

## 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 .....	16/09/2024 17:59 (SGT)
Reported by .....	Both Policyholder and Actual Driver
Date of Accident .....	16/09/2024 08:45 (SGT)
Exact Location of Accident .....	Bukit Timah Expy, Singapore
Additional Location Information .....	TOWARDS CITY
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SNA1410Y
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#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	TAN GEOK KHENG
NRIC No .....	S1621626G
Email Address .....	FRANCISTANGK@GMAIL.COM
Mobile Phone No .....	(Phone) +65-96855028
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Hyundai
Model .....	OS KONA HEV 1.6 DCT
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 .....	1580
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 .....	5122301987-03

#### DRIVER

Name of Driver .....	TAN GEOK KHENG
NRIC No .....	S1621626G
Date Of Birth .....	17/03/1963
Occupation .....	Outdoor
Driving Pass Date .....	07/02/1984
Driving License Pass Class .....	3
Driving License Validity .....	Valid
Driving experience .....	40 YEARS AND 7 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-96855028
Alt. Phone Number .....	-
Email Address .....	FRANCISTANGK@GMAIL.COM
Address .....	203B COMPASSVALE ROAD
Address complement .....	04-39
Postcode .....	542203
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? .....	Yes
Number of vehicles involved in the accident .....	2
Was anybody injured in the Accident? .....	Yes
Was any injured conveyed to hospital by ambulance? .....	Yes
Was any other vehicle or property damaged? .....	Yes
Number of Passengers (Including Driver) .....	3
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 .....	JWU5614
Vehicle Category .....	Motorcycle

#### PASSENGER 1

Name .....	PASSENGER
Gender .....	Male

#### PASSENGER 2

Name .....	PASSENGER
Gender .....	Male

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Nanyang Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18007929999
Alt. Police Station Phone No .....	(Fax) +65-67912972
Police Station Address .....	No. 2 Jurong West Avenue 5 Singapore 649482
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

## CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH AND POLICE REPORT

## 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 ..... JWU5614  
Vehicle Manufacturer ..... -  
Vehicle Model ..... -  
Vehicle Variant ..... -  
Vehicle Colour ..... -  
Vehicle Category ..... Motorcycle  
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 ..... MUHAMMAD ARIF  
Gender ..... -  
Phone No ..... -  
Address ..... -  
Address Complement ..... -  
Post Code ..... -  
Approximate Age Years Old ..... -  
Injuries Sustained ..... -  
Injured person in which vehicle? ..... JWU5614  
Were seat belts worn? ..... -  
Was this injured conveyed to hospital by ambulance? ..... Yes

**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

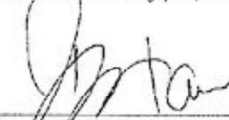
(v) complying with applicable law in administering, processing, handling and/or dealing with my claims.


(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

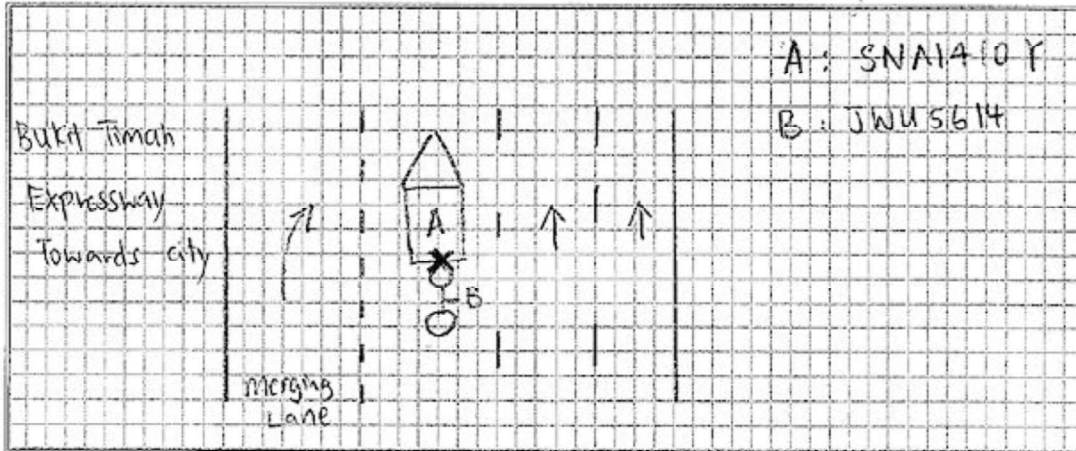
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

