

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	16/04/2018 10:36
Date Of Accident	13/04/2018 23:30
Exact Location Of Accident	GEYLANG RD TWDS PIE(TUAS)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGE2662S
Insured/Policyholder	
Name Of Registered Owner	M/S YM CAR LEASING PTE LTD
Co Reg No	201308014C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-64687555

Vehicle Particulars

Manufacturer	DAIHATSU
Model	J210RG-GQXFW
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	THIRD PARTY
Fleet Policy	NO
Policy Number	DMHCSN1771461700
Cover Note Number	-

Driver

Name of Driver	TANG XIN YI
NRIC No	S9810924B
Date Of Birth	07/04/1998
Occupation	INDOOR
Date Of Driving Pass	15/09/2017
Driving Experience	0 YEAR AND 6 MONTH
Gender	FEMALE
Mobile Number	(LOCAL) +65-97604897
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 549 SERANGOON NORTH AVE 3 #14-27
Postcode	550549
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)	4
Passenger 1	NAME: : CHEE HENG CHIN GENDER: : MALE
Passenger 2	NAME: : GOH JIA KANG DARIUS GENDER: : MALE
Passenger 3	NAME: : CHAN LIH LING GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	HONG KAH NORTH NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 370 BUKIT BATOK STREET 31 , POSTCODE: 650370 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5679999 - FAX NO: 65652508
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?	NO
Was there any audio recorded?	NO

Details of Witness 1

Name	WANG JUN HONG
Phone Number	
Email Address	

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBC424X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
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	TANG XIN YI
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SGE2662S
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

DETAILS OF INJURED PERSON 2

Name	CHEE HENG CHIN
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SGE2662S
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

DETAILS OF INJURED PERSON 3

Name	GOH JIA KANG DARIUS
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SGE2662S
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

DETAILS OF INJURED PERSON 4

Name	CHAN LIH LING
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SGE2662S
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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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.



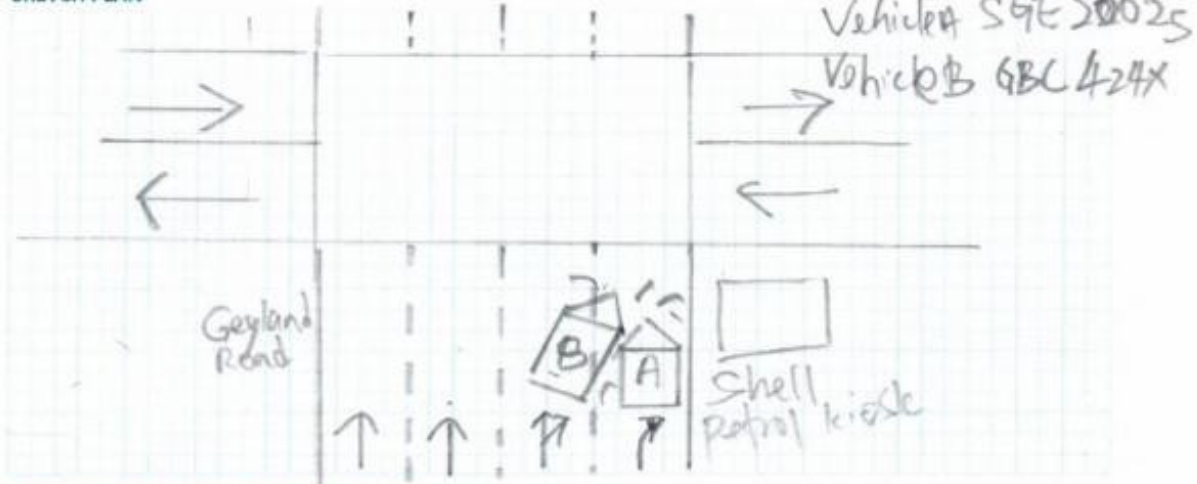
Policyholder's Signature
Date & Time:

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



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Traffic Police Report

You had been advised by workshop that in the event that you wish to claim against your own policy (OD claim), there is a **Fourteen (14) days clause** whereby the claim must be made within the stipulated timeframe from the day of occurrence.

