

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	02/08/2018 14:08
Date Of Accident	01/08/2018 17:10
Exact Location Of Accident	PIE SLIP ROAD TOWARDS JURONG TOWN HALL ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLV6878L
Insured/Policyholder	
Name Of Registered Owner	TAN YEAN CHING
NRIC No	S8074061A
Email Address	ANGELPATTYC@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-97647745
Alternative Phone No	OFFICE-97647745

Vehicle Particulars

Manufacturer	HONDA
Model	SHUTTLE 1.5G
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	PRIVATE CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5097115033
Cover Note Number	

Driver

Name of Driver	TAN YEAN CHING
NRIC No	S8074061A
Date Of Birth	03/03/1980
Occupation	INDOOR
Date Of Driving Pass	16/07/2002
Driving Experience	16 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97647745
Fax Number	
Contact Number	OFFICE-97647745
Email Address	ANGELPATTYC@YAHOO.COM.SG

Address	315 JURONG EAST STREET 32 #12-241
Postcode	600315
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
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: : GABRIEL LIM GENDER: : MALE
Passenger 2	NAME: : CHLOE LIM GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	JURONG EAST NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: NO. 92 BOON LAY WAY , POSTCODE: 609962 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8999999 - FAX NO: 66655791
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER ATTACHED

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	FBL8917R
Vehicle Make/Model/Colour	HONDA
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	HANIFAH

NRIC/Passport Number
Contact Number 91511741
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name HANIFAH
Approximate Age
Injuries Sustain REFER REPORT
Injured person in which vehicle? FBL8917R
Were seat belts worn?
Was this injured conveyed to hospital by ambulance? YES
Address
Postcode

Sketch Plan

SKETCH PLAN

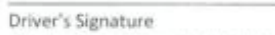
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8. **Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

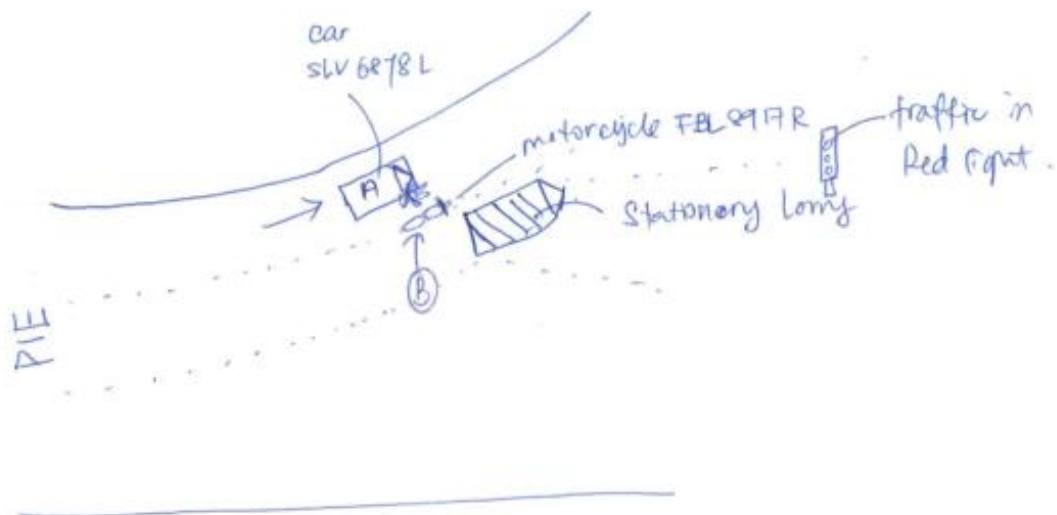
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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:


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


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

Sketch Plan #2



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to police report no: T/20180801/2138

DECLARATION

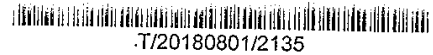
I/We declare the foregoing particulars are true in every respect.



[Signature]



POLICE FORCE



T/20180801/2135

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

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Report No. T/20180801/2135

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 01/08/2018 19:00		Vide Report No.: D/20180801/0104		Station Diary No.: 110	
Informant's Particulars					
Name of Informant: TAN YEAN CHING			Address: APT BLK 46B TOH TUCK ROAD #06-09 SINGAPORE 596748		
ID Type / ID No.: NRIC NO / S8074061A			Contact No.: Home/Office: Mobile: 97647754		
Nationality: MALAYSIAN			Email:		
Sex: Female	Age: 38	Date of Birth: 03/03/1980	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: HOMEMAKER			Driving Licence Information: Class: 2B,3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 01/08/2018 17:10	Type of Location: Slip road
Location: Along Road 1 PAN ISLAND EXPRESSWAY				
Along PIE(Tuas) slip road towards Jurong Town Hall Rd				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
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
FBL8917R	Motorcycle	HONDA		Black	Slightly Damaged	0
SLV6878L	Car	HONDA	SHUTTLE 1.5G CVT	Blue	Slightly Damaged	2

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLV6878L	NTUC Income Insurance Co-Operative Limited	5097115033	10/01/2018	09/01/2019



POLICE FORCE

T/20180801/2135

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

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Report No. T/20180801/2135

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	Hanifah	ID No.	NIL
Related Vehicle	FBL8917R (Motorcycle)	Contact No.	91511741
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	TAN YEAN CHING	ID No.	S8074061A
Related Vehicle	SLV6878L (Car)	Contact No.	97647754
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 01/08/2018 at about 1710hrs, I was driving my vehicle SLV6878L along PIE (Tuas) towards Jurong Town Hall Rd together with two of my kids. I was on the left most lane, at the slip road towards Jurong Town Hall Road. All of a sudden, a black motorcycle (FLV8917R) came from my right and collided into the front right portion of my vehicle. The motorcyclist fell off his bike upon collision. I think the motorcyclist wanted to avoid the lorry in front of him.

I then alighted from my vehicle and make a check on the motorcyclist who was conscious and responsive. Subsequently, traffic police arrived at scene vide to incident D/20180801/0104. The motorcyclist was conveyed by ambulance. None of my children and myself are injured. I do not have any in-car recording available. The front right portion of my vehicle was dented and scratched.



POLICE FORCE

T/20180801/2135

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

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Report No. T/20180801/2135

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: D / Sgt 3 LEONG HIN CHI	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 01/08/2018 19:00
Officer In Charge Of Case: TP / GIT / Sgt 2 MUHAMMAD ABDILLAH BIN YUSOF Contact No.: 92209878	Classification Of Case:
Authentication Stamp: NP168 	

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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