

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 | 08/01/2018 18:42 |
| Date Of Accident | 06/01/2018 18:10 |
| Exact Location Of Accident | BUKIT BATOK ST 25 EXIT BUKIT BATOK EAST AVE 3 |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|-------------------|
| Vehicle Registration Number | SJJ3562D |
| Insured/Policyholder | |
| Name Of Registered Owner | BIRDMAN TRANSPORT |
| Co Reg No | 53365368A |
| Email Address | NOEMAIL |
| Mobile Phone No | |
| Alternative Phone No | OFFICE-90087650 |

Vehicle Particulars

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

Insurance Company

| | |
|---------------------------|---|
| Name of Insurance Company | CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | DMHCSN1746401700 |
| Cover Note Number | |

Driver

| | |
|----------------------|-------------------------------|
| Name of Driver | PHOON CHENG WAH(FANG QINGHUA) |
| NRIC No | S7311289C |
| Date Of Birth | 22/03/1973 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 25/10/1990 |
| Driving Experience | 27 YEARS AND 2 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-90087650 |
| Fax Number | |
| Contact Number | |
| EEmail Address | NOEMAIL |

| | |
|---|-----------------------------------|
| Address | BLK 165 STIRLING ROAD #08-1253 |
| Postcode | 140165 |
| 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 | COLLISION - HEAD TO REAR |
| Weather Conditions | CLEAR |
| Road Surface | DRY |

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? | YES |
| Was any injured conveyed to hospital by ambulance? | NO |
| Was any other material or property damaged? | YES |
| I have been approached by unknown person(s) soliciting/offering accident claims assistance. | NO |
| Number of Passengers (Including Driver) | 3 |
| Passenger 1 | NAME: : UNKNOWN GENDER: : MALE |
| Passenger 2 | NAME: : UNKNOWN GENDER: : FEMALE |

Details of Police Action

| | |
|---|--|
| Was the accident reported to the police? | YES |
| If Yes, Please state which Police Station | |
| Police Station Name | TAMPINES EAST NPP |
| Police Station Address | ROAD: 263 TAMPINES STREET 21 #01-138 , POSTCODE: 520263 , COUNTRY: SINGAPORE |
| Police Station Contact | TEL NO: 1800-7839999 - FAX NO: |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

PLS REFER TO THE POLICE REPORT:T/20180108/2080

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

| | |
|-----------------------------|--------------------|
| Vehicle Registration Number | GBF243K |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | COMMERCIAL VEHICLE |
| Name of Driver | |

NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

| | |
|---|-------------------------------|
| Name | PHOON CHENG WAH(FANG QINGHUA) |
| Approximate Age | |
| Injuries Sustain | SLIGHT |
| Injured person in which vehicle? | SJJ3562D |
| Were seat belts worn? | YES |
| Was this injured conveyed to hospital by ambulance? | NO |
| Address | |
| Postcode | |

Sketch Plan

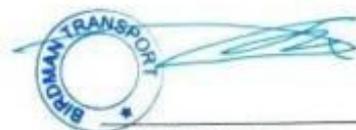
SKETCH PLAN

IMPORTANT NOTICE

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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:

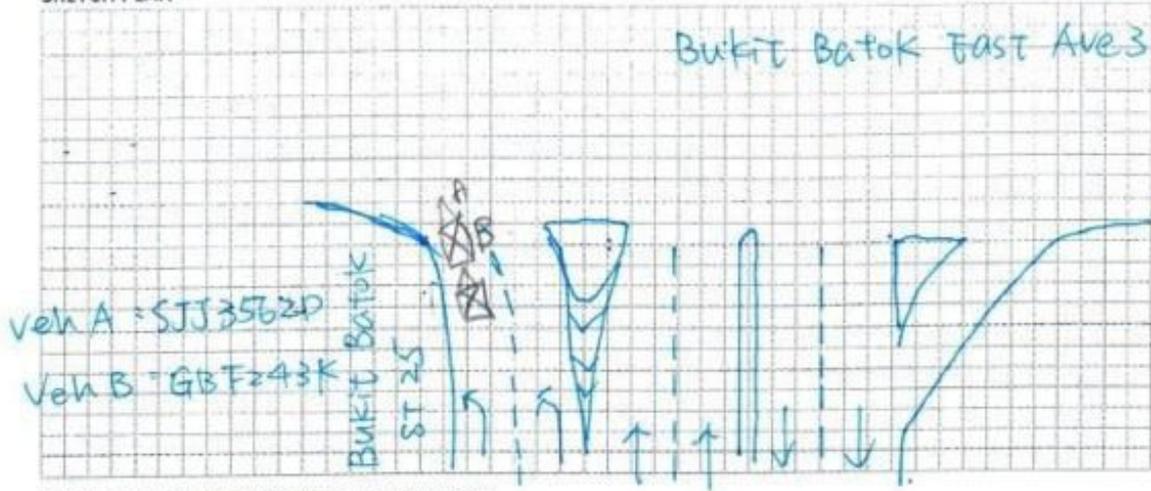
Driver's Signature
(If driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

[Handwritten Signature] 08/01/18

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer Police report = T/20180108/2080

DECLARATION

We declare the foregoing particulars are true in every respect.



