



## 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 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	14/02/2018 17:35
Date Of Accident	14/02/2018 12:20
Exact Location Of Accident	ALONG NORTH BRIDGE ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKR7311G
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAN HUI HOON
NRIC No	S7536415F
Email Address	YANTING@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98748279
Alternative Phone No	OTHERS-83998736

### Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 (A)
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
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	P 28690565 DMA
Cover Note Number	

### Driver

Name of Driver	GOO YAU TING
NRIC No	S7678299G
Date Of Birth	21/01/1976
Occupation	INDOOR
Date Of Driving Pass	25/02/2009
Driving Experience	8 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98748279
Fax Number	
Contact Number	OTHERS-83998736
Email Address	YANTING@GMAIL.COM



Address	BLK 232 BAIN STREET #21-21
Postcode	180232
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
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	2
Was any body injured in the Accident?	NO
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)	1

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	CAIRNHILL NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 9 GLOUCESTER ROAD , POSTCODE: 210009 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2968999 - FAX NO: 63912398
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE CREFER TO POLICE REPORT T/20180214/2131

#### Attachment(s)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHA4016D
Vehicle Make/Model/Colour	HYUNDAI I40
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	LIM SEE KWONG
NRIC/Passport Number	S1456057B
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

## SKETCH PLAN

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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: 14/2/2018

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

SKETCH PLAN

ALONG NORTH BRIDGE ROAD



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

*AS REFER TO POLICE REPORT*  
*1/20180214/2131*

DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature  
 Date & Time:

*14/2/2018*  
 Driver's Signature  
 (If driver is not the policyholder)  
 Date & Time:

*14/02/2018*  
 Reporting Centre Personnel's Signature  
 Name:  
 NRIC/FIN No.:





**SINGAPORE  
POLICE FORCE**



T/20180214/2131

Police Station Of Origin:  
Cairnhill NPP  
9 Gloucester Road #01-03 SINGAPORE  
210009  
Tel No: 1800-2968999

1 of 3

Report No. T/20180214/2131

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 14/02/2018 17:02		Vide Report No.:		Station Diary No.: 24	
<b>Informant's Particulars</b>					
Name of Informant: GOO YAU TING			Address: APT BLK 232 BAIN STREET #21-21 SINGAPORE 180232		
ID Type / ID No.: NRIC NO / S7678299G			Contact No.: Home/Office: Mobile: 83998736		
Nationality: MALAYSIAN			Email:		
Sex: Male	Age: 42	Date of Birth: 21/01/1976	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: IT			Driving Licence Information: Class: 3		Date of Expiry:

**General Information of the Accident**

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 14/02/2018 12:20	Type of Location: Straight Road
Location: Along Road 1 NORTH BRIDGE ROAD				
Near to High Street Centre before turning right to North Boat Quay.				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
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
SHA4016D	Car	HYUNDAI	I40 1.7L CRDI AT ABS AIRBAG 4DR	Blue		1
SKR7311G	Car	TOYOTA	COROLLA ALTIS CLASSIC 1.6 CVT	Silver	Slightly Damaged	0



**SINGAPORE  
POLICE FORCE**



T/20180214/2131

Police Station Of Origin:  
Cairnhill NPP  
9 Gloucester Road #01-03 SINGAPORE  
210009  
Tel No: 1800-2968999

2 of 3

Report No. T/20180214/2131

**CONTINUATION OF REPORT**

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	GOO YAU TING	ID No.	S7678299G
Related Vehicle	SKR7311G (Car)	Contact No.	83998736
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 14/02/2018 at about 1220hrs, I was driving my vehicle (SKR7311G) along North Bridge Road near to High Street Centre. It was four lanes and I was at the extreme right lane as I my intention to turn right towards North Boat Quay.

While driving, a taxi (SHA4016D) was in front me, started to change lane to the left lane as there was a car (SLK 9913G) which was in a stationary position. I followed from the back of the taxi and change back to the right lane. All of the sudden after changing back to the right lane, the taxi sudden brake at the double yellow zig zag line as there was a passenger hailing for his taxi. I jam brake but did not make it in time and collided with his rear bumper.

The taxi driver came to me that he will informed his company for the insurance claim.  
I wish to state that I did not suffered any injuries and I do have in built car camera which capture the incident.  
That is all.



**SINGAPORE  
POLICE FORCE**



T/20180214/2131

Police Station Of Origin:  
Cairnhill NPP  
9 Gloucester Road #01-03 SINGAPORE  
210009  
Tel No: 1800-2968999

3 of 3

Report No. T/20180214/2131

**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:

A /

Sgt 1 MUHAMMAD ALIF BIN ALIAS

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

14/02/2018 17:02

Officer In Charge Of Case:

TP / GIA /

Staff Sgt TANG SIEW PING

Contact No.: 65476430

Classification Of Case:

Authentication Stamp

NP168



# ACCIDENT STATEMENT

ACCIDENT DATE: 14 / 02 / 2018 (DD/MM/YYYY), TIME: 12.20 (HH:MM)

LOCATION: North Bridge Road, near

## 1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SKR 7311 9  
 b) INSURANCE COMPANY: M316  
 c) POLICY NUMBER: P 28670565 DMA  
 d) POLICY TYPE: COMPREHENSIVE THIRD PARTY / THIRD PARTY FIRE & THEFT  
 e) MAKE & MODEL: TOYOTA ALTIS COROLLA  
 f) TYPE: (SALOON) / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS  
 g) VEHICLE CATEGORY: (PRIVATE) / COMMERCIAL / MOTORCYCLE  
 h) PURPOSE OF USING AT ACCIDENT TIME: Transport  
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)  
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

## 2. INSURED / POLICY HOLDER

- a) NAME: TAN HUI HOON (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S7536415F CONTACT: 9574 8279  
 c) ADDRESS: BK 232 Ban St # 21-21 180232

\* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

No of passengers  
(Including driver)  
(1)

- DRIVER  
 a) NAME: Goo Yau Ting (MALE / FEMALE)  
 b) NRIC/FIN/PASSPORT: S76782999 CONTACT: 88958736  
 c) ADDRESS: BK 232 Ban St # 21-21 180232

d) DATE OF BIRTH: 21 01 1976 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR) / OUTDOOR

f) DATE OF DRIVING PASS: 3

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)  
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED:

5. a) WEATHER CONDITION: (CLEAR) / RAINING / OTHERS  
 b) ROAD SURFACE: (DRY) / WET / OTHERS

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)  
 IF YES, PLEASE STATE WHICH POLICE STATION: Caintill NPP

## 8. THIRD PARTY VEHICLE

No of passenger  
(Including driver)  
(1)

- a) VEHICLE NUMBER: SMA 4016D MODEL: Hyundai  
 b) DRIVER'S NAME: Lim See Kwong  
 c) NRIC/FIN/PASSPORT: S1456057B CONTACT: 9835023 ?

## 9. THIRD PARTY VEHICLE

No of passenger  
(Including driver)  
( )

- a) VEHICLE NUMBER: \_\_\_\_\_ MODEL: \_\_\_\_\_  
 b) DRIVER'S NAME: \_\_\_\_\_  
 c) NRIC/FIN/PASSPORT: \_\_\_\_\_ CONTACT: \_\_\_\_\_

Email: Yauting@gmail.com  
 Fax: \_\_\_\_\_  
 Video

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S7678299G



Name

GOO YAU TING

Race

CHINESE

Date of Birth

21-01-1976

Sex

M

Country of Birth

MALAYSIA

REPUBLIC OF SINGAPORE DRIVING LICENCE



License Number S7678299G

Name

GOO YAU TING

Birth Date 21 Jan 1976

Issue Date 25 Feb 2009



001713433E



8401355

NRIC No S7678299G



Nationality

MALAYSIAN

Group

O+

Date of Issue

29-05-2001

APT BLK 232 BAIN STREET #21-21  
SINGAPORE 180232

NRIC No: S7678299G

Date: 29/10/2010

No: 6695199

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

PASS DATE

25 Feb 2009

Class 1 Motor Cars < 3000kg with < 7 passengers, exclusive of the driver; and other motor vehicles < 2500kg



License No: S7678299G

NP 428A



**MSIG**

MSIG Insurance (Singapore) Pte. Ltd.  
 4 Shenton Way, # 21-01, SGX Centre 2, Singapore 068807  
 Tel +65 6827 7888, Fax +65 6827 7800  
 Co. Reg. No. 200412212G GST Reg. No. 20-0412212G

## Certificate of Insurance

ROAD TRANSPORT ACT 1987 (MALAYSIA)  
 THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)  
 THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)  
 (REPUBLIC OF SINGAPORE)  
 THE MOTOR VEHICLES (THIRD-PARTY RISK AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)  
 OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

Form M.X.1  
 Individual Ownership

**DRIVESHIELD - PREMIER PLAN**  
**Comprehensive**

Certificate No. P 28690565 DMA

Excess : SGD1,000  
 Windscreen Excess : SGD100

1. Index Mark and Registration Number of Vehicle  
 SKR7311G

2. Name of Policyholder  
 Tan Hui Hoon

3. Effective Date of the Commencement of Insurance for the purposes of the Act  
 05/03/2017

4. Date of Expiry of Insurance  
 04/03/2018

5. Persons or Classes of Persons entitled to drive\*

Tan Hui Hoon

Any other person provided he is driving on the Policyholder's order or with the Policyholder's permission.

\* Provided that the person driving is permitted in accordance with the licensing or other laws or laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

6. Limitations as to use\*

Use only for social domestic and pleasure purposes and for the Policyholder's business.  
 The Policy does not cover use for hire or reward racing pace-making reliability trial speed-testing the carriage of goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.

\* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.

**PLEASE NOTE ALL CLAIMS RELATED REPAIR CAN BE CARRIED OUT AT ANY WORKSHOP OF YOUR CHOICE OR AT ANY MSIG AUTHORISED WORKSHOP LISTED IN THE ATTACHED.**

This Certificate is not transferable to a new owner of the vehicle. If for any reason the Policy is terminated during its currency, the Certificate must be returned to the Insurer within 7 days of the termination or if the Certificate has been lost or destroyed, a Statutory Declaration to that effect must be made. Failure to comply with this obligation is an offence under the Motor Vehicles (Third-Party Risks and Compensation) Act (Cap. 189).

I/WE HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia) or any Amendment, Act or Acts passed in substitution thereof.

MSIG Insurance (Singapore) Pte. Ltd.  
 Approved Insurers

for Chief Executive Officer