

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	27/06/2018 09:55
Date Of Accident	26/06/2018 17:25
Exact Location Of Accident	ALONG SELETAR WEST LINK TWDS YISHUN AVE 8
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBE3192J
Insured/Policyholder	
Name Of Registered Owner	800 LANDSCAPE PTE LTD
Co Reg No	200919664D
Email Address	SUPER800@SINGNET.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-63663800

Vehicle Particulars

Manufacturer	NISSAN
Model	CABSTAR-3.0 5M/T ABS 2DR 2WD EURO 5 (A)
Exact Purpose for which vehicle was being used at time of accident	ON THE WAY BACK TO OFFICE
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5074859309-02
Cover Note Number	01/10/17 - 30/09/18

Driver

Name of Driver	TAN HOCK SENG
NRIC No	S1552483I
Date Of Birth	26/03/1962
Occupation	OUTDOOR
Date Of Driving Pass	17/06/1982
Driving Experience	36 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92359800
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address BLK 249 YISHUN AVE 9 #10-187
 Postcode 760249
 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 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. YES
 Number of Passengers (Including Driver) 6

Passenger 1 NAME: : ASAFUL (97381800)
 GENDER: : MALE
 Passenger 2 NAME: : SARAVANA (83560668)
 GENDER: : MALE
 Passenger 3 NAME: : RAKIBUL (82106708)
 GENDER: : MALE
 Passenger 4 NAME: : SALAM (91968516)
 GENDER: : MALE
 Passenger 5 NAME: : RAKIBUL (UNKNOWN)
 GENDER: : MALE

Details of Police Action

Was the accident reported to the police? YES
 If Yes, Please state which Police Station
 Police Station Name YISHUN NORTH NEIGHBOURHOOD POLICE CENTRE
 Police Station Address ROAD: 31 YISHUN CENTRAL , POSTCODE: 768827 , COUNTRY: SINGAPORE
 Police Station Contact TEL NO: 1800-8529999 - FAX NO: 68522299
 Was notice of intended Prosecution given? NO
 If Yes, against whom?

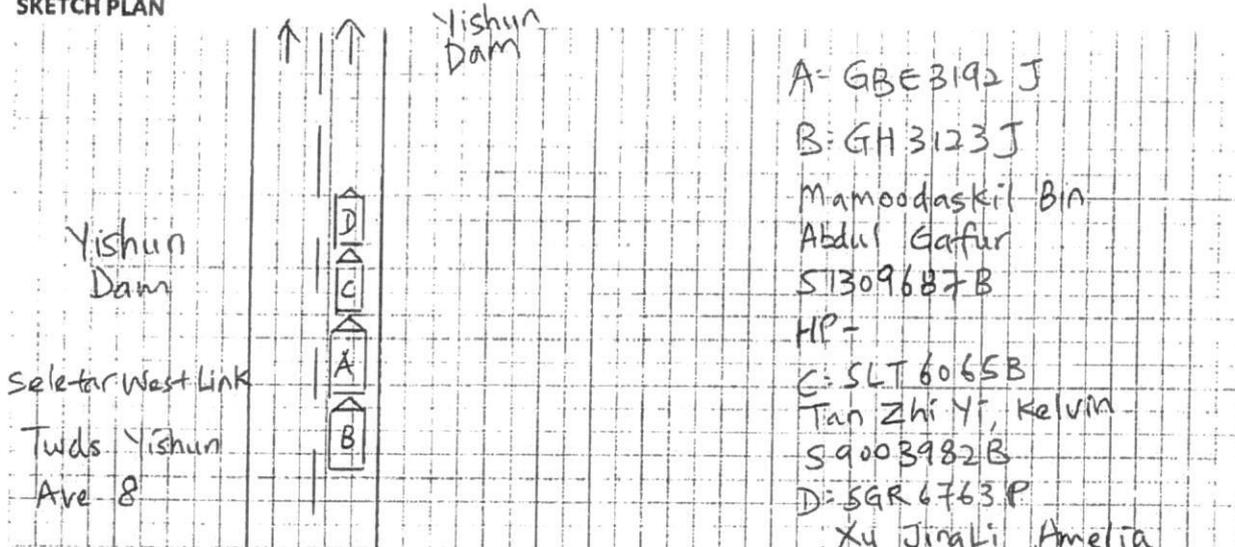
Circumstances of Accident

REFER TO POLICE REPORT ATTACHED.

Attachment(s)

Are accident photos available for attachment? YES
 Was there any video captured by Car Camera? YES

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report No: T/20180627/2043

Note : Please note that your insurer may have 14days Time Frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check with your policy for more information.