  
Policyholder's Signature / Date & Time

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

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

Sketch Plan



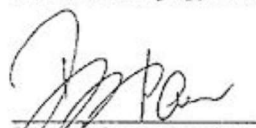
**Describe Circumstance of the Accident**


On the above mentioned date & time, I (Vehicle A) was travelling along Bukit Timah Expressway going towards City, and Vehicle B (JWU5614) suddenly collided into the my car rear portion. There was no traffic Jam, only heavy traffic at that point of time and I was travelling around 40-50 km/h.

Please refer to police Report : T/ 20240916 / 2020

**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)









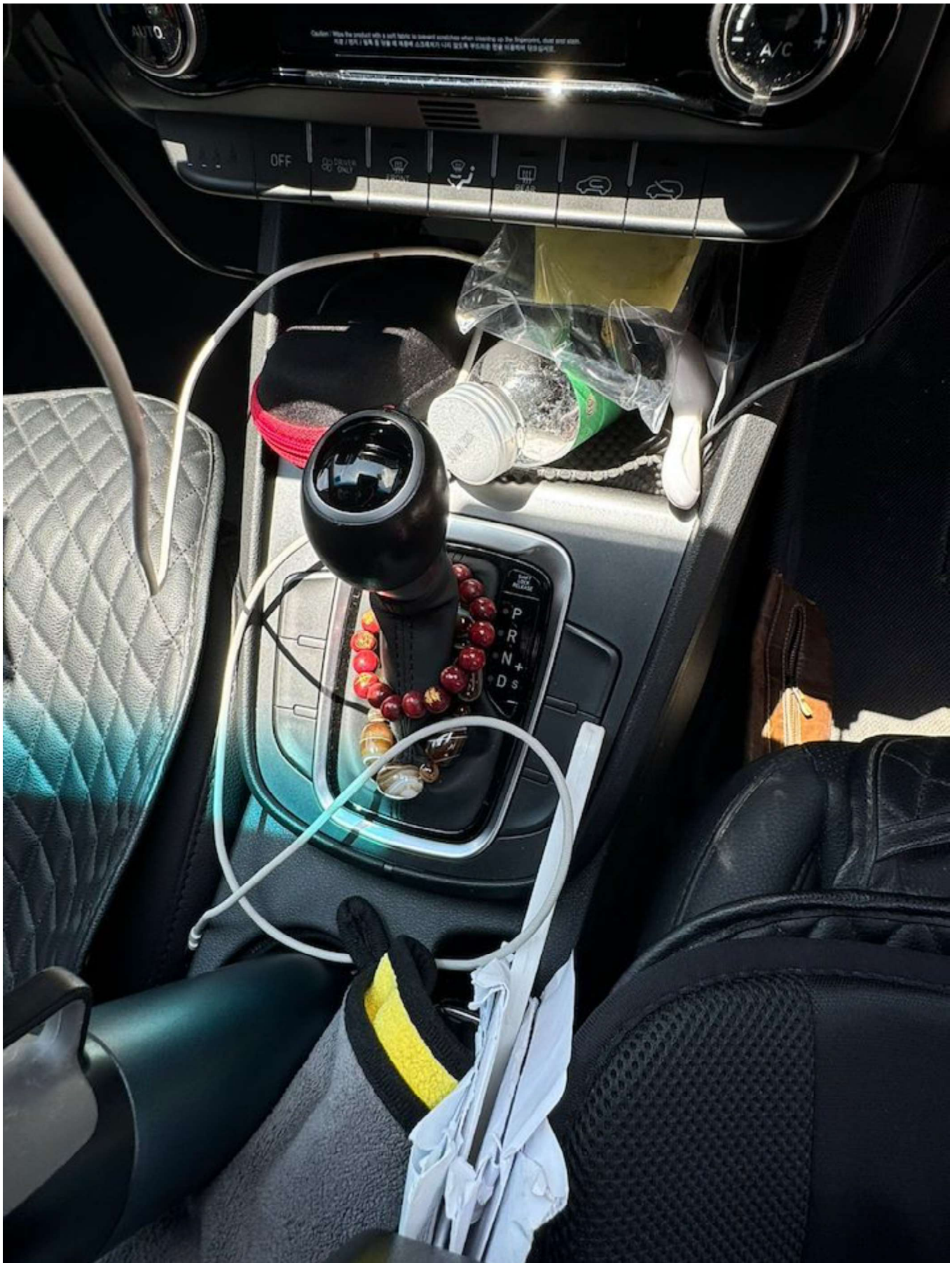




























# SINGAPORE POLICE FORCE

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999



T/20240916/2020

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Report No. T/20240916/2020

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:  
16/09/2024 11:29

Vide Report No.:  
L/20240916/0030

Station Diary No.:  
50

### Informant's Particulars

Name of Informant: TAN GEOK KHENG		Address: 203B COMPASSVALE ROAD #04-39 SINGAPORE 542203	
ID Type / ID No.: NRIC NO / S1621626G		Contact No.: Home/Office: Mobile: 96855028	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 61	Date of Birth: 17/03/1963	Type of Informant: Driver
Race: Chinese		Language:	
Occupation: PRIVATE HIRE DRIVER		Driving Licence Information: Class: 3 Date of Expiry:	

### General Information of the Accident

Type of Accident: Non-Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 16/09/2024 08:45	Type of Location: Straight Road
Location: BUKIT TIMAH EXPRESSWAY			
Weather: Clear	Road Surface: Dry		
Traffic Flow: Two Way	Traffic Control: Not Controlled		
Type of Collision: Between Moving Vehicles - Head To Rear	Traffic Volume: Heavy		
			Anyone conveyed by ambulance: No

### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
JWU5614	Motorcycle	YAMAHA		Green	Seriously Damaged	0
SNA1410Y	Motor car	HYUNDAI	KONA	Grey	Seriously Damaged	2

