

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 | 13/04/2018 14:41 |
| Date Of Accident | 12/04/2018 10:15 |
| Exact Location Of Accident | PUNGGOL EAST TWDS KPE |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------------------|
| Vehicle Registration Number | SJJ8587A |
| Insured/Policyholder | |
| Name Of Registered Owner | SOO KIN FOONG |
| NRIC No | S7703029H |
| Email Address | NOEMAIL |
| Mobile Phone No | (LOCAL) +65-94596111 |
| Alternative Phone No | OTHERS-94596111 |

Vehicle Particulars

| | |
|--|-------------|
| Manufacturer | HONDA |
| Model | FIT |
| 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 | CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | DMPCSN3022611700 |
| Cover Note Number | |

Driver

| | |
|----------------------|-----------------------|
| Name of Driver | SOO KIN FOONG |
| NRIC No | S7703029H |
| Date Of Birth | 17/01/1977 |
| Occupation | OUTDOOR |
| Date Of Driving Pass | 26/03/1998 |
| Driving Experience | 20 YEARS AND 0 MONTHS |
| Gender | MALE |
| Mobile Number | (LOCAL) +65-94596111 |
| Fax Number | |
| Contact Number | OTHERS-94596111 |
| Email Address | NOEMAIL |

| | |
|---|----------------------------------|
| Address | BLK 603B PUNGGOL ROAD #08-722 |
| Postcode | 822603 |
| Was driver an employee of the Insured's Company | NO |
| If No, Relationship of the Driver with the Insured | OWNER |
| Vehicle Registration Number of Driver's Own Vehicle | - - - |
| Insurance Company of Driver's Own Vehicle | - - - |

General Information of the Accident

| | |
|--------------------|-----------------|
| Type Of Accident | CHAIN COLLISION |
| 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) | 1 |

Details of Police Action

| | |
|---|--|
| Was the accident reported to the police? | YES |
| If Yes, Please state which Police Station | |
| Police Station Name | PUNGGOL N.P.C |
| Police Station Address | ROAD: 21A TEBING LANE , POSTCODE: 828837 , COUNTRY: SINGAPORE |
| Police Station Contact | TEL NO: - FAX NO: |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20180412/2137

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 | GBG2833P |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | COMMERCIAL VEHICLE |
| Name of Driver | NUR AZMIL SHAH PUTRA BIN NORAZMAL |
| NRIC/Passport Number | S8421710G |
| Contact Number | 91628797 |
| Address | |
| Postcode | |
| Insurance Company Name | |

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SJX1077C

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver POH KIM PENG

NRIC/Passport Number S7040582B

Contact Number 98627945

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name SOO KIN FOONG

Approximate Age

Injuries Sustain SLIGHT

Injured person in which vehicle? SJJ8587A

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? NO

Address

Postcode

Accident Sketch Plan

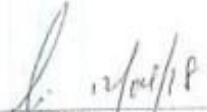
SKETCH PLAN


IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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: 12/01/18


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


Reporting Centre Personnel's Signature
Name: 13/04/18
NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN

PUNAGOL EAST TOWNS KPE



A → SJJ 2587A
B → GBB 2833P
C → SJX 1077C

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to police report - (Report No. 7/2018 O/H/J/2137)

DECLARATION

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

[Signature] 13/04/18 12:40hrs

Policyholder's Signature
Date & Time:

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

[Signature] 13/04/18
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Individual Statement



SINGAPORE
POLICE FORCE



T/20180412/2137

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

3 of 4
Report No. T/20180412/2137

CONTINUATION OF REPORT

Brief Details.

On 12/04/2018 at about 1015hrs, I was driving my car one red colour Honda fit bearing plate number SJJ8587A along the left lane of Punggol East queuing to go towards the slip road to KPE. The traffic was slow moving and at times stationary. When I was in the stationary position about to move off, I suddenly felt a collision impact from the back.

I then realized that a white Toyota Hiace van bearing plate number GBG2833P had collided to the rear of my car. I went out of my car to make a check and discovered that it was a chain collision. There was a third car one black colour Volkswagen bearing plate number SJX1077C which had collided to the rear of the van. I then made a check on the drivers of the 2 vehicles and there was no report injuries at scene, as such no ambulance or police was called.

All 3 parties then exchanged particulars and subsequently left the scene. After leaving the scene, I felt some soreness in my body as such went to see a doctor. I was given 3 days MC. I wish to state that the damages to my vehicle was that my rear bumper and rear door was dented with scratches, rear windscreen was shattered from the impact, and rear lights were also broken.

I have a in-vehicle camera installed at the front of my car.

