

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 26/10/2024 16:05 (SGT)
Reported by Actual Driver
Date of Accident 26/10/2024 10:30 (SGT)
Exact Location of Accident Punggol Wy, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SHC8077R

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner COMFORT TRANSPORTATION PTE LTD
Company Reg No 199303821R
Email Address fleetsafety@cdgtaxi.com.sg
Mobile Phone No (Phone) +65-97288055
Alternative Phone No (Office) +65-65508768

VEHICLE PARTICULARS

Manufacturer Hyundai
Model Ae ioniq
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 - Reporting only
Vehicle Category Taxi
Transmission Auto
CC 1580
Vehicle Fuel Petrol-Electric
First Registration Date -
Chassis no KMHC851CVLU193004
Effective Date/Time of Ownership -

INSURANCE COMPANY

Name of Insurance Company MS First Capital Insurance Ltd
Policy Number / Cover Note Number D-24101861MFCT

DRIVER

Name of Driver	TAN KIM HOCK
NRIC No	S1594815I
Date Of Birth	23/05/1963
Occupation	Outdoor
Driving Pass Date	09/11/1981
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	42 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97288055
Alt. Phone Number	-
Email Address	fleetsafety@cdgtaxi.com.sg
Address	BLK 238 BUKIT PANJANG RING ROAD # 08-95
Address complement	-
Postcode	670238
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?	Yes
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)	4
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	-

FOREIGN VEHICLE 1

Vehicle Registration Number	KFH241
Vehicle Category	Private car

PASSENGER 1

Name	CHANG
Gender	Male

PASSENGER 2

Name	UNKNOWN
Gender	Male

PASSENGER 3

Name	UNKNWON
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

ON THE DATE 26/10/2024 AT ABOUT 1030HRS WHILE I WAS DRIVING VEHICLE A BEARING REGISTRATION NUMBER SHC8077R ON THE WAY TO DROP OFF MY PASSENGER EN-ROUTE FROM 11C TOH TUCK ROAD TOWARDS SAFRA PUNGGOL WHILE TRAVELLING ALONG PUNGGOL WAY X PUNGGOL CENTRAL ON LANE 2 SUDDENLY VEHICLE B BEARING REGISTRATION NUMBER KFH241 APPLIED BRAKES AND STOPPED STATIONARY UPON NOTICING THIS I ALSO APPLIED THE BRAKES ON VEHICLE A BUT UNFORTUNATELY VEHICLE A DID NOT MANAGE TO TO ON TIME AND REAR ENDED VEHICLE A CAUSING DAMAGES TO VEHICLE A. ONE OF MY PASSENGER WAS INJURED.

ATTACHMENT(S)

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 FILE IS NOT SUITABLE

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number KFH241
 Vehicle Manufacturer Honda
 Vehicle Model Accord
 Vehicle Variant -
 Vehicle Colour -
 Vehicle Category Private car
 Name of Driver TAN CHIN SHUN
 Passport No/FIN 980106-01-7457
 Contact Number (Phone) +65-90115598
 Address KAMPUNG SUNGAI SULO MUKIM 9
 Address complement BATU PAHAT JOHOR
 Postcode 83040
 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 CHANG
 Gender Male
 Phone No (Phone) +65-90048901
 Address -
 Address Complement -
 Post Code -
 Approximate Age Years Old -
 Injuries Sustained INJURIES
 Injured person in which vehicle? SHC8077R
 Were seat belts worn? Yes
 Was this injured conveyed to hospital by ambulance? No

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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

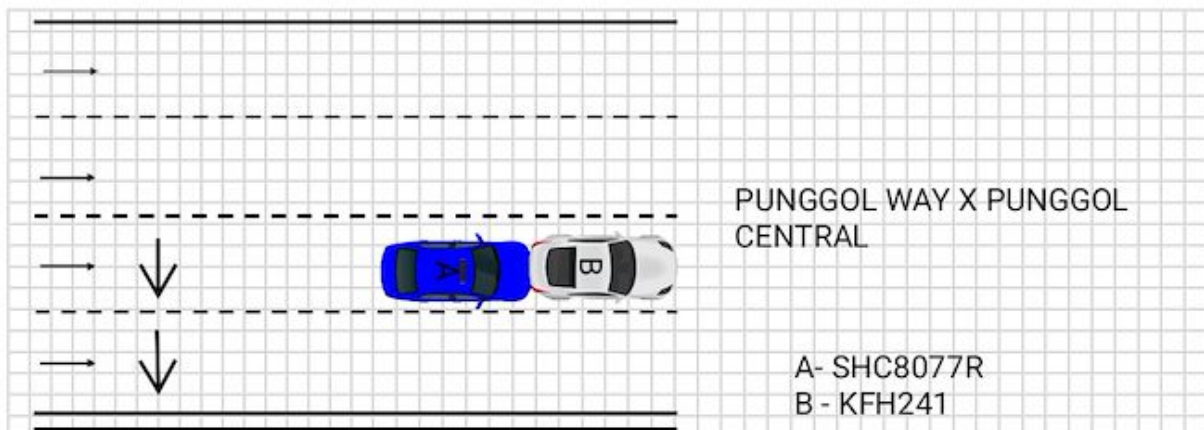
Sketch Plan

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

26/10/2024
1230HRS

Witnessed by Reporting Centre Personnel

Tamen



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Describe Circumstances of the Accident


ON THE DATE 26/10/2024 AT ABOUT 1030HRS WHILE I WAS DRIVING VEHICLE A BEARING REGISTRATION NUMBER SHC8077R ON THE WAY TO DROP OFF MY PASSENGER EN-ROUTE FROM 11C TOH TUCK ROAD TOWARDS SAFRA PUNGGOL WHILE TRAVELLING ALONG PUNGGOL WAY X PUNGGOL CENTRAL ON LANE 2 SUDDENLY VEHICLE B BEARING REGISTRATION NUMBER KFH241APPLIED BRAKES AND STOPPED STATIONARY UPON NOTICING THIS I ALSO APPLIED THE BRAKES ON VEHICLE A BUT UNFORTUNATELY VEHICLE A DID NOT MANAGE TO TO ON TIME AND REAR ENDED VEHICLE A CAUSING DAMAGES TO VEHICLE A. ONE OF MY PASSENGER WAS INJURED.

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


26/10/2024
1230HRS



Witnessed by Reporting Centre
Personnel



