DECLARATION

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

Policyholder's Signature
Date & Time: 27/6/18, 2.22PM

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

Reporting Centre Personnel's Signature
Name: (YS)
NRIC/FIN No.: 27/6/18

() Claim Own Policy (X) Claim Third Party () Reporting Only
() Claim OD/TP at other workshop ()

SKETCH PLAN

VEHICLE NO.: GBE 3192 J
INSURER : NTUC
DATE & TIME: 26/6/18 @ 17:30

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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: 27/6/18, @ 2:21 PM


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



 Reporting Centre Personnel's Signature
 Name: (YS)
 NRIC/FIN No.: 27/6/18



**SINGAPORE
POLICE FORCE**



T/20180627/2043

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

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Report No. T/20180627/2043

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 27/06/2018 11:17		Vide Report No.:		Station Diary No.: 49	
Informant's Particulars					
Name of Informant: TAN HOCK SENG			Address: APT BLK 249 YISHUN AVENUE 9 #10-187 SINGAPORE 760249		
ID Type / ID No.: NRIC NO / S1552483I			Contact No.:		Mobile: 92359800
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 56	Date of Birth: 26/03/1962	Type of Informant: Driver		
Race: Chinese		Language: English		Institution / School Name:	
Occupation: SUPERVISOR*			Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury	Drink Drive:	Date/Time of Accident:	Type of Location:
		No	26/06/2018 17:30	Straight Road
Location: Along Road 1 SELETAR WEST LINK				
Along Seletar Westlink towards Yishun Avenue 8 beside PUB Building				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 50 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Chain accident				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBE3192J	Company Truck	NISSAN	CABSTAR 3.0 5M/T ABS 2DR 2WD EURO 5	White	Seriously Damaged	5
GH3123J	Truck	TOYOTA	DYNA 150 D	Silver	Seriously Damaged	0
SGR6763P	Car	TOYOTA	COROLLA ALTIS 1.6 AUTO	Silver	Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



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Report No. T/20180627/2043

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLT6065B	Car	HONDA	CIVIC 1.8G A	White	Seriously Damaged	1

Details of Person Involved

Any Pedestrian Involved: No

No. of Pedestrians Injured: NIL

Use of Pedestrian Crossing: NA

Driver			
Name	TAN HOCK SENG	ID No.	S15524831
Related Vehicle	GH3123J (Truck)	Contact No.	92359800
Hospital/Clinic	KHOO TECK PUAT HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	26/06/2018	Date Discharge	26/06/2018
No. of Days granted Medical Leave	03	Degree of Injury	Slight

Brief Details.

On the 26 June 2018 at about 5.30pm, I was driving my company vehicle (lorry) bearing registration number: GBE3192J, along Seletar Westlink towards Yishun Avenue 8 beside PUB Building. There was five other of my company workers as passengers inside this vehicle two workers were seated in front beside me and another three workers behind. This is two lane one way road. I was driving on the right lane.

Suddenly during driving, I felt an impact and both me and other workers which seated in front beside me jerked forward. This impact also caused my vehicle to collide onto the rear of vehicle registration number: SLT 6065B, and this impact also caused the vehicle registration: SLT6065B, front part to collide onto the rear of vehicle registration number: SGR6763P.

Upon alighting from the vehicle I was driving, I realized the vehicle registration number: GH3123J that was driving behind my vehicle front part of the vehicle had collided onto the rear of my truck. Ambulance and Traffic Police was at scene also, but nobody was conveyed to hospital.

I had gone to see doctor after the accident for neck pain at Khoo Teck Puat Hospital and received three days medical leave (MC No: KHANE181381154) period 27/06/2018 to 29/06/2018

Particulars of the workers inside the truck I was driving and the other parties vehicles as follow:
Passengers of vehicle (truck) GBE3192J

1. Asaful (97381800)
2. Saravana (83560668)
3. Rakibul (82106708)
4. Salam (91968516)
5. Rakibul (contact unknown)

Other vehicles:

(a) GH3123J

Driver: Mamoodaskil Bin Abdul Gafur
S1309687B



**SINGAPORE
POLICE FORCE**



T/20180627/2043

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

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Report No. T/20180627/2043

CONTINUATION OF REPORT

DOB: 22/02/1957

Vehicle serious damage at the front cabin area .

(b) SLT6065B

Driver: Tan Zhi Yi, Kelvin

S9003982b

DOB: 06/02/1990

Rear side serious damage.

(b) SGR6763P

Driver: Xu Jingli Amelia

S8418323G

DOB: 21/06/1984

Rear side slight damage.



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31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999



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Report No. T/20180627/2043

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 /
SSI ANDY LUCAS

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
27/06/2018 11:17

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

Classification Of Case:

Authentication Stamp
NP168

Singapore Police Force