

## 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	28/07/2018 09:43
Date Of Accident	27/07/2018 17:35
Exact Location Of Accident	PIE TOWARDS TUAS BEFORE MOUNT PLEASANT FLYOVER
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHB5332D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SMRT TAXIS PTE LTD
Co Reg No	198905369K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-80000000

### Vehicle Particulars

Manufacturer	TOYOTA
Model	PRIUS TAXI-1.8 (A)
Exact Purpose for which vehicle was being used at time of accident	HIRE AND REWARD
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-18090213MFSH
Cover Note Number	

### Driver

Name of Driver	CHHI AIK KIONG
NRIC No	S1487581F
Date Of Birth	23/09/1961
Occupation	OUTDOOR
Date Of Driving Pass	20/03/1989
Driving Experience	29 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-80000000
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	172
Postcode	
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - RELIEF
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?	NO
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: : UNKNOWN GENDER: : FEMALE
Passenger 2	NAME: : UNKNOWN GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT PANJANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 42 FAJAR ROAD , POSTCODE: 679005 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8929999 - FAX NO: 67673650
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT - J/20180727/2159

#### 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 OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKL2222U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LEONG JIN QUAN
NRIC/Passport Number	
Contact Number	

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

**DETAILS OF OTHER VEHICLE PROPERTY 2**

Vehicle Registration Number SJL4282U  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category PRIVATE CAR  
Name of Driver EDWARD KWA PENG RONG  
NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

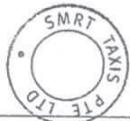
SKETCH PLAN

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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:

*Kuon*

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

*abu 28/7/2014*

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



**SINGAPORE  
POLICE FORCE**



J/20180727/2159

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**POLICE REPORT (NP299)**

Report No. J/20180727/2159

Police Station Of Origin  
Bukit Panjang N.P.C  
1 Segar Road #01-05 SINGAPORE 677738  
Tel No: 1800-8929999

Date/Time Report Made 27/07/2018 20:40	Vide Report No.	Station Diary No. 129
Name Of Informant CHHI AIK KIONG	Address APT BLK 172 GANGSA ROAD #22-24 SINGAPORE 670172	
ID Type / ID No. NRIC NO / S1487581F	Contact No. Home/Office	Mobile 96670397
Nationality SINGAPORE CITIZEN	Email Address	
Occupation Taxi Driver	Sex Male	Age 56
Institution/School Name	Date of Birth 23/09/1961	Race Chinese
Date/Time Of Incident 27/07/2018 17:35	Location Of Incident PAN-ISLAND EXPRESSWAY SINGAPORE Before Mount Pleasant Flyover	

**Brief details.**

On the 27/07/2018 at about 1735hrs, I was travelling on my vehicle bearing "SHB5332D" with two lady passengers along PIE expressway when I arrived at before the Mount Pleasant Flyover. I was on the lane 2 of a three lane road. At that point in time, there was a vehicle in front of mine bearing "SJL4282U" Edward Kwa Peng Rong Hp:97549130. The vehicle suddenly jam break, I tried to break as well. The vehicle behind mine bearing "SKL2222U" Leong Jin Quan Hp:98299292 however was not able to stop in time and collided onto my vehicle rear. My vehicle was then pushed forward and collided with the vehicle

Signature Of Officer Recording The Report: J / Sgt 3 CHUA CHUEN LIANG	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 27/07/2018 20:40
Officer In-Charge Of Case: J / Jurong Police Divisional Investigation Branch / Staff Sgt OMAR BIN YAMMOIDEEN Contact No.: 67910000	Classification Of Case:

Authentication Stamp SN 117 Signature:
Singapore Police Force



**SINGAPORE  
POLICE FORCE**



J/20180727/2159

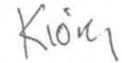
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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20180727/2159

infront of mine. I wish to state that no one was injured at that point in time. I exchanged particulars with the drivers and left. My vehicle rear bumper and front bumper was dented. I am not injured in this accident. I am lodging a report for insurance purpose.

Signature Of Officer Recording The Report: J / Sgt 3 CHUA CHUEN LIANG 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 27/07/2018 20:40
Officer In-Charge Of Case: J / Jurong Police Divisional Investigation Branch / Staff Sgt OMAR BIN YAMMOIDEEN Contact No.: 67910000	Classification Of Case:

