

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	29/06/2024 10:00 (SGT)
Reported by	Actual Driver
Date of Accident	27/06/2024 16:30 (SGT)
Exact Location of Accident	Paya Lebar, Singapore
Additional Location Information	PIE (TUAS)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHA1029L
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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) +65-91696607
Alternative Phone No	(Office) +65-65508768

VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	I40
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	1685

INSURANCE COMPANY

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

DRIVER

Name of Driver	MUHAMMAD HANIFF BIN ABDULLAH
NRIC No	S1540679H
Date Of Birth	17/12/1962
Occupation	Outdoor

Driving Pass Date	30/12/1982
Driving experience	41 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91696607
Alt. Phone Number	-
Email Address	fleetsafety@cdgtaxi.com.sg
Address	APT BLK 747 WOODLANDS CIRCLE #12-704
Address complement	-
Postcode	730747
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?	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)	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	-

PASSENGER 1

Name	UNKNOWN
Gender	Male

PASSENGER 2

Name	UNKNOWN
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 28/06/2024 AT ABOUT 1630HRS I WAS DRIVING VEHICLE (A) BEARING REGISTRATION NUMBER SHA1029L ENROUTE FROM AFTER PICKING UP MY PASSENGERS AT GEYLANG AREA TO DROP OFF MY PASSENGERS AT ORCHARD AREA FOR WORK PURPOSES. WHILE STATIONARY BEHIND VEHICLE (B) BEARING REGISTRATION NUMBER SFX3111X AT LANE 2 OF PAYA LEBAR SLIP ROAD INTO PIE (TUAS) I NOTICED THAT TRAFFIC ALONG THE THE PIE (TUAS) SLIP ROAD WAS CLEAR AND VEHICLE (B) WAS MOVING OFF SO I PROCEEDED TO MOVE OFF TOO BUT ALL OF A SUDDEN VEHICLE (B) JAM BRAKE DUE TO AN ONCOMING TRUCK IN LANE 1 OF PIE (TUAS) SLIP ROAD AND I DID NOT REALISE VEHICLE (B) JAM BRAKE AS I WAS CHECKING FOR THE TRAFFIC AND DID NOT EXPECT VEHICLE (B) TO JAM BRAKE AS WELL AS LANE 2 OF THE SLIP ROAD WAS EMPTY AND VEHICLE (B) CAN CONTINUE TO TURN OUT. HENCE WHEN I ONCE I SAW THAT VEHICLE (B) JAM BRAKE I ALSO REACTED JAM BRAKED AND DID NOT MANAGED TO STOP IN TIME AND THE FRONT OF MY VEHICLE HIT ONTO THE REAR RIGHT OF VEHICLE (B). MYSELF AND MY PASSENGERS ARE NO INJURED. THE DRIVER OF VEHICLE (B) SAID THAT HE BROUGHT THE PASSENGER (KIDS) TO SEE A DOCTOR.

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 SFX3111X
 Vehicle Manufacturer Mitsubishi
 Vehicle Model OUTLANDER 2.4 CVT AWD S/R FACELIFT
 Vehicle Variant -
 Vehicle Colour -
 Vehicle Category Private car
 Name of Driver THING KWOK LEONG (TANG GUOLIANG)
 NRIC No S8201362H
 Contact Number (Phone) +65-8201362
 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 PASSENGER
 Gender -
 Phone No -
 Address -
 Address Complement -
 Post Code -
 Approximate Age Years Old -
 Injuries Sustained INJURIES
 Injured person in which vehicle? SFX3111X
 Were seat belts worn? Yes
 Was this injured conveyed to hospital by ambulance? No

SKETCH PLAN**IMPORTANT NOTICE**

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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the center 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.

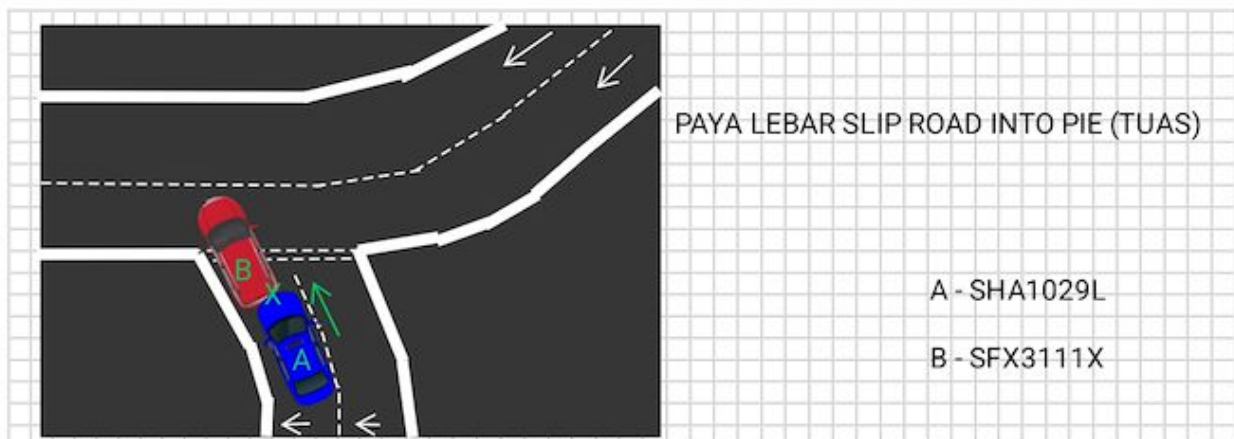
Policyholder's Signature / Date & Time

Sketch Plan

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

29/06/2024 0040HRS

Witnessed by Reporting Centre Personnel



Describe Circumstances of the Accident

ON 28/06/2024 AT ABOUT 1630HRS I WAS DRIVING VEHICLE (A) BEARING REGISTRATION NUMBER SHA1029L ENROUTE FROM AFTER PICKING UP MY PASSENGERS AT GEYLANG AREA TO DROP OFF MY PASSENGERS AT ORCHARD AREA FOR WORK PURPOSES. WHILE STATIONARY BEHIND VEHICLE (B) BEARING REGISTRATION NUMBER SFX3111X AT LANE 2 OF PAYA LEBAR SLIP ROAD INTO PIE (TUAS) I NOTICED THAT TRAFFIC ALONG THE THE PIE (TUAS) SLIP ROAD WAS CLEAR AND VEHICLE (B) WAS MOVING OFF SO I PROCEEDED TO MOVE OFF TOO BUT ALL OF A SUDDEN VEHICLE (B) JAM BRAKE DUE TO AN ONCOMING TRUCK IN LANE 1 OF PIE (TUAS) SLIP ROAD AND I DID NOT REALISE VEHICLE (B) JAM BRAKE AS I WAS CHECKING FOR THE TRAFFIC AND DID NOT EXPECT VEHICLE (B) TO JAM BRAKE AS WELL AS LANE 2 OF THE SLIP ROAD WAS EMPTY AND VEHICLE (B) CAN CONTINUE TO TURN OUT. HENCE WHEN I ONCE I SAW THAT VEHICLE (B) JAM BRAKE I ALSO REACTED JAM BRAKED AND DID NOT MANAGED TO STOP IN TIME AND THE FRONT OF MY VEHICLE HIT ONTO THE REAR RIGHT OF VEHICLE (B). MYSELF AND MY PASSENGERS ARE NO INJURED. THE DRIVER OF VEHICLE (B) SAID THAT HE BROUGHT THE PASSENGER (KIDS) TO SEE A DOCTOR.

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

29/06/2024 0040HRS

Witnessed by Reporting Centre Personnel











