

## 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	26/02/2018 11:24
Date Of Accident	25/02/2018 11:15
Exact Location Of Accident	ROUNDAABOUT TWDS SENTOSA COVE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GZ57S
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#### Insured/Policyholder

Name Of Registered Owner	ONE2RENT CARS PTE. LTD.
Co Reg No	201306179N
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-96697838

#### Vehicle Particulars

Manufacturer	FIAT
Model	DOBLO CARGO MAXI 1.6 MTJ AMT GLAZE
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
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	COMMERCIAL VEHICLE

#### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5079227496-01
Cover Note Number	-

#### Driver

Name of Driver	TAN PEI XI (CHEN PEIXI)
NRIC No	S8907407Z
Date Of Birth	25/02/1989
Occupation	OUTDOOR
Date Of Driving Pass	12/11/2009
Driving Experience	8 YEARS AND 3 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-96697838
Fax Number	
Contact Number	OTHERS-62786560
Email Address	NOEMAIL

Address	54 SEMBAWANG RD #03-02
Postcode	779085
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 - CHANGE/CROSS LANE
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: : FELICIA GOH XINYI GENDER: : FEMALE
Passenger 2	NAME: : BERWIN TAN WEI HAN GENDER: : MALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ
Police Station Address	<b>ROAD:</b> 10 UBI AVENUE 3 , <b>POSTCODE:</b> 408865 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 65470000 - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH DRIVER
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHD2930L
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
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	TAN PEI XI (CHEN PEIXI)
Approximate Age	
Injuries Sustain	RIGHT SHOULDER
Injured person in which vehicle?	GZ57S
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

## Accident Sketch Plan

### SKETCH PLAN

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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.

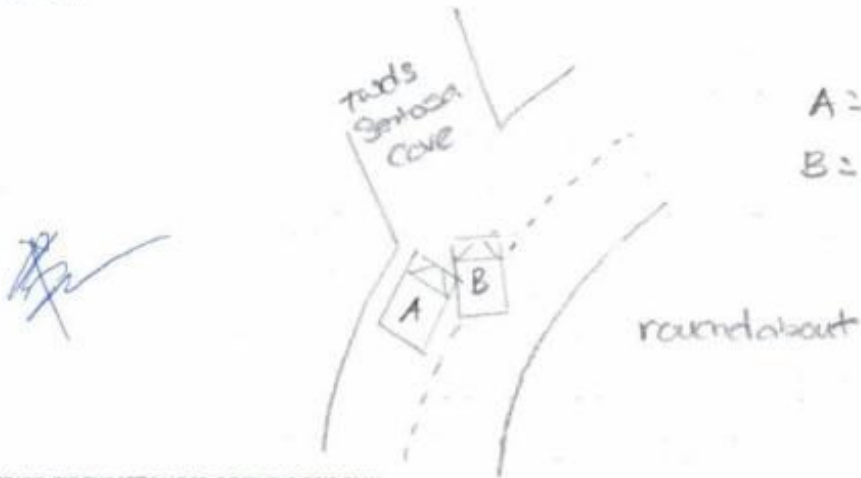
Policyholder's Signature  
Date & Time:

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

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

# Accident Sketch Plan

SKETCH PLAN



A: GZ57S

B: CHD 2930L

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

7

refer to traffic police report  
No: - T/201800257004  
dtd. 25.02.18.

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## 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:

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

# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20180225/7004

1 of 4

Police Station Of Origin:  
Traffic Police Division HQ  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

Report No. T/20180225/7004

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/02/2018 14:49		Vide Report No.: D/20180225/0092		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: TAN PEI XI			Address: 54 SEMBAWANG ROAD #03-02 SINGAPORE 779085		
ID Type / ID No.: NRIC NO / S8907407Z			Contact No.: Home/Office: Mobile: 96697838		
Nationality: SINGAPORE CITIZEN			Email: peixi@focusadventure.com		
Sex: Female	Age: 29	Date of Birth: 25/02/1989	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: SALES			Driving Licence Information: Class: 3 Date of Expiry:		

## General Information of the Accident

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 25/02/2018 11:15	Type of Location: Roundabout
Location:  ALLANBROOKE ROAD  Roundabout towards Sentosa Cove				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

## Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GZ57S	Van	FIAT	Doblo	Grey		2
SHD2930L	Car	TOYOTA	Vellfire	White		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/20180225/7004

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Police Station Of Origin:  
Traffic Police Division HQ  
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Tel No: 65470000

Report No. T/20180225/7004

## CONTINUATION OF REPORT

<b>Driver</b>			
Name	TAN PEI XI	ID No.	S8907407Z
Related Vehicle	GZ57S (Van)	Contact No.	96697838
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
<b>Passenger</b>			
Name	Berwin Tan Wei Han	ID No.	S9039410Z
Related Vehicle	GZ57S (Van)	Contact No.	81881114
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
<b>Passenger</b>			
Name	Felicia Goh Xin Yi	ID No.	S9208278D
Related Vehicle	GZ57S (Van)	Contact No.	93879539
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 25 Feb 2018 at about 1115hrs, I was driving my company vehicle (GZ57S) from Beach Station travelling to Tanjong Beach with my two colleagues.

While I was driving on the outer lane at the roundabout, one Prime taxi (SHD2930L) which was initially on the inner lane, wanted to overtake my vehicle so as in to travel towards Sentosa Cove in the next roundabout exit. However, when the taxi driver was overtaking, his vehicle collided with mine and the front right (driver side) was damaged.

I immediately stopped but the taxi driver did not stop and continued his journey. I did not notice if there is any passenger in the taxi but my colleagues who were in my vehicle were not injured.

## POLICE REPORT



SINGAPORE  
POLICE FORCE



T/20180225/7004

3 of 4

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Report No. T/20180225/7004

CONTINUATION OF REPORT

The damages on my vehicle:

- 1) Dented driver side door
- 2) Unable to start engine
- 3) Dented front licence plate
- 4) Broken front bumper

Police was called in at the time of accident. This accident was recorded by my dashcam.



## POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20180225/7004

4 of 4

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Tel No: 65470000

Report No. T/20180225/7004

CONTINUATION OF REPORT

### Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:

Authentication Stamp  
NP168

Signature Of Informant:  
The identity of the person making this report has  
been authenticated by SingPass. No signature is  
required.

Date/Time:  
25/02/2018 14:49

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo

