

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	19/12/2024 16:15 (SGT)
Reported by	Owner
Date of Accident	18/12/2024 14:00 (SGT)
Exact Location of Accident	Lor 4 Toa Payoh & Lor. 5 Toa Payoh, Singapore
Additional Location Information	Junction
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLF6561J
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	GOLDBELL CAR RENTAL PTE LTD
Company Reg No	200710651D
Email Address	accident@gbcr.com.sg
Mobile Phone No	(Phone) +65-66039398
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Corolla
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	1598
Vehicle Fuel	-
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	Tokio Marine Insurance Singapore Ltd
Policy Number / Cover Note Number	24-MAB00157-R00

DRIVER

Name of Driver	CHONG CHOCK HOONG
NRIC No	S1233743D
Date Of Birth	08/11/1957
Occupation	Outdoor
Driving Pass Date	06/09/1980
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	44 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81219831
Alt. Phone Number	-
Email Address	douglas.chong@yahoo.com.sg
Address	8 JOO CHIAT LANE #04-01
Address complement	-
Postcode	428094
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Authorised driver
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	4
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	Toa Payoh Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002519999
Alt. Police Station Phone No	(Fax) +65-63548749
Police Station Address	93 Toa Payoh Central Toa Payoh Community Building #01-02 Singapore 319194
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

Please refer to the police report.

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	The SD card is with the traffic police.

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SH8283E
Vehicle Manufacturer	Hyundai
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	MR TAY
Contact Number	(Phone) +65-96234054
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SHD5411Z
Vehicle Manufacturer	Toyota
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	SAM
Contact Number	(Phone) +65-98182215
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SKT9786X
Vehicle Manufacturer	Toyota
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private hire
Name of Driver	-
Contact Number	(Phone) +65-93730363
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

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5. Any false reporting may be referred to the Traffic Police Department for investigation.
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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.

(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 ~~discretionary~~ law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Witnessed by Reporting Centre Personnel
(Name as in NRIC card) **SOH JIT HOON**
Rec'd 19 DEC 2024

Sketch Plan

Sketch Plan

Loc 2
ma-pyph

Loc 3
ma-pyph

Loc 4
ma-pyph

Loc 5
ma-pyph

Water 1991

A = SE 15613
B = SH 18283E
C = SH 18411Z
D = EK 19086X

Describe Circumstance of the Accident

Pls refer to police report.

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 Officer Personnel
(Name as in NRIC/ID card) **SOH JIT HOON**
Rec'd 19 DEC 2024 2



**SINGAPORE
POLICE FORCE**



T/20241218/2066

Police Station Of Origin:
Toa Payoh N.P.C
93 Toa Payoh Central #01-02 Toa Payoh
Community Building SINGAPORE 319194
Tel No: 1800-2519999

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Report No. T/20241218/2066

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/12/2024 18:17	Vide Report No.: E/20241218/0080	Station Diary No.: 107
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Informant's Particulars				
Name of Informant: CHONG CHOCK HOONG		Address: 8 JOO CHIAT LANE #04-01 SINGAPORE 428094		
ID Type / ID No.: NRIC NO / S1233743D		Contact No.: Home/Office: Mobile: 81219831		
Nationality: SINGAPORE CITIZEN		Email:		
Sex: Male	Age: 67	Date of Birth: 08/11/1957	Type of Informant: Driver	
Race: Chinese		Language:		
Occupation: CONSTRUCTION SUPERVISOR		Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 18/12/2024 14:00	Type of Location: T-Junction
Location: LOR 4 TOA PAYOH				
Lamp Post Number: 5				
Weather: Clear		Road Surface: Dry		
Traffic Flow:		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of Passenger
SH8283E	Taxi					0
SLF6561J	Motor car				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/20241218/2066

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Report No: T/20241218-2066

Police Station Of Origin:

Toa Payoh N.P.C

93 Toa Payoh Central #01-02 Toa Payoh

Community Building SINGAPORE 319194

Tel No: 1800-2519999

CONTINUATION OF REPORT

Driver			
Name	CHONG CHOCK HOONG	ID No.	S1233743D
Related Vehicle	SLF6561J (Motor car)	Contact No.	81219831
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 18/12/2024 at about 1400hrs, I was driving my vehicle bearing registration number: SLF6561J along Lorong 4 Toa Payoh and I was waiting at the T-Junction of Lorong 4 and Lorong 5 Toa Payoh. While stationary, I felt a bump from the rear of my vehicle. I had no passenger onboard my vehicle at the point of time. I alighted to make a check and discovered that another vehicle bearing registration number: SH8283E had collided to the rear of my vehicle. I also discovered that this accident involved another 4 other vehicles. The driver of the other vehicle alighted to make a check. Ambulance and traffic police attended to this accident and the driver that collided into my vehicle was conveyed by ambulance.

I wish to state that only the vehicle: SH8283E had collided to my vehicle, and he claimed that another vehicle had collided into him earlier on. No government property damaged. Traffic police at scene took my dashcam memory card and issued me an acknowledgement slip vide E/20241218/0080.



**SINGAPORE
POLICE FORCE**



T/20241218/2066

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Police Station Of Origin:

Toa Payoh N.P.C

93 Toa Payoh Central #01-02 Toa Payoh

Community Building SINGAPORE 319194

Tel No: 1800-2519999

Report No. T/20241218/2066

CONTINUATION OF REPORT

Signature of Officer Recording The
E/
SGT 3 NICHOLAS LEE NAM AIK

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /
SI MUHAMMAD FARHAN BIN MOHAMED
Contact No.: 65476224

Signature Of Informant:

Date/Time:
18/12/2024 18:17

Classification Of Case:

NP168