

## 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	07/08/2018 15:22
Date Of Accident	06/08/2018 12:25
Exact Location Of Accident	JUNCTION OF WOODLANDS ROAD & SUNGEI KADUT AVE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GW2334U
<b>Insured/Policyholder</b>	
Name Of Registered Owner	INCOM GENERAL SERVICES
Co Reg No	52837373X
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62253063

### Vehicle Particulars

Manufacturer	TOYOTA
Model	CR425005104
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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	LONPAC INSURANCE BHD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	Z/18/VC00/101627
Cover Note Number	

### Driver

Name of Driver	CHAN SOY KIN
NRIC No	S1201003F
Date Of Birth	09/06/1956
Occupation	INDOOR
Date Of Driving Pass	03/12/1998
Driving Experience	19 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96914038
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 512 BUKIT BATOK ST 52 # 08- 500
Postcode	650512
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	COLLISION - CROSS JUNCTION
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?	YES
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: : CHIEW AH HONG GENDER: : FEMALE
Passenger 2	NAME: : SYED OMAR GENDER: : MALE

#### 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

REFER TO ATTACHMENT TO POLICE REPORT NO : T/20180806/2121.

#### 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	GBC6243L
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)

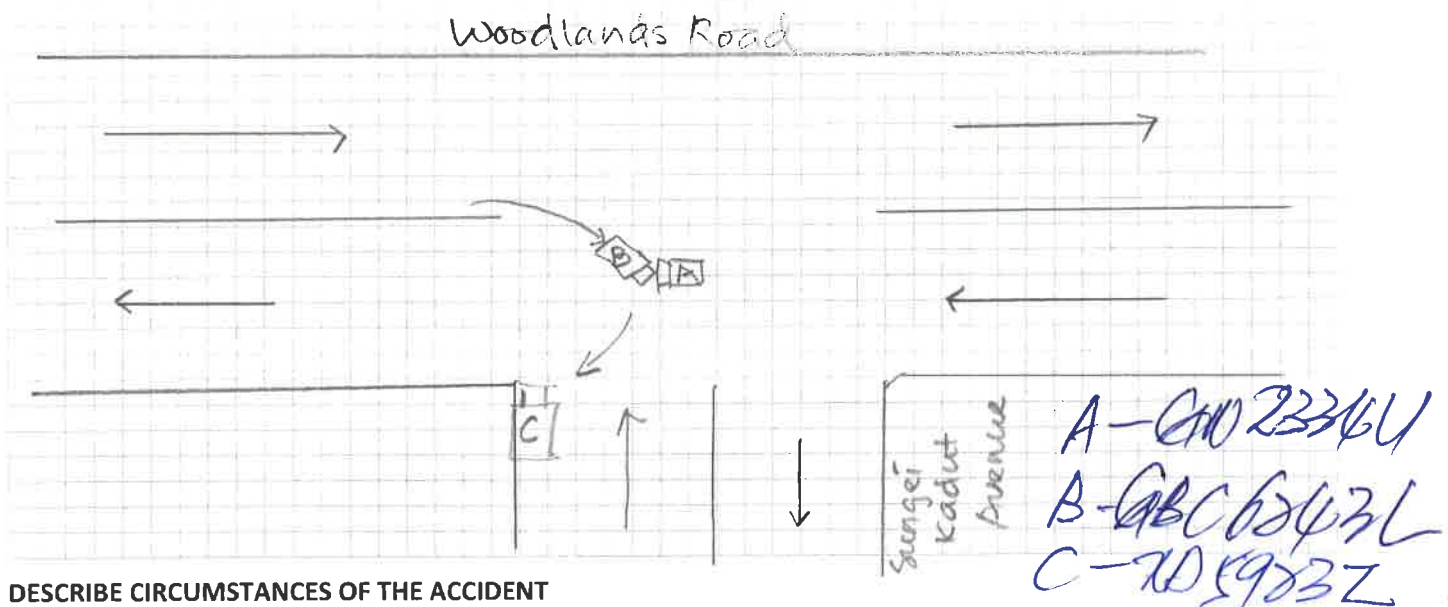
#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number XD5923Z  
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  
Approximate Age  
Injuries Sustain  
Injured person in which vehicle?  
Were seat belts worn?  
Was this injured conveyed to hospital by ambulance?  
Address  
Postcode