### Details of Person Involved

Any Pedestrian Involved: No

No. of Pedestrians Injured: NIL

Use of Pedestrian Crossing: NA



**SINGAPORE  
POLICE FORCE**



T/20240916/2020

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
849482  
Tel No: 1800-7928999

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Report No. T/20240916/2020

**CONTINUATION OF REPORT**

<b>Rider</b>			
Name	MUHAMMAD ARIF BIN ZAINUDDIN	ID No.	A62377784
Related Vehicle	JWU5614 (Motorcycle)	Contact No.	NIL
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
<b>Driver</b>			
Name	TAN GEOK KHENG	ID No.	S1621626G
Related Vehicle	SNA1410Y (Motor car)	Contact No.	96855028
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

**Brief Details.**

On the 16/9/2024 at about 0845hrs, I was driving my car, SNA1410Y along BKE towards City on the 3rd lane, at about 300m before the Turf Club Ave exit, I felt an impact from the rear of my vehicle. I then stopped my vehicle and made a check. I then found out a motorcyclist, riding a motorcycle: JWU5614 had hit onto my car's right rear, and sat on the road. A few motorcyclist also then assisted to divert traffic and I then called for police. Ambulance was also present to make a check on the motorcyclist, and he was not conveyed. Traffic Police officers also came, spoke to me and then took over my In-car camera SD Card. I wish to inform that the traffic was heavy and slow, and I did not apply brakes abruptly before the collision at all, and I was within my lane throughout.





**SINGAPORE  
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649482  
Tel No: 1800-7929999



T/20240916/2020

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Report No. T/20240916/2020

## CONTINUATION OF REPORT

Signature of Officer Recording The J/ SR STAFF SGT NAS MUHAMMAD MUSTAQIM BIN NASIARI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 16/09/2024 11:29
Officer In Charge Of Case: TP / AEIT / INSP (2) LOW MENG FATT Contact No.: 97577566	Classification Of Case:

NP168

