

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	27/03/2018 12:23
Date Of Accident	26/03/2018 14:10
Exact Location Of Accident	ALONG COMMONWEALTH DRIVE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	PA8675E
Insured/Policyholder	
Name Of Registered Owner	STAR INN LIMOUSINE SERVICE
Co Reg No	53059843D
Email Address	STAR.INN.LIMOUSINE@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96429747
Alternative Phone No	OFFICE-83097023

Vehicle Particulars

Manufacturer	TOYOTA
Model	REGIUS ACE-3.0 D DX (KDH201) (M)
Exact Purpose for which vehicle was being used at time of accident	SENDING STUDENT HOME
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5086936099-01
Cover Note Number	

Driver

Name of Driver	TOH BOCK TECK
NRIC No	S0704021J
Date Of Birth	29/11/1946
Occupation	OUTDOOR
Date Of Driving Pass	27/05/1964
Driving Experience	53 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96429747
Fax Number	
Contact Number	OTHERS-83097023
Email Address	STAR.INN.LIMOUSINE@GMAIL.COM

Address	BLK 204 CLEMENTI AVENUE 6 #12-05
Postcode	0512
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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?	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)	6
Passenger 1	NAME: : STUDENT GENDER: : FEMALE
Passenger 2	NAME: : STUDENT GENDER: : FEMALE
Passenger 3	NAME: : STUDENT GENDER: : FEMALE
Passenger 4	NAME: : STUDENT GENDER: : MALE
Passenger 5	NAME: : STUDENT GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	QUEENSTOWN N.P.C
Police Station Address	ROAD: 3 QUEENSWAY #01-03 , POSTCODE: 149073 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4719999 - FAX NO:
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

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SKC9804S
Vehicle Make/Model/Colour VOLKSWAGEN
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver IVAN WEE KIM PENG
NRIC/Passport Number S1809018Z
Contact Number 96355177
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver) 2

DETAILS OF INJURED PERSON 1

Name NUR FATINI ASYIRAH
Approximate Age
Injuries Sustain SLIGHT INJURY
Injured person in which vehicle? PA8675E
Were seat belts worn?
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

DETAILS OF INJURED PERSON 2

Name TAN SI HUI
Approximate Age
Injuries Sustain SLIGHT INJURY
Injured person in which vehicle? PA8675E
Were seat belts worn?
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

Sketch Plan

SKETCH PLAN

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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.



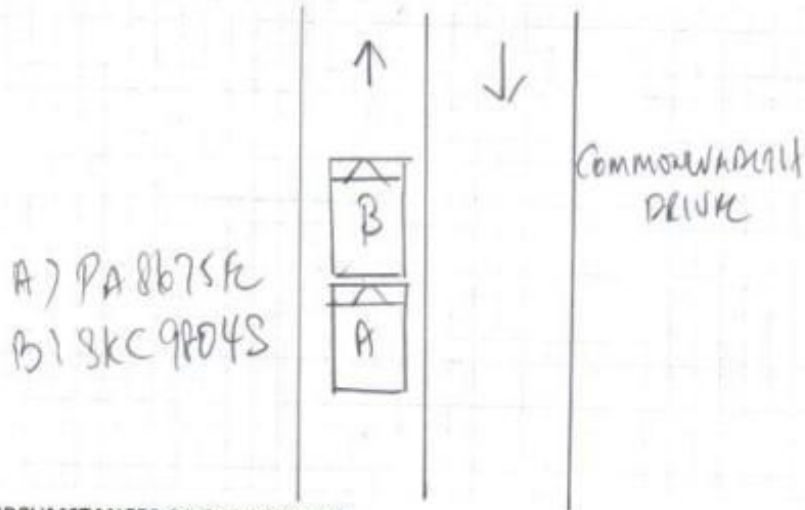
Policyholder's Signature
Date & Time:

H2
Driver's Signature
(If driver is not the policyholder)
Date & Time:

car 27/03/2018
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As per Police Report

