

## 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	13/08/2018 14:57
Date Of Accident	11/08/2018 17:05
Exact Location Of Accident	PIE TOWARD CHANGI AIRPORT AFTER BEDOK NORTH AVE 3
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR4626G
<b>Insured/Policyholder</b>	
Name Of Registered Owner	GRAB RENTALS PTE LTD
Co Reg No	<del>201617200G</del> 2017 01745N
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-66550005

### Vehicle Particulars

Manufacturer	MAZDA
Model	MAZDA3 SEDAN 1.5 AT EU6
Exact Purpose for which vehicle was being used at time of accident	HIRE & 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	PRIVATE HIRE

### Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	A29069766MKF
Cover Note Number	N.A

### Driver

Name of Driver	LEOW SOON HOCK
NRIC No	S1610732H
Date Of Birth	03/12/1963
Occupation	OUTDOOR
Date Of Driving Pass	22/05/1995
Driving Experience	23 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-87209122
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	HDB HOUGANG PARKEDGE, 473B UPPER SERANGOON CRESCENT #06-335
Postcode	532473
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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)	2
Passenger 1	NAME: : PASSENGER 1 GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
POLICE STATION NAME [OTHER]	TRAFFIC POLICE DIVISION HQ
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

Refer to Police Report Ref: T/20180811/2111 lodged at Traffic Police Division HQ. On 11th Aug 2018 at about 1705hrs, I was driving my Grab car along PIE towards AP on extreme right lane. A car SKC7925P in front of me suddenly jam brake and I apply my brake too. I manage to stop in time and no collision with the front car. Suddenly a car behind me SLU5652H bang onto my rear portion and caused me to surge forward and hit the car in front of me. As a result of accident, my car front portion and rear portion was damaged. I have a rear passenger and no one is injured. Altogether about 6 vehicles involved in this accidents. That's all. My in charge case is IO Kharil.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	YES - RETRIEVING
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLU5652H
Vehicle Make/Model/Colour	MAZDA3 SEDAN 1.5 AT EU6 / DARK BLUE
Details Of Properties	NIL
Vehicle Category	PRIVATE CAR
Name of Driver	TAN CHIN KWONG, ALVIN
NRIC/Passport Number	S8104271C

Contact Number 98415161  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver) 1

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SJN5240Z  
Vehicle Make/Model/Colour MITSUBISHI LANCER 2.0L / DARK BLUE  
Details Of Properties NIL  
Vehicle Category PRIVATE CAR  
Name of Driver UNKNOWN DRIVER  
NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver) 1

#### DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SKF9468M  
Vehicle Make/Model/Colour FORD FOCUS 1.6 / WHT  
Details Of Properties NIL  
Vehicle Category PRIVATE CAR  
Name of Driver CHEE JONATHAN  
NRIC/Passport Number S9530847C  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver) 1

#### DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number UNKNOWN  
Vehicle Make/Model/Colour UNKNOWN MODEL  
Details Of Properties  
Vehicle Category TAXI  
Name of Driver UNKNOWN DRIVER  
NRIC/Passport Number  
Contact Number  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver) 1

#### DETAILS OF OTHER VEHICLE PROPERTY 5

Vehicle Registration Number SKC7925P  
Vehicle Make/Model/Colour MERCEDES BENZ B170 / DARK BLUE  
Details Of Properties NIL

Vehicle Category	PRIVATE CAR
Name of Driver	UNKNOWN DRIVER
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

# Sketch Plan

## SKETCH PLAN

### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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4. The issue and acceptance of this form by insurance companies is not an admission of policy liability on the part of insurance companies.
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 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.
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.
  - (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.

