 Bukit Merah View #01-01 SINGAPORE  
159682  
Tel No: 1800-3779999

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 21/10/2024 11:58	Vide Report No.:	Station Diary No.: 28
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**Informant's Particulars**

Name of Informant: LEONG SHIH YI			Address: 58 LENGKOK BAHRU #08-507 SINGAPORE 150058	
ID Type / ID No.: NRIC NO / S11001311			Contact No.:	Mobile: 91834078
Nationality: SINGAPORE CITIZEN			Home/Office:	
			Email:	
Sex: Male	Age: 69	Date of Birth: 21/02/1955	Type of Informant: Driver	
Race: Chinese			Language:	
Occupation: Taxi driver			Driving Licence Information: Class: 3	Date of Expiry:

**General Information of the Accident**

General Information of the Accident				
Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 21/10/2024 10:00	Type of Location: Straight Road
Location:  PUNGGOL ROAD				
Weather: Sunny		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
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
SHD9878J	Motor car	TOYOTA	PRIUS 5DR HATCHBAC K (AUTO)	Red	Seriously Damaged	1
SJQ4541X	Motor car	HYUNDAI	HD AVANTE 1.6 A	Black	Seriously Damaged	1

**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Bukit Merah West N.P.C  
500 Bukit Merah View #01-01 SINGAPORE  
159682  
Tel No: 1800-3779999



T/20241021/2018

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Report No. T/20241021/2018

**CONTINUATION OF REPORT****Brief Details.**

On 21/10/2024 at about 1000hrs, I was travelling along Punggol Road towards Hougang Ave 10 right before Punggol Flyover, I was sending a passenger from Punggol to Hougang Ave 5.

There was a traffic light, and it turned red hence I stopped behind another vehicle when suddenly I felt a huge impact coming from the rear of my vehicle (SHD9878J). The driver of SJQ4541X collided into the rear of my vehicle.

We both got out of our vehicle, and I wanted to call for the police assistance, police on the phone told us to exchange our particulars and take pictures of the incident, the police on the phone told me to report to transcab as well.

My vehicle has in-car camera, but I am unsure of how to retrieve the footage. I then left the scene and headed straight to a police station. The passenger left at the incident location.

No one was injured, no government property was damaged.



**SINGAPORE  
POLICE FORCE**

T/20241021/2018

Police Station Of Origin:  
Bukit Merah West N.P.C  
500 Bukit Merah View #01-01 SINGAPORE  
159682  
Tel No: 1800-3779999

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Report No. T/20241021/2018

**CONTINUATION OF REPORT**

Signature of Officer Recording The  
D /  
SGT 2 HERRY CHIA WEE KANG

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / GIA /  
SR STAFF SGT MUHAMMAD NOOR BIN  
ABDUL RAHMAN  
Contact No.: 65476219

NP168

Signature Of Informant:

Date/Time:  
21/10/2024 11:58

Classification Of Case: