SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Date Of Driving Pass

Driving Experience

Mobile Number Fax Number Contact Number

EMail Address

Gender

- 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.

	ACCIDENT STATEMENT			
Date Of Report	27/06/2018 18:30			
Date Of Accident	26/06/2018 20:15			
Exact Location Of Accident	ALONG PIE TOWARDS CHANGI			
Country/State of Loss	SINGAPORE			
	DETAILS OF OWN VEHICLE			
/ehicle Registration Number	SLL7112J			
nsured/Policyholder				
Name Of Registered Owner	GRAB RENTALS PTE LTD			
Co Reg No	201617200G			
Email Address	NOEMAIL			
Mobile Phone No				
Alternative Phone No	OFFICE-66550005			
/ehicle Particulars				
Manufacturer	MAZDA			
Model	3 4-DOOR SEDAN 1.5L SP.6EAT			
Exact Purpose for which vehicle was being used at ime of accident	HIRE AND REWARD			
Are you claiming under your own insurance policy or repair to your vehicle?	NO			
No, Please state action to be taken	THIRD PARTY			
/ehicle Category	PRIVATE HIRE			
nsurance Company				
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.			
ype Of Coverage	COMPREHENSIVE			
Fleet Policy	YES			
Policy Number	A29069766MKF			
Cover Note Number				
Driver				
Name of Driver	ALVIN HAN JUNQI			
NRIC No	S9421432G			
Date Of Birth	04/06/1994			
Occupation	on OUTDOOR			

23/01/2014

MALE

NOEMAIL

4 YEARS AND 5 MONTHS

(LOCAL) +65-96981615

APT BLK 320 JURONG EAST STREET 31 #13-72 SINGAPORE 600320

Address

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

OTHER - HIRER

General Information of the Accident

Type Of Accident CHAIN COLLISION

Weather Conditions CLEAR DRY Road Surface

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

Number of Passengers (Including Driver)

ambulance?

NO YES

NO

YES

NO

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

Passenger 1

NAME: · P1

GENDER:

: FEMALE

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

POLICE STATION NAME [OTHER]

JURONG EAST N.P.C.

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

REFER TO POLICE REPORT NO:T/20180627/2032 LODGED AT JURONG EAST N.P.C. ON THE 26/06/2018 AT ABOUT 2015HRS, I WAS TRAVELLING ALONG PIE TOWARDS CHANGI WITH A CHINESE FEMALE PASSENGER WHOM I HAD FETCHED AT COMMONWEALTH AREA EARLIER AND TO SEND HER TO BEDOK. AS I WAS DRIVING ON THE MOST RIGHT LANE, THE TRAFFIC WAS QUITE HEAVY BUT DOES NOT SLOW DOWN THE TRAFFIC. SUBSEQUENTLY, THE VEHICLE INFRONT OF MY VEHICLE SLG5155A JAMMED BREAK WHICH CAUSED ME TO JAM BREAK BUT I BREAK IN TIME. AS I PRESSED BREAK ON MY VEHICLE, A BLACK MERCEDES HAD HIT ONTO MY VEHICLE FROM THE REAR SIDE. WHEN I ALIGHTED FROM THE VEHICLE. I SPOTTED ANOTHER VEHICLE HAD HIT ONTO THE BLACK MERCEDES WHICH IS A COMFORT DELGRO TAXI. MY FEMALE PASSENGER CLAIMED NOT INJURED AND I SUFFERED SLIGHT PAIN ON MY BACK I THEN WENT TO SEE THE PRIVATE DOCTOR AT CENTRAL 24HR CLINIC FOR FURTHER CHECK FOR THE SLIGHT PAIN ON MY BACK, THE DOCTOR GAVE ME 3 DAYS OF MC FROM 26/06/2018 TILL 28/06/2018. THE VEHICLE I AM DRIVING IS UNDER THE GRAB RENTAL AND DAMAGES TO THE VEHICLE ARE THE REAR SIDE AND CENTER. THE ACCIDENT CAUSES MULTIPLE VEHICLES INTO COLLISION.

Attachment(s)

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

Remarks/ Reasons: RETRIEVING

Was there any audio recorded?

DETAILS OF OTHER VEHICLE PROPERTY 1

SKH3315A Vehicle Registration Number

MERCEDES BENZ/C 180 BLUEEFFICIENCY Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

Name of Driver

ANG CHOON KWANG

NRIC/Passport Number

S1583240A

TAXI

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

UNKNOWN

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category Name of Driver

UNKNOWN

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name ALVIN HAN JUNQI

Approximate Age Injuries Sustain

Injured person in which vehicle?

SLL7112J

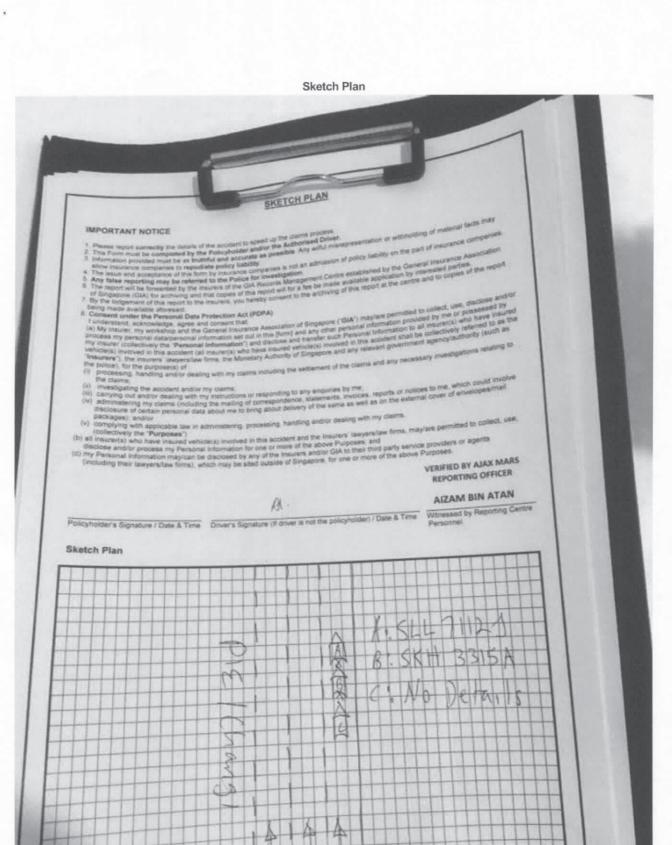
Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