VERIFIED BY AJAX MARS

REPORTING OFFICER

Mohammad Azaly Bin Abdullah

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

### Sketch Plan

PIE TOWARDS CHANNEL	
E	A- SLR4626G
F	B- SLU5652H
A	C- SJN5240Z
B	D- SKF9468M
C	E- TAXI (NO DETAILS)
D	F- SKC7925P

## Police Report



**SINGAPORE  
POLICE FORCE**



T/20180811/2111

1 of 3

Report No. T/20180811/2111

Police Station Of Origin:  
Traffic Police Division HQ  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 11/08/2018 19:48	Vide Report No.:	Station Diary No.:
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**Informant's Particulars**

Name of Informant: LEOW SOON HOCK		Address: 473B UPPER SERANGOON CRESCENT #06-335 SINGAPORE 532473	
ID Type / ID No.: NRIC NO / S1610732H		Contact No.: Home/Office: Mobile: 87209122	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 54	Date of Birth:	Type of Informant: Driver
Race:		Language:	Institution / School Name:
Occupation: GRAB DRIVER		Driving Licence Information: Class: Date of Expiry:	

**General Information of the Accident**

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 11/08/2018 17:05	Type of Location:
Location: Along Road 1 PAN ISLAND EXPRESSWAY				
PIE 6.5KM LANDMARK TWDS AIRPORT DIRECTION				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision:				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKC7925P	Car					0
SKF9468M	Car					0
SLR4626G	Car				Slightly Damaged	1
SLU5652H	Car					0

## Police Report



**SINGAPORE  
POLICE FORCE**



T/20180811/2111

2 of

Report No. T/20180811/211

Police Station Of Origin:  
Traffic Police Division HQ  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000

## CONTINUATION OF REPORT

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	LEOW SOON HOCK	ID No.	S1610732H
Related Vehicle	NIL	Contact No.	87209122
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

**Brief Details.**

ON 11.8.18 AT ABOUT 1705HRS I WAS DRIVING MY GRAB CAR ALONG PIE TWDS AP ON EXTREME RIGHT LANE. A CAR SKC 7925P INFRONT OF ME SUDDENTLY JAM BRAKE AND I APPLY MY BRAKE TOO. I MANAGE TO STOP IN TIME AND NO COLLISION WITH THE FRONT CAR. SUDDENTLY A CAR BEHIND ME SLR4626G BANG ONTO MY REAR PORTION AND CAUSED ME TO SURGE FORWARD AND HIT THE CAR INFRONT OF ME. AS RESULT OF ACCIDENT MY CAR FRONT PORTION AND REAR PORTION WAS DAMAGED. I HAVE A REAR PASSENGER AND NO ONE IS INJURED. ALTOGHER ABOUT 6 VEHICLES INVOLVED IN THIS ACCIDENTS. THATS ALL. MY INCHARGE CASE IS IO KHAIRIL.

Police Report



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Traffic Police Division HQ  
10 Ubi Avenue 3 SINGAPORE 408865  
Tel No: 65470000



T/20180811/2111

3 of 3

Report No. T/20180811/2111

**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:

TP /

KEE CHUAN JIA MARCUS

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

11/08/2018 19:48

Officer In Charge Of Case:

TP / GIT /

Staff Sgt MOHAMMAD ZULKARNIAN BIN  
SAMSUDIN

Contact No.: 65476429

Authentication Stamp

NP168

Classification Of Case:



**SINGAPORE  
POLICE FORCE**

Signature:

Police Report (Amended)

Officer-In-Charge  
Investigation Section  
Traffic Police  
No. 10 Ubi Avenue 3  
Singapore 408865

NAME: LEOW SOON HOCK  
NRIC: S1610732H  
ADD: BLK 473B UPPER SERANGOON  
CRESCENT #06-335  
SINGAPORE (532473)  
HP: 87209122

Dear Sir, Ma'am

ACCIDENT INVOLVING 5 CARS AND A TAXI ALONG PIE 6.5KM LANDMARK  
TOWARDS CHANGI AIRPORT ON 11/08/2018 AT 1705HRS.

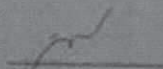
With reference to the above, on 11/08/2018 (date) at 1948hrs (time), I lodged a  
Traffic Accident Police Report at Traffic Police Division HQ (Name of police station /  
NPP) in NP168 T/20180811/2111.

2. On 12/08/2018 (date), at 1730hrs (time), at Tampines North NPP (Name of Police  
Station/NPP), I make the following amendments to the above report.


3. I wish to amend the statement in the report as follows:  
"SUDDENLY A CAR BEHIND ME SLR4626G BANG ONTO MY REAR PORTION  
AND CAUSED ME TO SURGE FORWARD AND HIT THE CAR INFRONT OF ME."  
The correct vehicle plate number should be SLU5652H instead of "SLR4626G".

