

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 Authorised 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 ability.
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 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 Report | 03/01/2018 16:16 |
| Date Of Accident | 31/12/2017 09:00 |
| Exact Location Of Accident | PIE SLIP RD INTO BKE TWDS WOODLANDS |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------------------------------|
| Vehicle Registration Number | SJF5410S |
| Insured/Policyholder | |
| Name Of Registered Owner | H & H RENTAL & LEASING PTE. LTD. |
| Co Reg No | 201703965Z |
| Email Address | NOEMAIL |
| Mobile Phone No | |
| Alternative Phone No | OFFICE-97234411 |

Vehicle Particulars

| | |
|--|----------------|
| Manufacturer | TOYOTA |
| Model | AXIO |
| Exact Purpose for which vehicle was being used at time of accident | GRAB |
| Are you claiming under your own insurance policy for repair to your vehicle? | NO |
| If No, Please state action to be taken | REPORTING ONLY |
| Vehicle Category | PRIVATE HIRE |

Insurance Company

| | |
|---------------------------|--|
| Name of Insurance Company | NTUC INCOME INSURANCE CO-OPERATIVE LTD |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | YES |
| Policy Number | 5090735902 |
| Cover Note Number | |

Driver

| | |
|----------------------|----------------------|
| Name of Driver | TAN SHAO TENG |
| NRIC No | S7246045F |
| Date Of Birth | 21/11/1972 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 08/05/2014 |
| Driving Experience | 3 YEARS AND 7 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-93973566 |
| Fax Number | |
| Contact Number | |
| EEmail Address | NOEMAIL |

| | |
|---|---------------------------------|
| Address | BLK 628 YISHUN ST 61 #06-133 |
| Postcode | 760628 |
| Was driver an employee of the Insured's Company | NO |
| If No, Relationship of the Driver with the Insured | OTHER - HIRER |
| Vehicle Registration Number of Driver's Own Vehicle | - - - |
| Insurance Company of Driver's Own Vehicle | - - - |

General Information of the Accident

| | |
|--------------------|------------------------|
| Type Of Accident | COLLIDED INTO PROPERTY |
| Weather Conditions | RAINING |
| Road Surface | WET |

Other Information

| | |
|---|----|
| Was any foreign vehicle involved in this accident? | NO |
| Number of vehicles involved in the accident | |
| Was any body injured in the Accident? | NO |
| Was any injured conveyed to hospital by ambulance? | NO |
| Was any other material or property damaged? | NO |
| I have been approached by unknown person(s) soliciting/offering accident claims assistance. | NO |
| Number of Passengers (Including Driver) | 1 |

Details of Police Action

| | |
|---|--|
| Was the accident reported to the police? | YES |
| If Yes, Please state which Police Station | |
| Police Station Name | PAYA LEBAR NEIGHBOURHOOD POLICE POST |
| Police Station Address | ROAD: BLK 114 HOUGANG AVENUE 1 #01-1270 , POSTCODE: 530114 , COUNTRY: SINGAPORE |
| Police Station Contact | TEL NO: 1800-2899999 - FAX NO: 62815961 |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20171231/2042

Attachment(s)

| | |
|---|-----|
| Are accident photos available for attachment? | YES |
| Was there any video captured by Car Camera? | NO |
| Was there any audio recorded? | NO |

Sketch Plan

SKETCH PLAN

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 Authorised 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. The 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 lodgment 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.
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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
- (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.



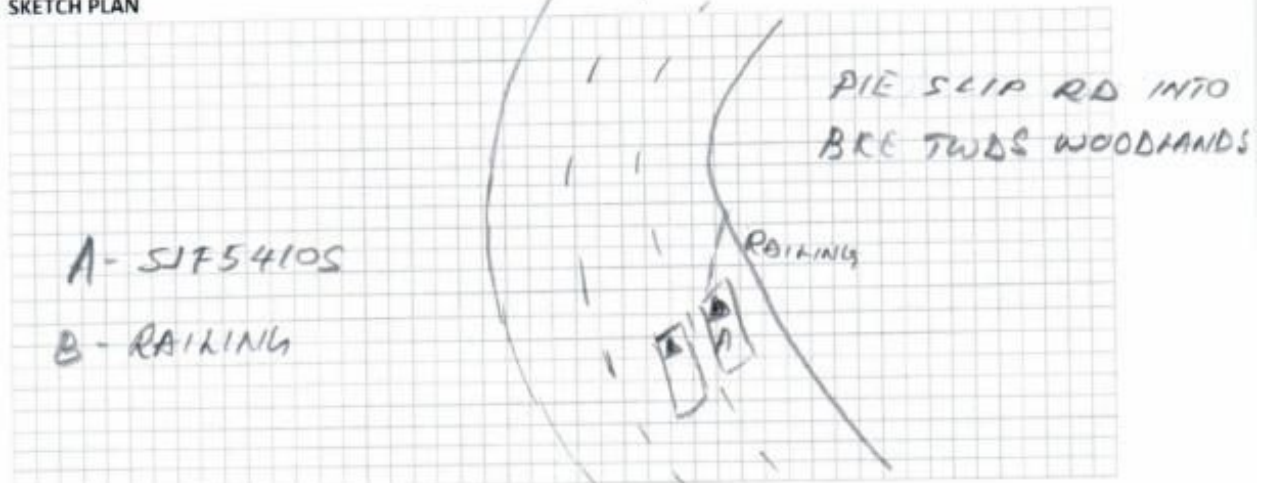
Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 03/01/18