Accident Photo



Accident Photo



Accident Photo



Accident Photo





Identification Card



Police Report



**SINGAPORE
POLICE FORCE**



12018041202137

1 of 4

Police Station Of Origin
Punggol N.P.C.
21A Tebing Lane SINGAPORE 828837
Tel No: 1800-6049888

Report No: 12018041202137

REPORT OF A TRAFFIC ACCIDENT

| | | |
|---|-------------------|--------------------------|
| Date/Time Report Made 12/04/2018 17:50 | Video Report No.: | Station Diary No.: 49 |
|---|-------------------|--------------------------|

Informant's Particulars

| | | | | | |
|--|------------|------------------------------|---|--|----------------------------|
| Name of Informant: SOD KIN FOONG | | | Address: APT BLK 603B PUNGGOL ROAD #05-722 SINGAPORE 822803 | | |
| ID Type / ID No.: NRIC NO / S7703029H | | | Contact No.: Home/Office: Mobile: 04586111 | | |
| Nationality: SINGAPORE CITIZEN | | | Email: | | |
| Sex: Male | Age: 41 | Date of Birth: 17/01/1977 | Type of Informant: Driver | | |
| Race: Chinese | | | Language: English | | Institution / School Name: |
| Occupation: SITE MANAGER | | | Driving Licence Information: Class: 3 | | Date of Expiry: |

General Information of the Accident

| | | | | |
|---|------------------|------------------------------------|--|-------------------------------------|
| Type of Accident: | Injury Others | Drink Drive No | Date/Time of Accident: 12/04/2018 10:15 | Type of Location: Straight Road |
| Location: Along Road 1 Traveling Toward Road 2 PUNGGOL EAST KALLANG PAYA LEBAR EXPRESSWAY Punggol East towards exit to KPE beside the bus stop (near to lamp post 10) Lamp Post Number: 10 | | | | |
| Weather: Sunny | | Road Surface: Dry | | Road Speed Limit: |
| Traffic Flow: One Way | | Traffic Control: Not Controlled | | 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 Passen |
|-------------|------|----------------|-----------------------|-------|----------------------|--------------|
| GDG2833P | Van | TOYOTA | Hiace | White | Slightly Damaged | 0 |
| 9JJ8587A | Car | HONDA | FIT 1.3G SKYROOF A | Red | Seriously Damaged | 0 |
| SJX1077C | Car | VOLKSWAGO N | Golf | Black | Seriously Damaged | 0 |

Police Report



**SINGAPORE
POLICE FORCE**

Police Station Of Origin
Punggol N.P.C.
21A Tebing Lane SINGAPORE 028037
Tel No: 1800-0045009



1001004122137

2 of 4

Report No: 1001004122137

CONTINUATION OF REPORT

| Details of Vehicle Insurance | | Insurance No | Effective | Expiry Date |
|------------------------------|---|----------------|------------|-------------|
| Vehicle No | Insurance Company | DMPCSN30276117 | 26/03/2017 | 25/09/2018 |
| SJ35587A | CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD. | 00 | | |

| Details of Person Involved | | | |
|-----------------------------------|-----------------------------------|--|-----------------------------------|
| Any Pedestrian Involved: No | | Use of Pedestrian Crossing: NA | |
| No. of Pedestrians Injured: NIL | | | |
| Driver | | | |
| Name | NUR AZMIL SHAH PUTRA BIN NORAZMAL | ID No. | S0421710G |
| Related Vehicle | GBG2833P (Van) | Contact No. | 91628787 |
| 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 | SOO KIN FOONG | ID No | S7703029H |
| Related Vehicle | SJ35587A (Car) | Contact No. | 94598111 |
| Hospital/Clinic | POINT MEDICAL GROUP (JURONG POINT) | Class of Driving Licence & Expiry Date | Class: 3 Date of Expiry: NIL |
| Date Treatment | 12/04/2018 | Date Discharge | 12/04/2018 |
| No. of Days granted Medical Leave | 03 | Degree of Injury | Slight |

| | | | |
|-----------------------------------|----------------|--|-----------------------------------|
| Driver | | | |
| Name | POH KIM PENG | ID No. | S7040562B |
| Related Vehicle | SJX1077C (Car) | Contact No. | 90627945 |
| 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 |

Police Report



SINGAPORE
POLICE FORCE



T/20180412/2137

Police Station Of Origin:
Punggol N.P.C.
21A Tebing Lane SINGAPORE 828837
Tel No: 1800-6049899

3 of 4
Report No. T/20180412/2137

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I have a in-vehicle camera installed at the front of my car.

Police Report



**SINGAPORE
POLICE FORCE**



T/2016041202137

4 of 4

Police Station Of Origin:
Punggol N.P.C.
21A Telok Lane SINGAPORE 820637
Tel No: 1800-6049899

Report No. T/2016041202137

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 ANG PEI YING, AGNES

Signature Of Interpreter
Not applicable

Signature Of Informant

Date/Time:
12/04/2018 17:50

Officer In Charge Of Case:
TP / AEIT /
SI ANG YI TING, STEPHANIE
Contact No: 05476414

Classification Of Case:

181 065

Authentication Stamp
since



Signature

Singapore Police Force