

# 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 18:28 (SGT)
Reported by .....	Actual Driver
Date of Accident .....	29/06/2024 11:20 (SGT)
Exact Location of Accident .....	PIE, Singapore
Additional Location Information .....	-
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SHD4450S
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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) +65-91284956
Alternative Phone No .....	(Office) +65-65508768

### VEHICLE PARTICULARS

Manufacturer .....	Hyundai
Model .....	Ae ioniq
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 .....	1580

### INSURANCE COMPANY

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

### DRIVER

Name of Driver .....	CHUA LIM SHYANG (CAI LINXIANG)
NRIC No .....	S7637243H
Date Of Birth .....	18/11/1976
Occupation .....	Outdoor

Driving Pass Date .....	08/09/1999
Driving experience .....	24 YEARS AND 9 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-91284956
Alt. Phone Number .....	-
Email Address .....	fleetsafety@cdgtaxi.com.sg
Address .....	BLK 635 JURONG WEST STREET 65 #02-326
Address complement .....	-
Postcode .....	640635
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 .....	Chain Collision
Weather Conditions .....	Clear
Road Surface .....	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? .....	Yes
Number of vehicles involved in the accident .....	7
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) .....	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 .....	-

#### FOREIGN VEHICLE 1

Vehicle Registration Number .....	VMA3436
Vehicle Category .....	Private car

#### PASSENGER 1

Name .....	UNKNOWN
Gender .....	Male

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Jurong West Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18002689999
Alt. Police Station Phone No .....	(Fax) +65-62672438
Police Station Address .....	700 Corporation Road Singapore 649818
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT:T/20240629/2061

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	Yes

**DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number .....	SLR1590U
Vehicle Manufacturer .....	Honda
Vehicle Model .....	FREED 1.5G CVT
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	-
Contact Number .....	(Phone) +65-93801086
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 .....	SLA1957K
Vehicle Manufacturer .....	Honda
Vehicle Model .....	VEZEL 1.5X A
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
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) .....	-

**DETAILS OF OTHER VEHICLE PROPERTY 3**

Vehicle Registration Number .....	SMF6738E
Vehicle Manufacturer .....	Hyundai
Vehicle Model .....	ELANTRA AD 1.6 GLS AT (AMS)
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
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) .....	-

**DETAILS OF OTHER VEHICLE PROPERTY 4**

Vehicle Registration Number .....	VMA3436
Vehicle Manufacturer .....	Perodua
Vehicle Model .....	Myvi
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car

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) .....	-

#### DETAILS OF OTHER VEHICLE PROPERTY 5

Vehicle Registration Number .....	SJN4210S
Vehicle Manufacturer .....	Toyota
Vehicle Model .....	COROLLA ALTIS 1.6 AUTO
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
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) .....	-

#### DETAILS OF OTHER VEHICLE PROPERTY 6

Vehicle Registration Number .....	SJC6160Y
Vehicle Manufacturer .....	Honda
Vehicle Model .....	CROSSROAD 1.8L A
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
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****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

29/06/24  
1455hrs

Witnessed by Reporting Centre Personnel



Sketch Plan		Vehicle Details
		PIE (CHANGI) BEF EXIT 16A A - SHD4450S B - SLR1590U C - SLA1957K D - SMF6738E E - VMA3436 F - SJN4210S G - SJC6160Y