Reporting Centre Personnel's Signature
Name: *2/lyn*
NRIC/FIN No.: 03/01/18

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

P/s refer to the police report: T/20171231/2042

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: 03/01/18

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



**SINGAPORE
POLICE FORCE**



T/20171231/2042

Police Station Of Origin:
Paya Lebar NPP
114 Hougang Avenue 1 #01-1270
SINGAPORE 530114
Tel No: 1800-2899999

2 of 3

Report No. T/20171231/2042

CONTINUATION OF REPORT

Brief Details.

On 31/12/2017 at about 0900hrs, I was driving my vehicle along PIE towards BKE at the woodlands slip road, lane 1. When I was performing a right bend, I observed that there was a vehicle on my left was very close to me therefore I was shocked and I swirled abit to the right however, it resulted in losing control of my vehicle and collided onto the railing.

I wish to state that there was no one injured prior to the incident and I was instructed by TP IO Tan Chin Yong, c/n: 65476178 to lodge a accident report. There was no camera installed in my vehicle and the railing was damaged.



Accident Photo



Accident Photo



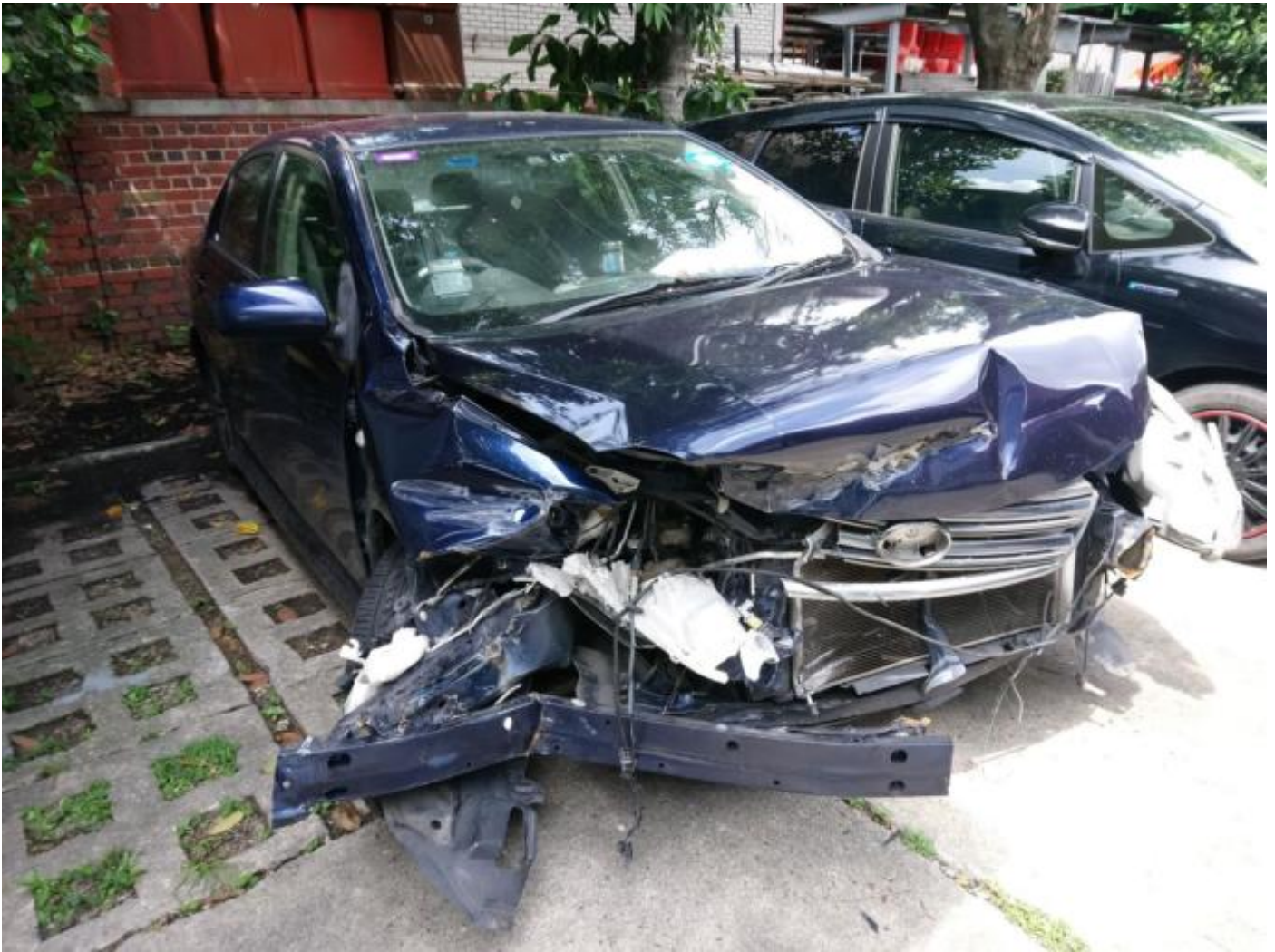
Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