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to attachment to police report  
NO: T/20180806/2121.

my damaged van (GW 2334U) is with the  
traffic police.  
7/8/18

DECLARATION

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

INCOM GENERAL SERVICES  
111 North Bridge Road  
#21-01 Peninsula Plaza  
Singapore 179098

Tel: 6225 3063 Fax: 6339 1425



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:

INCOM GENERAL SERVICES  
Red No: 6225 3063  
111 North Bridge Road  
#21-01 Peninsula Plaza  
Singapore 179098  
Tel: 6225 3063 Fax: 6339 1425



**SINGAPORE  
POLICE FORCE**



T/20180806/2121

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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/20180806/2121

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 06/08/2018 15:44	Vide Report No.:	Station Diary No.: 35
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**Informant's Particulars**

Name of Informant: CHAN SOY KIN			Address: APT BLK 512 BUKIT BATOK STREET \$2 #08-500 SINGAPORE 650512		
ID Type / ID No.: NRIC NO / S1201003F			Contact No.: Home/Office: Mobile: 96914038		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 62	Date of Birth: 09/06/1956	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: SOLE PROPRIETOR			Driving Licence Information: Class: 3 Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 06/08/2018 12:25	Type of Location: T-Junction
Location: Junction of Road 1 and Road 2 WOODLANDS ROAD SUNGEI KADUT AVENUE Junction of Woodlands Road and Sungei Kadut Avenue				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBC6243L	Lorry				Seriously Damaged	0
GW2334U	Van				Seriously Damaged	2

**Details of Person Involved**

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

## POLICE REPORT Pg. 2



**SINGAPORE  
POLICE FORCE**



T/20180806/2121

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

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Report No. T/20180806/2121

## CONTINUATION OF REPORT

Driver			
Name	CHAN SOY KIN	ID No.	S1201003F
Related Vehicle	GW2334U (Van)	Contact No.	96914038
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date of Treatment	06/08/2018	Date Discharge	06/08/2018
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight

**Brief Details.**

On 06/08/2018 at 1225hrs, I was driving my van V1) GW2334U along Woodlands Road towards Woodlands. I was driving on the centre on the three lane road. I was approaching the T-junction between Woodlands Road and Sungei Kadut Avenue. The traffic light was green in my favour thus I continued the journey. I saw a car turning right from Woodlands Road (towards Bukit Panjang) into Sungei Kadut Avenue however traffic from my lane was not nearby and the car passed by safely. As V1 got near to the junction, V2) GBC6243L which was behind the car that had turned earlier, also made the right turn, blocking my path crossing the junction. I jammed my brakes however I was unable to stop in time. The front portion of V1 crashed into V2's left front bumper and its left side. V2 trailed out to the side of the junction while V1 remained stationary. At that point in time, I felt pain and there was bleeding on the back of my head. My female passenger (HP: 93652523) who was seated at the front passenger seat suffered pain on her chest. My male passenger (HP: 98330527) suffered a fracture on his left leg. Ambulance came and conveyed us to NTFGH. I was not able to obtain the particulars of the other driver. The damage on V1 was that its front bumper and engine area was smashed in. V2 suffered dents and scratches on the left side. Its front left tyre was also bent inwards due to the impact.



**SINGAPORE  
POLICE FORCE**



T/20180806/2121

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

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Report No. T/20180806/2121

**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 3 MUHAMMAD NURSYAZWAN BIN RASIDI

Signature Of Informant:

*He Chuan*

Signature Of Interpreter:

Not applicable

Date/Time:

06/08/2018 15:44

Officer In Charge Of Case:

TP / GIT /

Staff Sgt MOHAMMAD ZULKARNIAN BIN  
SAMSUDIN

Contact No.: 65476429

SN 116

Classification Of Case:

Authentication Stamp  
NP168

*Signature*  
**Singapore Police Force**