4. After the accident, I felt unwell and seek medical treatment at a private clinic. I  
was given 3 days of MC from 12/08/2018 to 14/08/2018.

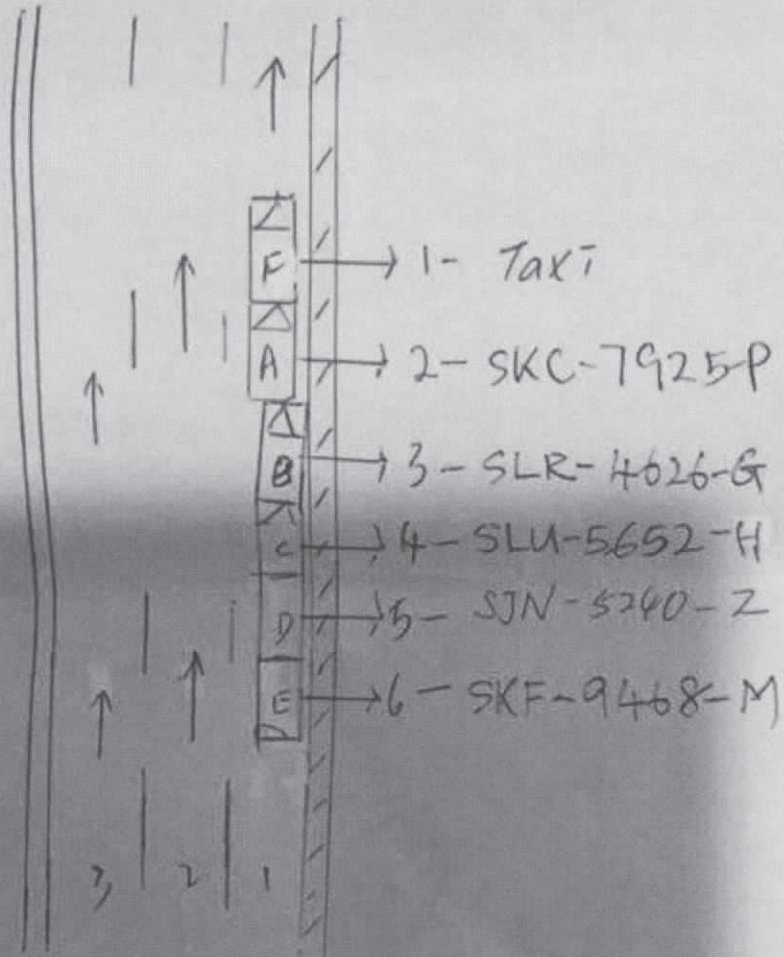
Yours faithfully

  
Signature

**Tampines North NPP**  
Block 461 Tampines St 44  
#01-56 Singapore 520461  
Tel: 1800-7818999

If a police officer records this amendment, please complete the following:	
Name / Rank No: SGT(2) Muhammad Isa	Station Diary No. 18
Signature: 	

PIE TOWARD AIRPORT



> Back to OneMotoring

### Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	1345N
Vehicle Details	
Vehicle No.:	SLR4626G
Vehicle to be Exported:	No
Intended De-registration Date:	13 Aug 2018
Vehicle Make:	MAZDA
Vehicle Model:	MAZDA3 SEDAN 1.5 AT EU6
Primary Colour:	White
Manufacturing Year:	2017
Engine No.:	P520444705
Chassis No.:	JM6BN22A8H0153028
Maximum Power Output:	88.0 kW (118 bhp)
Open Market Value:	\$14,761.00
Original Registration Date:	16 Aug 2017
First Registration Date:	16 Aug 2017
Transfer Count:	0
Actual ARF Paid:	\$9,761.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	15 Aug 2027
PARF Rebate Amount:	\$7,320.00
Intended COE Rebate Details	
COE Expiry Date:	15 Aug 2027
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$44,002.00
COE Rebate Amount:	\$39,625.00
Total Rebate Amount:	\$46,945.00

The information contained herein is correct as at 13 Aug 2018

OK