

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 11:39 (SGT)
Reported by	Actual Driver
Date of Accident	09/11/2024 12:30 (SGT)
Exact Location of Accident	Nallur Rd, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNM7075D
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	SUM KUAN YEE
NRIC No	SXXXX376G
Email Address	MONICASUM@HOTMAIL.COM
Mobile Phone No	(Phone) +65-96339809
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Subaru
Model	Forester
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	2000
Vehicle Fuel	-
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	EQ Insurance Company Ltd
Policy Number / Cover Note Number	DMPPHQ24-00033

DRIVER

Name of Driver	BENJAMIN ANG THIAN CHEE
NRIC No	SXXXX048H
Date Of Birth	02/07/1985
Occupation	Indoor
Driving Pass Date	12/07/2011
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	13 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-92210567
Alt. Phone Number	-
Email Address	ben.ang33@gmail.com
Address	BLK 3 TANAH MERAH KECHIL ROAD 05-05 SINGAPORE 466664
Address complement	-
Postcode	-
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	Hit and run / Vandalism / Damaged whilst parked
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)	1
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	-

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

STATEMENT RECORDED BY LILY - PROGRESSIVE CAR CARE PTE LTD TEL 67415336

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	SHA7260U
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
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)	-

SKETCH PLAN

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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

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 hand-drawn sketch plan of an accident scene. It shows two vehicles, labeled A and B, positioned on a grid. Vehicle A is a car, and vehicle B is a van. To the right of the vehicles, the license plate numbers are written: A - SNM 7075 D and B - SHA 7260 U.

Describe Circumstance of the Accident

Refer to Traffic Police report.

Declaration

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

If you wish to claim against your own policy, please be advised that your insurer may have a fourteen (14) days clause whereby the claim must be made within the stipulated timeframe from the day of occurrence. Kindly check with your insurer for more details.

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/20241109/7049

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

1 of 3

Report No. T/20241109/7049

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 09/11/2024 13:35		Vide Report No.: G/20241109/0118		Station Diary No.:	
Informant's Particulars					
Name of Informant: Benjamin Ang Thian Chee			Address: 3 Tanah Merah Kechil #05-05 The Tanamera SINGAPORE 466664		
ID Type / ID No.: NRIC NO / S8586048H			Contact No.: Home/Office: Mobile: 92210567		
Nationality: SINGAPORE CITIZEN			Email: ben.ang33@gmail.com		
Sex: Male	Age: 39	Date of Birth: 02/07/1985	Type of Informant: Vehicle Owner		
Race: Chinese			Language: English		
Occupation: Sales manager			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Attended by Police	Drink Drive:	No	Date/Time of Accident:	09/11/2024 12:30	Type of Location:	Straight Road
Location: NALLUR ROAD							
Weather: Clear		Road Surface: Dry					
Traffic Flow: Two Way		Traffic Control: Not Controlled			Traffic Volume: Moderate		
Type of Collision: Moving Vehicle Against - Parked Vehicle						Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHA7260U	Taxi	HYUNDAI	Ioniq	Blue	Slightly Damaged	0
SNM7075D	Motor car	SUBARU	Forester	Grey	Slightly Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20241109/7049

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

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Report No. T/20241109/7049

CONTINUATION OF REPORT

Vehicle Owner			
Name	BENJAMIN ANG THIAN CHEE	ID No.	S8586048H
Related Vehicle	NIL	Contact No.	92210567
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

Brief Details.

1. Photos taken more than 2MB
2. Along Nallur Road (nearer to Upp East Coast Road)
3. My vehicle is stationary waiting for my turn outside the tyre workshop
4. No, the accident did not involved any pedestrians.

My carpark was stationary when the taxi vehicle no SHA7260U reversed into my car along Nallur Road (near to Upp East Coast Road). The driver did not share particulars and told me to report police to settle, and I proceeded to call 999, and police was dispatched. Police arrived and advised to put up a report on this incident (G/20241109/0118). I have taken photos of both the vehicles after the accident, if you wish to have it please do contact me. Thanks.

Ben Ang
92210567



**SINGAPORE
POLICE FORCE**

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



T/20241109/7049

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Report No. T/20241109/7049

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPB /
MUHAMMAD NORSIDDIQ BIN IBRAHIM
Contact No.: 65476138

NP168

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

Date/Time:
09/11/2024 13:35

Classification Of Case: