

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:

*[Signature]*  
20/2/2018  
13:55 hrs.  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

*[Signature]* 20/2/2018  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:



**SINGAPORE  
POLICE FORCE**



T/20180221/2053

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

1 of 4

Report No. T/20180221/2053

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 21/02/2018 12:06		Vide Report No.: E/20180220/0048		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: CHUA HOCK GUAN			Address: APT BLK 401 ADMIRALTY LINK #15-06 HDB-SEMBAWANG SINGAPORE 750401		
ID Type / ID No.: NRIC NO / S1765491H			Contact No.: Home/Office: Mobile: 96471686		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 51	Date of Birth: 22/12/1966	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Taxi driver			Driving Licence Information: Class: 3,4		Date of Expiry:

<b>General Information of the Accident</b>				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 20/02/2018 09:20	Type of Location: Straight Road
Location: Along Road 1 CENTRAL EXPRESSWAY  AFTER CAIRNHILL				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
EB9003M	Car	HONDA	FIT 1.3G A	White	Slightly Damaged	0
SHB5228Y	Car	CHEVROLET	EPICA 2.0DSL AT ABS D/AB 2WD 4DR	Maroon	Seriously Damaged	2
SJG2415T	Car	SUZUKI	SWIFT 1.2XG A	Grey	Slightly Damaged	0



**SINGAPORE  
POLICE FORCE**



T/20180221/2053

2 of 4

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

Report No. T/20180221/2053

## CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLF4846B	Car	HONDA	SHUTTLE 1.5G CVT ABS D/AIRBAG 2WD 5DR	White	Seriously Damaged	1

Details of Person Involved						
Any Pedestrian Involved: No						
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA			
Driver						
Name	PHUA YVONNE			ID No.	S8825474J	
Related Vehicle	EB9003M (Car)			Contact No.	91784232	
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		
Passenger						
Name	YU HUA			ID No.	NIL	
Related Vehicle	SHB5228Y (Car)			Contact No.	98174148	
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	Slight		
Driver						
Name	CHUA HOCK GUAN			ID No.	S1765491H	
Related Vehicle	SHB5228Y (Car)			Contact No.	96471686	
Hospital/Clinic	KHOO TECK PUAT HOSPITAL			Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: NIL	
Date Treatment	20/02/2018		Date Discharge	20/02/2018		
No. of Days granted Medical Leave	04		Degree of Injury	Slight		



**SINGAPORE  
POLICE FORCE**



T/20180221/2053

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

3 of 4

Report No. T/20180221/2053

## CONTINUATION OF REPORT

Driver			
Name	TAI HUI ZI, MABELENE		ID No. S9003386G
Related Vehicle	SJG2415T (Car)		Contact No. 90268747
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
Driver			
Name	AZMAN		ID No. S1425099I
Related Vehicle	SLF4846B (Car)		Contact No. 82473981
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 THE ABOVE MENTIONED TIME AND DATE

I WAS TRAVELLING ALONG CTE LANE 1, WHEN I ENTERED THE TUNNEL, I SAW THAT INFRONT OF ME THERE WAS A BRAKE LIGHT, SO I SLOWED DOWN, I STOPPED BEHIND SJG2415T, FROM THEN SLF4846B BANG ONTO THE REAR PORTION OF MY TAXI. AFTERWARDS WE ALL WENT DOWN FROM OUR VEHICLE TO EXCHANGE PARTICULARS. THE PASSENGER AND DRIVER OF SLF4846B WAS CONVEYED TO THE HOSPITAL. THE BACK PORTION OF SJG2415T HAD NO DAMAGE. I LOOKED AT THE FRONT PORTION OF MY CAR AND SAW NO DAMAGE AND ALL THE DAMAGE WAS ON THE REAR PORTION AND THE FRONT PORTION OF SLF4846B. TRAFFIC POLICE CAME DOWN AND SEIZED MY SD CARD AND TOOK DOWN MY PARTICULARS.



**SINGAPORE  
POLICE FORCE**

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



T/20180221/2053

3 of 4

Report No. T/20180221/2053

## CONTINUATION OF REPORT

Driver			
Name	TAI HUI ZI, MABELENE		ID No. S9003386G
Related Vehicle	SJG2415T (Car)		Contact No. 90268747
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
Driver			
Name	AZMAN		ID No. S1425099I
Related Vehicle	SLF4846B (Car)		Contact No. 82473981
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 THE ABOVE MENTIONED TIME AND DATE

I WAS TRAVELLING ALONG CTE LANE 1, WHEN I ENTERED THE TUNNEL, I SAW THAT INFRONT OF ME THERE WAS A BRAKE LIGHT, SO I SLOWED DOWN, I STOPPED BEHIND SJG2415T, FROM THEN SLF4846B BANG ONTO THE REAR PORTION OF MY TAXI. AFTERWARDS WE ALL WENT DOWN FROM OUR VEHICLE TO EXCHANGE PARTICULARS. THE PASSENGER AND DRIVER OF SLF4846B WAS CONVEYED TO THE HOSPITAL. THE BACK PORTION OF SJG2415T HAD NO DAMAGE. I LOOKED AT THE FRONT PORTION OF MY CAR AND SAW NO DAMAGE AND ALL THE DAMAGE WAS ON THE REAR PORTION AND THE FRONT PORTION OF SLF4846B. TRAFFIC POLICE CAME DOWN AND SEIZED MY SD CARD AND TOOK DOWN MY PARTICULARS.