T/20171231/2042

1 of 3

Police Station Of Origin:
Paya Lebar NPP
114 Hougang Avenue 1 #01-1270
SINGAPORE 530114
Tel No: 1800-2899999

Report No. T/20171231/2042

REPORT OF A TRAFFIC ACCIDENT

| | | |
|--|-------------------------------------|-------------------------|
| Date/Time Report Made: 31/12/2017 12:22 | Vide Report No.: F/20171231/0123 | Station Diary No.: 7 |
|--|-------------------------------------|-------------------------|

Informant's Particulars

| | |
|---|---|
| Name of Informant: TAN SHAO TENG | Address: APT BLK 628 YISHUN STREET 61 #06-133 SINGAPORE 760628 |
| ID Type / ID No.: NRIC NO / S7246045F | Contact No.: Home/Office: Mobile: 93973566 |
| Nationality: SINGAPORE CITIZEN | Email: |
| Sex: Male Age: 45 Date of Birth: 21/11/1972 | Type of Informant: Driver |
| Race: Chinese | Language: Institution / School Name: |
| Occupation: GRAB DRIVER | Driving Licence Information: Class: Date of Expiry: |

General Information of the Accident

| | | | | |
|--|-----------------------------------|------------------------------------|--|---------------------------|
| General Information of the Accident | | | | |
| Type of Accident: | Non-Injury Government Property | Drink Drive: No | Date/Time of Accident: 31/12/2017 09:00 | Type of Location: Bend |
| Location: Along Road 1 PAN ISLAND EXPRESSWAY PIE/BKE TOWARDS WOODLANDS SLIP ROAD. | | | | |
| Weather: Raining | | Road Surface: Wet | Road Speed Limit: | |
| Traffic Flow: One Way | | Traffic Control: Not Controlled | Traffic Volume: Light | |
| Type of Collision: Moving Vehicle Against - Road Divider/Kerb/Railings | | | Anyone conveyed by ambulance: No | |

Details of Vehicle Involved

| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
|-------------|------|------|-------|-------|-----------|-----------------|
| SJF5410S | Car | | | | | 0 |

Police Report



**SINGAPORE
POLICE FORCE**



T/20171231/2042

Police Station Of Origin:
Paya Lebar NPP
114 Hougang Avenue 1 #01-1270
SINGAPORE 530114
Tel No: 1800-2899999

2 of 3

Report No. T/20171231/2042

CONTINUATION OF REPORT

Brief Details.

On 31/12/2017 at about 0900hrs, I was driving my vehicle along PIE towards BKE at the woodlands slip road, lane 1. When I was performing a right bend, I observed that there was a vehicle on my left was very close to me therefore I was shocked and I swirled abit to the right however, it resulted in losing control of my vehicle and collided onto the railing.

I wish to state that there was no one injured prior to the incident and I was instructed by TP IO Tan Chin Yong, c/n: 65476178 to lodge a accident report. There was no camera installed in my vehicle and the railing was damaged.

Police Report



**SINGAPORE
POLICE FORCE**



T/20171231/2042

Police Station Of Origin:
Paya Lebar NPP
114 Hougang Avenue 1 #01-1270
SINGAPORE 530114
Tel No: 1800-2899999

3 of 3

Report No. T/20171231/2042

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

F /

Sgt 2 JANSEN KWOK SHU HAO

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

31/12/2017 12:22

Officer In Charge Of Case:

TP / AEIT /

Sgt 2 YEO KIA HUAT

Contact No.: 65476325

Classification Of Case:

Authentication Stamp

NP168