

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	09/04/2018 15:31
Date Of Accident	07/04/2018 22:00
Exact Location Of Accident	SENTOSA GATEWAY TWDS SENTOSA OUTSIDE OF ST JAMES
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHA7793Z
Insured/Policyholder	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768

Vehicle Particulars

Manufacturer	HYUNDAI
Model	I40
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	TAXI

Insurance Company

Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	MCOM0015
Cover Note Number	

Driver

Name of Driver	TOH KOK KUENG
NRIC No	S7714008E
Date Of Birth	23/05/1977
Occupation	OUTDOOR
Date Of Driving Pass	26/06/2002
Driving Experience	15 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
Email Address	RICHARDTOH77@GMAIL.COM

Address	601B #07-610 PUNGGOL CENTRAL
Postcode	822601
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - TAXI DRIVER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
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)	2
Passenger 1	NAME: : - GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
POLICE STATION NAME [OTHER]	PUNGGOL NPC
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

SEE POLICE REPORT.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLM4990E
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	SOH BENG CHEONG
NRIC/Passport Number	S1403921Z
Contact Number	96682178
Address	
Postcode	
Insurance Company Name	

Nature Of Damage RHT FRT

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

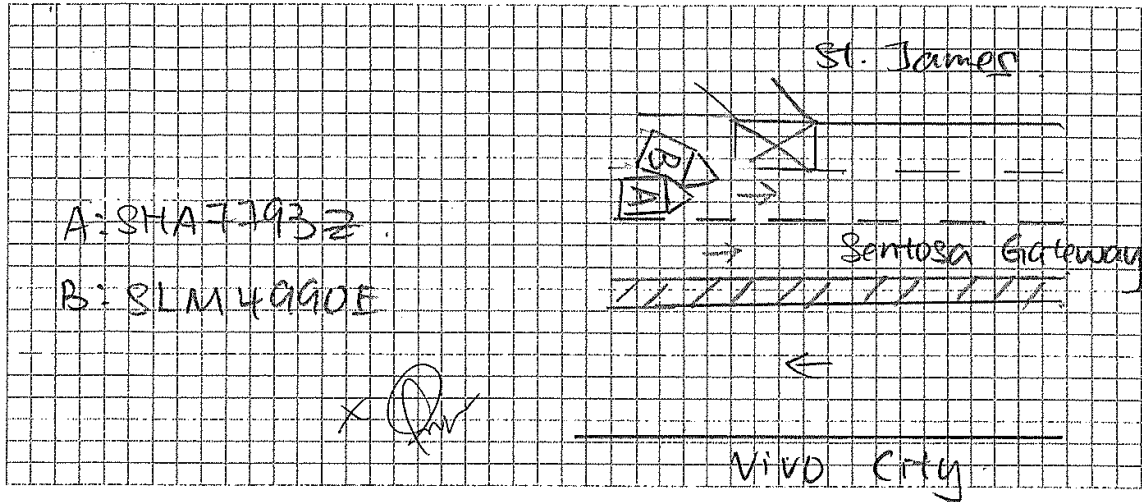
Name TOH KOK KUENG
Approximate Age 41
Injuries Sustain NECK,RHT HAND
Injured person in which vehicle? SHA7793Z
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

DETAILS OF INJURED PERSON 2

Name MR LIU
Approximate Age
Injuries Sustain NECK
Injured person in which vehicle? SHA7793Z
Were seat belts worn?
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

Sketch Plan Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As per attached Police report.

T/20180408/2115.

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD

CO. REG. NO. 199307821R

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.:

9/6/18



**SINGAPORE
POLICE FORCE**



T/20180408/2115

Police Station Of Origin:
Punggol N.P.C
21A Tebing Lane SINGAPORE 828837
Tel No: 1800-6049999

1 of 4

Report No. T/20180408/2115

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/04/2018 22:01		Vide Report No.:		Station Diary No.: 123	
Informant's Particulars					
Name of Informant: TOH KOK KUENG			Address: APT BLK 601B PUNGGOL CENTRAL #07-610 SINGAPORE 822601		
ID Type / ID No.: NRIC NO / S7714008E			Contact No.: Home/Office: Mobile: 96881510		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 40	Date of Birth: 23/05/1977	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Taxi driver			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 07/04/2018 22:00	Type of Location: Straight Road
Location: Along Road 1 SENTOSA GATEWAY SENTOSA GATEWAY TOWARDS SENTOSA, NEAR TO THE ROAD OUTSIDE ST. JAMES				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume: Moderate
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
SHA7793Z	Car					1
SLM4990E	Car					1

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

**POLICE FORCE**

T/20180408/2115

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2 of 4

Report No. T/20180408/2115

CONTINUATION OF REPORT

Passenger			
Name	MR LIU	ID No.	NIL
Related Vehicle	SHA7793Z (Car)	Contact No.	93537972
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	TOH KOK KUENG	ID No.	S7714008E
Related Vehicle	SHA7793Z (Car)	Contact No.	96881510
Hospital/Clinic	PROHEALTH MEDICAL GROUP @ PUNGGOL DAMAI PTE LTD	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	08/04/2018	Date Discharge	08/04/2018
No. of Days granted Medical Leave	04	Degree of Injury	NIL
Driver			
Name	SOH BENG CHEONG	ID No.	S1403921Z
Related Vehicle	SLM4990E (Car)	Contact No.	96682178
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 07/04/2018 at around 2200hours, I was sending one passenger to Resorts World Singapore. While travelling along Sentosa Gateway towards Sentosa, there is one vehicle SLM4990E was also travelling on my left. I wish to inform that at that point of time I was at the middle lane.

While I was travelling along Sentosa Gateway near to St. James, suddenly the vehicle SLM4990E on my left swerve to my lane. The right side rear bumper of SLM4990E collided on my front left tyre area. I was unable to avoid the accident as it happened too fast.

Subsequently, we stopped at the road side and exchanged particulars. At that point of time, there is no one injured. However, I did feel unwell. I did not seek for immediate medical attention as the pain on my body is still bearable. My car was also being tow away.



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3 of 4

Report No. T/20180408/2115

CONTINUATION OF REPORT

The next following day I feel that the pain is unbearable as such I seek for medical attention and was given 4 days of medical certificate. I wish to inform that there is in-built car camera in my vehicle and I am working under Comfort Delgro Company.



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T/20180408/2115

4 of 4

Report No. T/20180408/2115

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:
F /
Staff Sgt TAY HUEI JING

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
08/04/2018 22:01

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

Classification Of Case:

SN 085

Authentication Stamp
NP168






Signature:

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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.

 COMFORT TRANSPORTATION PT. LTD. CO. REG. NO. 199303821R Policyholder's Signature Date & Time:	 Driver's Signature (if driver is not the policyholder) Date & Time: 09/04/18	 Reporting Centre Personnel's Signature Name: NRIC/FIN No.: a/4/18
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Accident Photo



Accident Photo



A blue Toyota Prius is shown from a front-three-quarter view. It has a black taxi sign on the roof and a colorful graphic on the side that includes the word "CONCEPT" and some abstract shapes. The car is parked on a paved surface, and a white car is partially visible in the background.

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