Policyholder's Signature
Date & Time:

GUSTAC-SiccoUniform_M3

Driver's Signature
(if driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

[Signature] 08/01/18

Individual Statement



SINGAPORE
POLICE FORCE



T/20180108/2080

2 of 3

Report No. T/20180108/2080

Police Station Of Origin:
Tampines East NPP
263 Tampines Street 21 #01-138
SINGAPORE 520263
Tel No: 1800-7839999

CONTINUATION OF REPORT

| Vehicle Owner | | | |
|-----------------------------------|---------------------------|--|-----------------------------------|
| Name | PHOON CHENG WAH | ID No. | S7311289C |
| Related Vehicle | NIL | Contact No. | 90087650 |
| Hospital/Clinic | MEDILIFE CLINIC & SURGERY | Class of Driving Licence & Expiry Date | Class: NIL Date of Expiry: NIL |
| Date Treatment | 08/01/2018 | Date Discharge | 08/01/2018 |
| No. of Days granted Medical Leave | 03 | Degree of Injury | NIL |

Brief Details.

On the above mentioned date time and location, I was stopping before the 'give-way' road for the incoming traffic to clear. About 1minute later, I felt a impact from my rear and discovered that another vehicle 'GBF243K' had collided onto my rear. The impact cause a huge dent at the rear of my vehicle. Afterwhich we alight to exchange particulars and I send 2 of my passenger (both of my passenger were alright) to their destination.

On 8/1/2018, I woke up feeling numbness on both my hands. At such I proceed down to the said clinic and was given a 3 days MC for neck and back stiffness as well.

I wish to state that the other party also admit that it was his fault and to ask me to proceed down for our respective insurance claim.

The other party particulars:
Tan Yang Joo
S1779277F
C/O Haulotte Services Pte Ltd

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



T/20180108/2080

1 of 3

Report No. T/20180108/2080

Police Station Of Origin:
Tampines East NPP
263 Tampines Street 21 #01-138
SINGAPORE 520263
Tel No: 1800-7839999

REPORT OF A TRAFFIC ACCIDENT

| | | |
|--|------------------|--------------------------|
| Date/Time Report Made: 08/01/2018 14:16 | Vide Report No.: | Station Diary No.: 20 |
|--|------------------|--------------------------|

Informant's Particulars

| | | | |
|--|------------|--|-------------------------------------|
| Name of Informant: PHOON CHENG WAH | | Address: APT BLK 165 STIRLING ROAD #08-1253 SINGAPORE 140165 | |
| ID Type / ID No.: NRIC NO / S7311289C | | Contact No.: Home/Office: Mobile: 90087650 | |
| Nationality: SINGAPORE CITIZEN | | Email: | |
| Sex: Male | Age: 44 | Date of Birth: 22/03/1973 | Type of Informant: Vehicle Owner |
| Race: Chinese | | Language: | Institution / School Name: |
| Occupation: PRIVATE HIRER | | Driving Licence Information: Class: | Date of Expiry: |

General Information of the Accident

| | | | | |
|--|------------------|----------------------|--|-------------------------------------|
| Type of Accident: | Injury Others | Drink Drive: No | Date/Time of Accident: 06/01/2018 18:10 | Type of Location: |
| Location: Along Road 1 BUKIT BATOK STREET 25 Exit to Bukit Batok East Ave 3 | | | | |
| Weather: Clear | | Road Surface: Dry | | Road Speed Limit: |
| Traffic Flow: | | Traffic Control: | | Traffic Volume: Heavy |
| 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 |
|-------------|------|------|-------|-------|-----------|-----------------|
| GBF243K | Van | | | | | 0 |
| SJJ3562D | Car | | | | | 0 |

Details of Person Involved

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

Police Report



SINGAPORE
POLICE FORCE



T/20180108/2080

2 of 3

Report No. T/20180108/2080

Police Station Of Origin:
Tampines East NPP
263 Tampines Street 21 #01-138
SINGAPORE 520263
Tel No: 1800-7839999

CONTINUATION OF REPORT

| Vehicle Owner | | | |
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| Name | PHOON CHENG WAH | ID No. | S7311289C |
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Police Report



SINGAPORE POLICE FORCE



T/20180108/2080

Police Station Of Origin:
Tampines East NPP
263 Tampines Street 21 #01-138
SINGAPORE 520263
Tel No: 1800-7839999

3 of 3

Report No. T/20180108/2080

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: G / Sgt 2 HO CHUN HAO, PATRICK | Signature Of Informant:  |
| Signature Of Interpreter: Not applicable | Date/Time: 08/01/2018 14:16 |
| Officer In Charge Of Case: TP / AEIT / Sgt 2 YEO KIA HUAT Contact No.: 65476325 | Classification Of Case: |
| Authentication Stamp NP168 |  |

572718



IRIC No. S7311289C



Date of Issue
10-04-2017

Address
APT BLK 165 STIRLING ROAD
#06-1253
SINGAPORE 140165

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S7311289C**



Name



**PHOON CHENG WAH
(FANG QINGHUA)**

方清華

Race

CHINESE

Date of birth

22-03-1973

Sex

M

Country/Place of birth

SINGAPORE

Identification Card

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

EFFECTIVE DATE

- Class 2B Motorcycles <= 200 cc 26 Aug 1991
- Class 2A Motorcycles between 201 cc and 400 cc 15 Sep 1995
- Class 3 Motor cars with unladen weight <= 3000kg with <= 7 passengers, exclusive of driver; and other motor vehicles with unladen weight <= 2500kg 26 Oct 1999



Licence No. S7311289C

NP 428A

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S7311289C**

Name
**PHOON CHENG WAH
(FANG QINGHUA)**

Birth Date: **22 Mar 1973**
Issue Date: **10 Apr 2017**

002673649C