Reporting Only
Claim OD
Claim TP
Claim OD / TP at other workshop

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/FIN No.:

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180414/2075

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Report No. T/20180414/2075

Police Station Of Origin:
Hong Kah North NPP
370 Bukit Batok Street 31 #01-201
SINGAPORE 650370
Tel No: 1800-5679999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 14/04/2018 12:52	Vide Report No.:	Station Diary No.: 11
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Informant's Particulars

Name of Informant: TANG XIN YI			Address: APT BLK 549 SERANGOON NORTH AVENUE 3 #14-27 SINGAPORE 550549	
ID Type / ID No.: NRIC NO / S9810924B			Contact No.: Home/Office:	Mobile: 97604897
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Female	Age: 20	Date of Birth: 07/04/1998	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: STUDENT*			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: 13/04/2018 23:30	Type of Location: Straight Road
Location: Along Road 1 GEYLANG ROAD				
Towards PIE (tuas) near Shell Petrol Station				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBC424X		TOYOTA		White		0
SGE2662S	Car	DAIHATSU		White	Slightly Damaged	3

Details of Person Involved

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

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180414/2075

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Police Station Of Origin:
Hong Kah North NPP
370 Bukit Batok Street 31 #01-201
SINGAPORE 650370
Tel No: 1800-5679999

Report No: T/20180414/2075

CONTINUATION OF REPORT

Passenger			
Name	Chee Heng Ching	ID No.	S9625479B
Related Vehicle	SGE2662S (Car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	14/04/2018	Date Discharge	14/04/2018
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Passenger			
Name	Goh Jia Kang Darius	ID No.	S9805194E
Related Vehicle	SGE2662S (Car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	14/04/2018	Date Discharge	14/04/2018
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Driver			
Name	TANG XIN YI	ID No.	S9810924B
Related Vehicle	SGE2662S (Car)	Contact No.	97604897
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	14/04/2018	Date Discharge	14/04/2018
No. of Days granted Medical Leave	05	Degree of Injury	Slight
Passenger			
Name	Chan Lih Ling	ID No.	S9801792E
Related Vehicle	SGE2662S (Car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	14/04/2018	Date Discharge	14/04/2018
No. of Days granted Medical Leave	03	Degree of Injury	Slight

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180414/2075

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Report No. T/20180414/2075

Police Station Of Origin:
Hong Kah North NPP
370 Bukit Batok Street 31 #01-201
SINGAPORE 650370
Tel No: 1800-5679999

CONTINUATION OF REPORT

Driver			
Name	Ng Kim Guan		ID No. S13321321
Related Vehicle	NIL		Contact No. 81135080
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 13/04/2018 at about 2330hrs, I was driving my vehicle, SGE2662S along Geylang road, towards PIE (Tuas) on the first lane on of four lane road. Suddenly a white lorry, GBC424X made a lane change from second lane to first lane, without signaling, and hitting onto my vehicle's front left bumper. The vehicle did not stop and continued driving for about 50 meters. I then press on my vehicle's horn to alert the driver, and only then he had stopped 50 meters in front of my car. The driver informed that he thought that I was slowing down to as why he made the lane change. My vehicle's damages are dents on the left front area of the car, left side mirror came off and the front bumper came off. While the vehicle, GBC424X does not have any visible damages. We then exchanged particulars. I had seek medical attention and was given 5 days medical leave, while my passengers were given 3 days medical leave. There is a witness of this incident, namely, Wang Jun Hong, S9705149F, who was at the petrol Kiosk during the incident, which his details was included in the report.

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20180414/2075

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Police Station Of Origin:
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SINGAPORE 650370
Tel No: 1800-5679999

Report No. T/20180414/2075

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:

J /

Sgt 2 MUHAMMAD HANIS BIN IDRIS

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AETM
SI DZULHAIRIE BIN RAMLI
Contact No: 65476220

SN 116

Authentication Stamp
NP 168

Singapore Police Force

Signature Of Informant:

Date/Time:

14/04/2018 12:52

Classification Of Case:

DRIVING DOC



DRIVING DOC

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(S)

	EFFECTIVE DATE
Class 3 Motor cars with unladen weight \leq 3000kg with \leq 7 passengers, exclusive of driver; and other motor vehicles with unladen weight \leq 2500kg	15 Sep 2017

NP 426A

Licence No: S98109248



5184007



NRIC No: S98109248



Date of issue
04-06-2013

Address
APT BLK 549 SERANGOON NORTH AVENUE 3
#14-27
SINGAPORE 550549

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