Describe Circumstances of the Accident

PLEASE REFER TO POLICE  
REPORT.T/20240629/2061

Declaration

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

29/06/24  
1455hrs

Witnessed by Reporting Centre Personnel





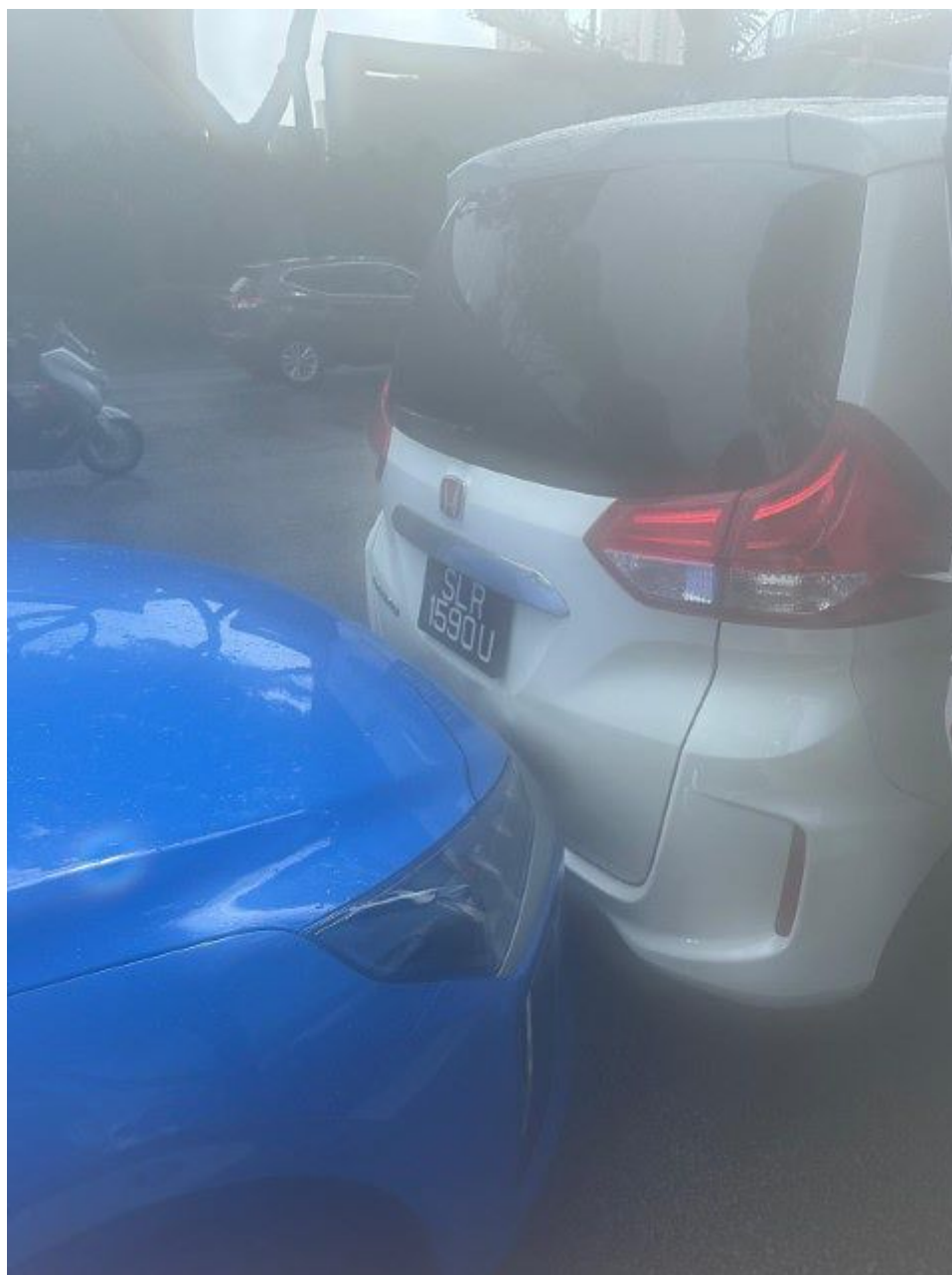
































T/20240629/2061  
1 of 1  
Report No. T/20240629/2061

**SINGAPORE POLICE FORCE**

Police Station Of Origin:  
Jurong West N.P.C  
700 Corporation Road SINGAPORE 649818  
Tel No: 1800-2689999


<b>REPORT OF A TRAFFIC ACCIDENT</b>		Station Diary No.:
Date/Time Report Made: 29/06/2024 18:57	Vide Report No.:	92

<b>Informant's Particulars</b>	
Name of Informant: CHUA LIM SHYANG	Address: 635 JURONG WEST STREET 65 #02-326 SINGAPORE 640635
ID Type / ID No.: NRIC NO / S7637243H	Contact No.: Home/Office: Mobile: 91284956
Nationality: SINGAPORE CITIZEN	Email:
Sex: Male    Age: 47    Date of Birth: 18/11/1975	Type of Informant: Driver
Race: Chinese	Language:
Occupation: Taxi driver	Driving Licence Information: Class: 3,4A    Date of Expiry:

<b>General Information of the Accident</b>				
Type of Accident:	Non-Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 29/06/2024 11:20	Type of Location: Straight Road
Location: PAN-ISLAND EXPRESSWAY				
Weather: Heavy rain		Road Surface: Wet		
Traffic Flow: One Way		Traffic Control:		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHD4450S	Motor car					1
SJC6160Y	Motor car					0
SJN4210S	Motor car					0
SLA1957K	Motor car					0

T/20240629/2061  
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Report No. T/20240629/2061

 **SINGAPORE POLICE FORCE**

Police Station Of Origin:  
Jurong West N.P.C  
700 Corporation Road SINGAPORE 649818  
Tel No: 1800-2689999

CONTINUATION OF REPORT





Details of Vehicle Involved					Condition	No of Passenger
Vehicle No.	Type	Make	Model	Color		
SLR1590U	Motor car					0
SMF6738E	Motor car					0
VWA3436	Motor car					0

**Brief Details.**  
On 29/06/24 at about 11.20am, I was driving my comfort taxi with a passenger along PIE to towards Changi. It was raining very heavily. I was driving at lane 1 when all of a sudden, the vehicle Infront of me made a Emergency brake, I did not brake in time, my vehicle collided with the rear of the vehicle (SLR1590U)  
I got down and realized I was the last vehicle of a chain accident between 7 cars.  
My passenger was in a rush he needs to catch a flight. I gave me name and contact number to the driver (SLR1590U). I took a picture of all the car and left the incident location.  
My passenger and I did not suffer any injuries.

I would like to state that I have the footage of the incident.

Damages on my vehicle: Front number plate crack.



 <b>SINGAPORE POLICE FORCE</b>		 T/20240629/2061
Police Station Of Origin: Jurong West N.P.C 700 Corporation Road SINGAPORE 649818 Tel No: 1800-2689999		3 of 3 Report No: T/20240629/2061
CONTINUATION OF REPORT		
Signature of Officer Recording The J / SGT 1 Cordelia Tan Fong Yu 		Signature Of Informant: 
Signature Of Interpreter: Not applicable		Date/Time: 29/06/2024 15:57
Officer In Charge Of Case: P / AEIT / R STAFF SGT FAHKRUL RAZI BIN SUHAIME Contact No.: 65476404		Classification Of Case:

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