

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	11/11/2024 11:07 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	08/11/2024 19:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	CTE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMX3448S

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TAN HOCK HOO
NRIC No	S 345F
Email Address	
Mobile Phone No	(Phone) +65-
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Vezel
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	0
Vehicle Fuel	Petrol
First Registration Date	09/10/2015
Chassis no	RU11102019
Effective Date/Time of Ownership	09/10/2015 00:00 (SGT)

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5120635159-03

DRIVER

Name of Driver	TAN HOCK HOO
NRIC No	S 345F
Date Of Birth	[REDACTED]
Occupation	Outdoor
Driving Pass Date	10/03/1989
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	35 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-[REDACTED]
Alt. Phone Number	-
Email Address	[REDACTED]
Address	[REDACTED]
Address complement	-
Postcode	[REDACTED]
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	UNKNOWN
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Yishun North Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18008529999
Alt. Police Station Phone No	(Fax) +65-68522299
Police Station Address	31 Yishun Central Singapore 768827
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED

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	VIDEO WITH OWNER

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKQ745P
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	NA / Unknown
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	TAN HOCK HOO
Gender	Male
Phone No	(Phone) +65- [REDACTED]
Address	[REDACTED]
Address Complement	-
Post Code	[REDACTED]
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SMX3448S
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

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4. The true 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 Traffic Police Department for investigation.
6. This report will be forwarded by the insurers to 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.

3. 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 envelope/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.

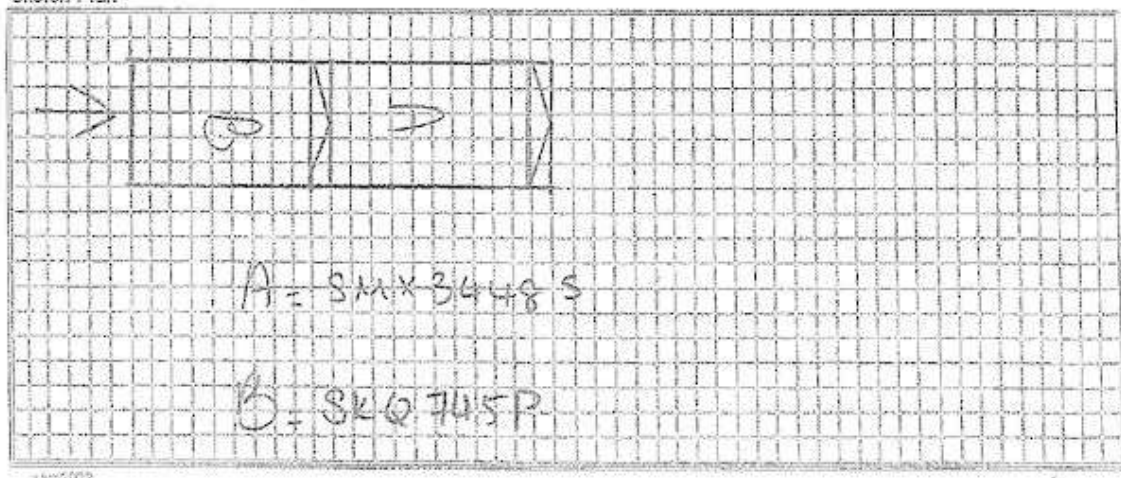
 11/11/24
Policyholder's Signature / Date & Time

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

LENG

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

Sketch Plan



On 8/11/24 about 7pm, I was sending a passenger to 711 Yishuan Ave 111 Monar Road. I was driving on the second lane along CTE near Ruddle Road when a car (SKR 745P) hit me from the rear as I had emergency brake due to the car in front of me. The boot of my vehicle is damaged.

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

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

**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999



T/20241109/2077

1 of 3

Report No: T/20241109/2077

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:
09/11/2024 17:39

Vide Report No.:

Station Diary No.:
71

Informant's Particulars

Name of Informant:
TAN HOCK HOO

Address:

ID Type / ID No.:

Contact No.:

Mobile:

NRIC NO / S

Home/Office:

Email:

Nationality:

SINGAPORE CITIZEN

Sex:

Age:

Date of Birth:

Type of Informant:

Male

60

Driver

Race:

Chinese

Language:

Occupation:

GRAB DRIVER

Driving Licence Information:

Class: 3,4,5

Date of Expiry:

General Information of the Accident

Type of
Accident:

Injury
Others

Drink
Drive:
No

Date/Time of
Accident:
08/11/2024 19:00

Type of Location:
Straight Road

Location:

CENTRAL EXPRESSWAY

Weather:

Clear

Road Surface:

Dry

Traffic Flow:

One Way

Traffic Control:

Not Controlled

Traffic Volume:

Heavy

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
SKQ745P	Motor car	MAZDA	Mazda6	Grey	Slightly Damaged	1
SMX3448S	Motor car	HONDA	Vezel	Silver	Slightly Damaged	1

Details of Person Involved

Any Pedestrian Involved: No

No. of Pedestrians Injured: NIL

Use of Pedestrian Crossing: NA



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31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999



T/20241109/2077

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Report No. T/20241109/2077

CONTINUATION OF REPORT

Driver		ID No.	
Name	Alicia Lim Hui Xuan	S [REDACTED]	
Related Vehicle		Contact No.	
SKQ745P (Motor car)		[REDACTED]	
Hospital/Clinic		Class of Driving Licence & Expiry	
NIL		Class: NIL Date of Expiry: NIL	
Date Treatment		Date Discharge	
NIL		NIL	
No. of Days granted Medical Leave		Degree of	
NIL		NIL	
Driver			
Name		ID No.	
TAN HOCK HOO		S [REDACTED]	
Related Vehicle		Contact No.	
SMX3448S (Motor car)		[REDACTED]	
Hospital/Clinic		Class of Driving Licence & Expiry	
ONEDOCTORS FAMILY CLINIC		Class: 3,4,5 Date of Expiry: NIL	
Date Treatment		Date Discharge	
09/11/2024		09/11/2024	
No. of Days granted Medical Leave		Degree of	
03		Slight	

Brief Details.

On 08/11/2024 at about 1900hrs, I was sending a passenger to 711 Yishun from 111 Mcnair Road. I was driving on the second lane along CTE near Braddell Road when a car (SKQ745P) hit me from the rear as I had to emergency brake due to the car in front of me. The boot of my vehicle is damaged.

The passenger is fine and did not seek any medical assistance. I felt discomfort at my neck and back area, I went to the doctor's on 09/11/2024 and was given 3 days MC (MC No. 17311387823118632).

I have a in car camera which recorded the incident.



**SINGAPORE
POLICE FORCE**



T/20241109/2077

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Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

Report No. T/20241109/2077

CONTINUATION OF REPORT

Signature of Officer Recording The
L/
SGT 2 FELISSA LAI SHIQI

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / AEIT /
SUPT (1) PHNG KAR SOON
Contact No.: 65476439

Signature Of Informant:

Date/Time:
09/11/2024 17:39

Classification Of Case:

NP168