MCD618052593 / ComfortDelGro Engineering Pte Ltd - Loyang
ENTRY DATE & TIME: 21/04/2018 09:45
SUBMITTED BY: Catherine Por Moy Juan

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 witholding 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	21/04/2018 09:45
Date Of Accident	20/04/2018 19:45
Exact Location Of Accident	ANG MO KIO AVE 6 TWDS YISHUN B4 YIO CHU KANG
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SHD3877B
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	SONATA
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	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	D-18088936MFSH
Cover Note Number	
Driver	
Name of Driver	KENG POH SENG
NRIC No	S0064826D
Date Of Birth	12/02/1946
Occupation	OUTDOOR
Date Of Driving Pass	27/06/1966
Driving Experience	51 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	
Fax Number	
Contact Number	
EMail Address	YENGPHENG@GMAIL.COM

Address	207 #07-1031 ANG MO KIO AVENUE 1
Postcode	560207
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	COLLISION - HEAD TO REAR
Weather Conditions	RAINING
Road Surface	WET

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)	3
Passenger 1	NAME: : - GENDER: : FEMALE
Passenger 2	NAME: : - GENDER: : FEMALE

Details of Police Action

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

Circumstances of Accident

SEE ATTACH.

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	SKF8099B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LEE CHOON YIM
NRIC/Passport Number	S8030892B
Contact Number	
Address	

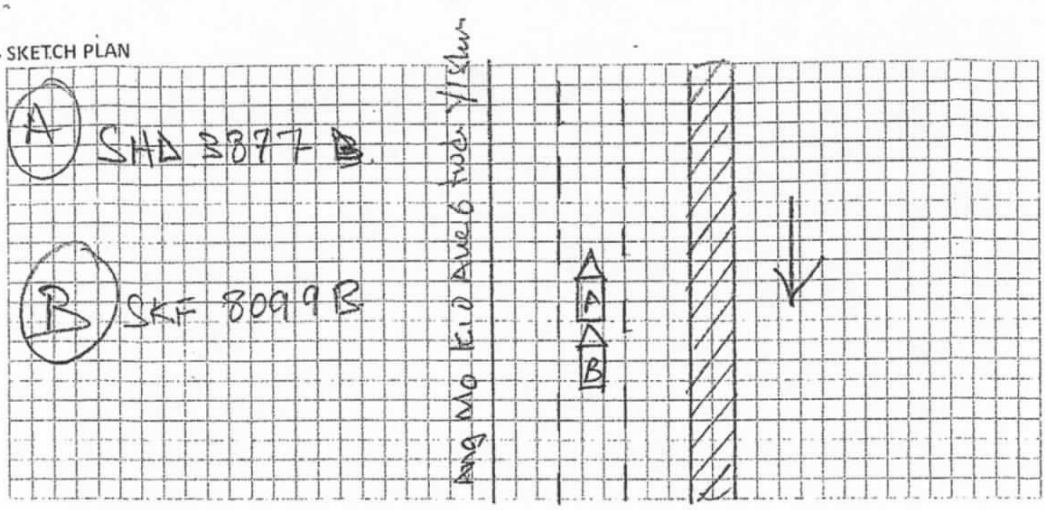
Postcode	
Insurance Company Name	
Nature Of Damage	FRT
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	KENG POH SENG
Approximate Age	72
Injuries Sustain	NECK,BACK
Injured person in which vehicle?	SHD3877B
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Sketch Plan Pg. 1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Vehicles involved:

1) SHD3877B – Comfort taxi (Complainant's vehicle)
2) SKF8099B (Other party's vehicle)

On the 20/04/2018 at around 1945hrs, I was driving my taxi (SHD3877D) ferrying two passengers along Ang Mo Kio Avenue 6 (towards Lentor Ave) and at that time, it was raining and the road surface was wet. There was also a build-up of cars ahead of me to which I slowed down. Not long later, I felt an impact on the rear of my car to which I realised that a car behind me (SKF8099B) had hit onto the rear of my taxi. Both of us then alighted to exchange particulars. No injuries were reported earlier. No ambulance or police officers attended to the incident either.

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199303821R

Policyholder's Signature Date & Time:	Driver's Signature (If driver is not the policyholder)	Reporting Centre Personnel's Signature Name:
		21/Apr/18

Annex D

NOTICE OF REPORTING

This is to confirm that **Keng Poh Seng,** NRIC: **S0064826D, HP: 9831 6106** has reported to the Police a non-injury traffic accident which occurred along **Ang Mo Kio Avenue 6 (towards Lentor Ave) before the junction forming Yio Chu Kang Road (near lamppost #129) on 20/04/2018 at about 1945hrs** involving the following vehicles:

Vehicles involved:

1) SHD3877B – Comfort taxi (Complainant's vehicle)
2) SKF8099B (Other party's vehicle)

On the 20/04/2018 at around 1945hrs, I was driving my taxi (SHD3877D) ferrying two passengers along Ang Mo Kio Avenue 6 (towards Lentor Ave) and at that time, it was raining and the road surface was wet. There was also a build-up of cars ahead of me to which I slowed down. Not long later, I felt an impact on the rear of my car to which I realised that a car behind me (SKF8099B) had hit onto the rear of my taxi. Both of us then alighted to exchange particulars. No injuries were reported earlier. No ambulance or police officers attended to the incident either.

I am therefore lodging this report to update the Traffic Police and also for my subsequent insurance claims.

If this accident was reported to the Police within 24 hours of its occurrence, then he/~~she~~ has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: **Stn Insp Jacky Kwan**
Date: **20/04/2018** Time: **2230hrs**
S/D Ref: #171
Police Post/ Unit: **Bishan Neighbourhood Police Centre**

BISHAN NPC
20 BISHAN STREET 23
SINGAPORE 579757
TEL: 1800-5529999