1/20180327/2046

DECLARATION

I/We declare that 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.:

Sketch Plan #3



**SINGAPORE
POLICE FORCE**



T/20180327/2046

1 of 3

Police Station Of Origin:
Bukit Merah West N.P.C
500 Bukit Merah View #01-01 SINGAPORE
159682
Tel No: 1800-3779999

Report No: T/20180327/2046

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 27/03/2018 12:35	Vide Report No.:	Station Diary No.: 19
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Informant's Particulars

Name of Informant: TOH BOCK TECK			Address: APT BLK 204 CLEMENTI AVENUE 6 #12-05 SINGAPORE 120204	
ID Type / ID No.: NRIC NO / S0704021J			Contact No.:	Mobile: 83097023
Nationality: SINGAPORE CITIZEN			Home/Office:	
			Email:	
Sex: Male	Age: 71	Date of Birth: 29/11/1946	Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation: BUS DRIVER			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: 26/03/2018 14:10	Type of Location: Straight Road
Location: Along Road 1 COMMONWEALTH DRIVE				
Commonwealth Drive towards Commonwealth Avenue				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		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
PA8675E	Bus/Coach/Mi nibus				Slightly Damaged	5
SKC9804S	Car				Slightly Damaged	1

Details of Person Involved

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

Sketch Plan #4



**SINGAPORE
POLICE FORCE**



T/20180327/2046

Police Station Of Origin:
Bukit Merah West N.P.C
500 Bukit Merah View #01-01 SINGAPORE
159682
Tel No: 1800-3779999

2 of 3

Report No: T/20180327/2046

CONTINUATION OF REPORT

Driver			
Name	TOH BOCK TECK		ID No. S0704021J
Related Vehicle	NIL		Contact No. 83097023
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 26/03/2018 at about 1408hrs, I was driving my minibus (PA8675E) along Commonwealth Drive. At that point of time, there were 5 children inside my vehicle. I was travelling at about 20km/h on the said road towards Commonwealth Avenue.

Upon reaching the traffic light located at the said road, I did not notices that there was a vehicle (SKC9804S) which stopped at the said traffic. The said vehicle was waiting for the traffic light to turn green. As a result, my side mini bus collided to the rear of the said vehicle (SKC9804S). After the accident, I alighted my minibus (PA8675E) to make a check on the damages. I discovered that the bumper of my minibus was dented due to the impact. The rear bumper of the said vehicle (SKC9804S) was also dented. Subsequently, I went back to my minibus (PA8675E) to make a check on the condition of the children however no one complained of any pain or injuries suffered. After which, the driver of the said vehicle (SKC9804S) and I exchanged particulars before leaving the said place.

On the same day at about 1630hrs, 2 parents contacted my management (Star Inn Limousine Service) to report with regards to the injury of their daughter namely Nur Fatini Asyirah and Tan Si Hui however they did not mentioned the injury suffered. I wish to add that at the point of accident, no police or ambulance was activated.

Sketch Plan #5



SINGAPORE
POLICE FORCE



T/20180327/2046

3 of 3

Police Station Of Origin:
Bukit Merah West N.P.C
500 Bukit Merah View #01-01 SINGAPORE
159682
Tel No: 1800-3779999

Report No. T/20180327/2046

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:

D /
Cpl PHOON KOK WAI

Signature Of Informant:

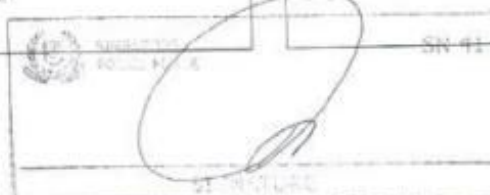
Signature Of Interpreter:
Not applicable

Date/Time:
27/03/2018 12:35

Officer In Charge Of Case:
TP / GIA /
Staff Sgt TANG SIEW PING
Contact No.: 65476430

Classification Of Case:

Authentication Stamp
NP158



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

