

MPRI18005114 / Prime Auto Claims Service Pte Ltd - HQ
ENTRY DATE & TIME: 12/01/2018 15:01
SUBMITTED BY: Chrissy Yeo Ye En

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 12/01/2018 15:01
Date Of Accident 11/01/2018 16:00
Exact Location Of Accident AYE - LOWER DELTA EXIT
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLG7828D
Insured/Policyholder
Name Of Registered Owner SECTION LIMOUSINE SERVICES PTE. LTD.
Co Reg No 201620964M
Email Address NOEMAIL
Mobile Phone No
Alternative Phone No OFFICE-68628878

Vehicle Particulars

Manufacturer HONDA
Model VEZEL-1.5 X CVT (A)

Exact Purpose for which vehicle was being used at time of accident

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 TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage COMPREHENSIVE
Fleet Policy YES
Policy Number 17-MH001075-R01
Cover Note Number

Driver

Name of Driver YEO TIONG HWEE
NRIC No S7247191A
Date Of Birth 18/11/1972
Occupation OUTDOOR
Date Of Driving Pass 13/05/2005
Driving Experience 12 YEARS AND 7 MONTHS
Gender MALE
Mobile Number (LOCAL) +65-97508128
Fax Number
Contact Number
EMail Address NOEMAIL

Address BLK. 780C WOODLANDS CRESCENT # 12-53 SINGAPORE
Postcode 733780
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 CHAIN COLLISION
Weather Conditions DRIZZLING
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? YES
Was any injured conveyed to hospital by ambulance? YES
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) 2
Passenger 1

NAME: : PASSENGER

GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police? YES
If Yes, Please state which Police Station

Police Station Name BUKIT BATOK NEIGHBOURHOOD POLICE CENTRE

Police Station Address ROAD: 21 BUKIT BATOK EAST AVE 4 , POSTCODE: 659840 , COUNTRY: SINGAPORE

Police Station Contact TEL NO: 1800-6659999 - FAX NO: 66665793

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT T/20180111/2219

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 SHC7494B
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category TAXI
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode

Insurance Company Name

FIRST CAPITAL INSURANCE LTD

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name

DRIVER OF SHC7494B

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SHC7494B

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

YES

Address

Postcode

Accident Sketch Plan Pg. 1

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 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.



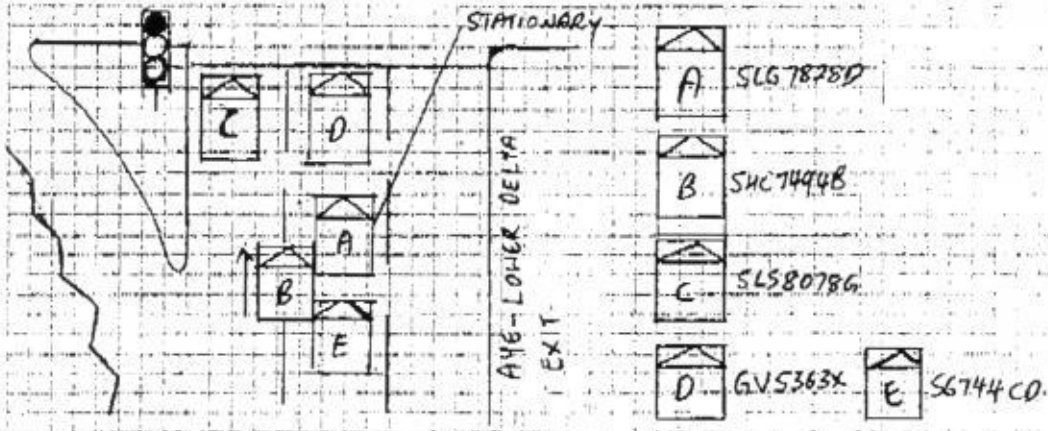
Policyholder's Signature
Date & Time:

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

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

Individual Statement Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report No. T/20180111/2219.

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:

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

HAZMAT Incident Form V3

POLICE REPORT Pg. 1



**SINGAPORE
POLICE FORCE**



T/20180111/2219

Police Station Of Origin:
Bukit Batok N.P.C
21 Bukit Batok East Avenue 4 SINGAPORE
659840
Tel No: 1800-6659999

1 of 3

Report No. T/20180111/2219

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/01/2018 21:40	Video Report No.: A/20180111/0068	Station Diary No.: 169
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Name of Informant: YEO TIONG HWEE		Address: APT BLK 780C WOODLANDS CRESCENT #12-53 SINGAPORE 733780	
ID Type / ID No.: NRIC NO / S7247191A		Contact No.: Home/Office: Mobile: 97508128	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 45	Date of Birth: 18/11/1972	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: GRAB DRIVER		Driving Licence Information: Class: Date of Expiry:	

Type of Accident: Non-Injury	Drink Drive: No	Date/Time of Accident: 11/01/2018 16:00	Type of Location: X-Junction
Location: Along Road 1 LOWER DELTA ROAD AYE - Lower Delta Exit turning right into Lower Delta Road			
Weather: Drizzling		Road Surface: Wet	Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working	Traffic Volume: Heavy
Type of Collision: Moving vehicle against stationary vehicles			Anyone conveyed by ambulance: No

SHG7494B	TAXI	HYUNDAI	Yellow	Seriously Damaged	0	
SLG7828D	Car	HONDA	VEZEL	White	Slightly Damaged	1

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

POLICE REPORT Pg. 1



**SINGAPORE
POLICE FORCE**



T/20180111/2219

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659840
Tel No: 1800-6659999

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Report No. T/20180111/2219

CONTINUATION OF REPORT

Name	YEO TIONG HWEE		ID No.	S7247191A
Related Vehicle	SLG7828D (Car)		Contact No.	97508128
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL	
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL	

Brief Details.

On 11/01/2018 at around 1600hrs, I was driving SLG7828D, white color Honda Vezel, at the AYE-Lower Delta Ext. I was at the 'turn right' lane and the traffic light indicated red. Therefore, I slowed down and came to a stop. There was a van in front of me and a car (SLS8078G) on my front left lane. There was also another car behind of me. Suddenly, there was a yellow color Hyundai taxi, SHC7494B, that dash through in between my lane and my left lane. The said taxi dashed through until after the stop line when another car, Mazda 3 (SLQ6827K), that was going straight along Lower Delta Road hit onto the said taxi. After which, the other driver went to call for the ambulance and traffic police. When the traffic police arrived, the officer asked me some questions and gave me a report number, A/20180111/0068, and told me to lodge a traffic accident report. I would like to state that I am not injured. My car's left portion was damaged.

POLICE REPORT Pg. 1

**SINGAPORE
POLICE FORCE**

T/20180111/2219

Police Station Of Origin:
Bukit Batok N.P.C
21 Bukit Batok East Avenue 4 SINGAPORE
659840
Tel No: 1800-6659999

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Report No. T/20180111/2219

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: J / SR 114 Sr Staff Sgt MOHAMMAD NUR AZMI BIN KARIM	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 11/01/2018 21:40
Officer In Charge Of Case: TP / GIA / Staff Sgt TANG SIEW PING Contact No.: 65476430	Classification Of Case:

Authentication Stamp
NP168