Address

Postcode



POLICE REPORT



Police Station Of Origin: Jurong East N.P.C. 92 Boon Lay Way SINGAPORE 609962 Tel No. 1800-8999999



1 of 5 Report No. 7/20180527/2032

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 27/06/2018 10:28		Made:	Vide Report No	Station Diary No. 46	
Informant's Particulars				170	
	Informant: IAN JUNQI		Address: APT BLK 320 JURONG EAST SINGAPORE 600320	STREET 31 #13-72	
ID Type / ID No. NRIC NO / S9421432G			Contact No. Home/Office:	Mobile: 98981815	
Nationality: SINGAPORE CITIZEN		EN	Email		
Sex Male	Age: 24	Date of Birth: 04/06/1994	Type of Informant.		
Race: Chinese			Language:	Institution / School Name:	
Occupation: GRAB DRIVER			Driving Licence Information: Class: 3	Date of Expiry	

Type of Accident:	Injury Others	Dri Dri No	VB.	Date/Time of Accident: 26/06/2018 20:15	S	pe of Location traight Road
Location Along Road 1 PAN ISLAND JALAN EUNO PIE towards (Weather:		Road Surf	ace.		Road S	Spéed Limit:
Clear Dry Traffic Flow: Traf One Way Type of Collision:		The second second second second second	Traffic Control		Traffic Volume: Moderate Anyone conveyed by	
		tranic coi				
					1.501632013	commented and est

Details of V		Train	Model	Color	Condition No of Passenger
Vehicle No.	Type	Make	Directi		Seriously 2
SKH3315A	Car				Damaged
			- 2	Blue	Slightly 1
SLL7112J	Car	MAZDA	3	274	Damaged

urance No	Effective	Expury Date
	01/02/2018	31/01/2019
		9069766MKF 01/02/2018

POLICE REPORT



police Station Of Origin; Jurong East N.P.C 92 Boon Lay Way SINGAPORE 609962 Tel No. 1800-8999999



7 of 1 Report No. T/20150627/2032

CONTINUATION OF REPORT

Any Pedestrian I	rvolved: No			
No. of Pedestrians Injured; NIL. Driver		Use of Pedestrian Crossing: NA		
Name	ALVIN HAN JUNQI		ID No.	S9421432G
Related Vehicle	SLL7112J (Car)		Contact No.	96981615
Hospital/Clinic	fospital/Clinic CENTRAL 24HR CLINIC			Class: 3 Date of Expiry: NIL
Date Treatment	26/06/2018	Date Disch	Expiry Date	3/2018
No. of Days gran	ted Medical Leave 03	Degree of I		The second secon

Brief Details.

On the 26/06/2018 at around 2015hrs, I was travelling along PIE towards Changi with a Chinese female passenger whom I had fetched at Commonwealth area earlier and to send her to bedok. As I was driving on the most right lane, the traffic was quite heavy but does not slow down the traffic. Subsequently, the vehicle infront of my vehicle SLG5155A jammed break which caused me to jam break but I break in time. As I pressed break on my vehicle, a black Mercedes had hit onto my vehicle from the rear side. When I alighted from my vehicle. I spotted another vehicle had hit onto the black Mercedes which is a Comfort Delgro tax. My female passenger claimed not injured and I suffered slight pain on my back. I then went to see the private doctor at Central 24HR Clinic for further check for the slight pain on my back. The doctor gave me 3 days of MC from 26/06/2018 till 28/06/2018. The vehicle I am driving is under the GRAB rental and damages to the vehicle are the rear side and center. The accident causes multiple vehicles into collision.

POLICE REPORT

urance Certificate to this report. If you don't have
Signature Of Informant:
A-
Date/Time: 27/06/2018 10:28
Classification Of Case:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID: Vehicle Details	7200G
Vehicle No.:	SLL7112J
Vehicle to be Exported:	Yes
Intended De-registration Date:	28 Jun 2018
Vehicle Make:	MAZDA
Vehicle Model:	MAZDA3 4-DOOR SEDAN 1.5L SP.6EAT
Primary Colour:	Blue
Manufacturing Year:	2017
Engine No.:	P520432911
Chassis No.:	JM6BN22A8H0145555
Maximum Power Output:	88.0 kW (118 bhp)
Open Market Value:	\$14,688.00
Original Registration Date:	07 Mar 2017
First Registration Date:	07 Mar 2017
Transfer Count:	0
Actual ARF Paid: Intended PARF Rebate Details	\$9,688.00
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	06 Mar 2027
PARF Rebate Amount: Intended COE Rebate Details	\$7,266.00
COE Expiry Date:	06 Mar 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$48,401.00
COE Rebate Amount:	\$38,720.00
Total Rebate Amount:	\$45,986.00

The information contained herein is correct as at 28 Jun 2018