

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	03/06/2024 18:53 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	02/06/2024 10:43 (SGT)
Exact Location of Accident	Eunos Link, Singapore
Additional Location Information	TOWARDS HOUGANG AVE 3
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLM330L
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	SUSAN TAN (CHEN SHUZHEN)
NRIC No	SXXXX379D
Email Address	SUSANUBM@YAHOO.COM.SG
Mobile Phone No	(Phone) +65-90098123
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	City
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	1500

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5139922290

DRIVER

Name of Driver	SUSAN TAN (CHEN SHUZHEN)
NRIC No	SXXXX379D
Date Of Birth	09/09/1971
Occupation	Outdoor

Driving Pass Date	15/02/1992
Driving experience	32 YEARS AND 4 MONTHS
Gender	Female
Mobile Number	(Phone) +65-90098123
Alt. Phone Number	-
Email Address	SUSANUBM@YAHOO.COM.SG
Address	BLK 70 FLORA RD
Address complement	#06-21
Postcode	506914
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	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	SKU4978L
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	SUSAN TAN (CHEN SHUZHEN)
Gender	Female
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	3 DAYS MC
Injured person in which vehicle?	SLM330L
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN**IMPORTANT NOTICE**

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6. 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

A = SLM330L
B = SKY4978L
Eunos Link
towards Hougang
Avenue 3

Describe Circumstance of the Accident


Refer to Police Report

T/20240603/7018.

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 NRIC/ID card)



**SINGAPORE
POLICE FORCE**



T/20240603/7018

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

1 of 3

Report No. T/20240603/7018

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 03/06/2024 11:17		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: Susan Tan			Address: 70 FLORA ROAD #06-21 THE GALE SINGAPORE 506914		
ID Type / ID No.: NRIC NO / S7131379D			Contact No.: Home/Office: Mobile: 90098123		
Nationality: SINGAPORE CITIZEN			Email: susanubm@yahoo.com.sg		
Sex: Female	Age: 52	Date of Birth: 09/09/1971	Type of Informant: Driver		
Race: Chinese			Language: English		
Occupation: Private-hire car driver.			Driving Licence Information: Class: 3 Date of Expiry: 03/06/2024		

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 02/06/2024 10:43	Type of Location: Straight Road
Location: Eunos Link				
Weather: Clear		Road Surface: Dry		
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		Traffic Volume: Light
Type of Collision: vehicle stop at traffic light				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKU4978L	Motor car	NISSAN	Qashqai	Green	Slightly Damaged	0
SLM330L	Motor car	HONDA	City	Silver	Slightly Damaged	1

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
SLM330L	Income	5139922290	09/10/2023	12/10/2024



**SINGAPORE
POLICE FORCE**



T/20240603/7018

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

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Report No. T/20240603/7018

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Passenger			
Name	NOT SURE	ID No.	NIL
Related Vehicle	SLM330L (Motor car)	Contact No.	NIL
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
Driver			
Name	SUSAN TAN	ID No.	S7131379D
Related Vehicle	SLM330L (Motor car)	Contact No.	90098123
Hospital/Clinic	ALLIANCE CLINIC AND PARTNERS PTE LTD	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: 03/06/2024
Date Treatment	03/06/2024	Date Discharge	03/06/2024
No. of Days granted Medical Leave (MC)	04	Degree of Injury	Slight

Brief Details:

My car (SLM330L) had stopped along Eunos Link towards Hougang Ave 3 due to traffic light (red light) . Suddenly a car (SKU4978L) hit me from the behind causing me jerking forward as I am a Grab driver there is a passenger with me at the time accident. The passenger claimed that he was fine and not injured. After exchanging particulars with the driver, I proceed to send the passenger to his destination.



**SINGAPORE
POLICE FORCE**

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



T/20240603/7018

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Report No. T/20240603/7018

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / AEIT /
CHUA SOON KEONG
Contact No.: 65476030

This report is lodged at Eunus NPP Kiosk
NP168

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

Date/Time:
03/06/2024 11:17

Classification Of Case: