

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	17/08/2018 09:22
Date Of Accident	16/08/2018 12:00
Exact Location Of Accident	PIE TWDS CHANGI
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SH2807J
Insured/Policyholder	
Name Of Registered Owner	YEO AH HEE
NRIC No	S0346046J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97478752
Alternative Phone No	OTHERS-97478752

Vehicle Particulars

Manufacturer	TOYOTA
Model	AXIO
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D-180089355MSH
Cover Note Number	

Driver

Name of Driver	CHEE HIONG KIN
NRIC No	S1660180B
Date Of Birth	08/05/1964
Occupation	OUTDOOR
Date Of Driving Pass	04/11/1986
Driving Experience	31 YEARS AND 9 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-97478752
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	12 VEERASAMY ROAD
Postcode	207320
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	FRIEND
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
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?	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: : ALLAN TAN GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	GEYLANG N.P.C
Police Station Address	ROAD: 132 PAYA LEBAR ROAD , POSTCODE: 409014 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20180816/2066

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	ON SWITCH OFF MODE
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLB2945R
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
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	CHEE HIONG KIN
Approximate Age	
Injuries Sustain	SLIGHT
Injured person in which vehicle?	SH2807J
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Accident Sketch Plan


SKETCH PLAN


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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 upon application by interested parties.
7. By the lodgment 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 (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:

 17/08/18
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN

PIE (209 Payoh) towards Changi

Veh A: SH 2807
Veh B: SLB 2945R

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer the police report : 7/20180816/2066

DECLARATION

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


Policyholder's Signature
Date & Time:


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

 17/08/18
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

Individual Statement



**SINGAPORE
POLICE FORCE**



120180619/2018

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Police Station Of Origin:

Geylang N.P.C

132 Paya Lebar Road SINGAPORE 405014

Tel No: 1800-8486999

Report No. T20180619/2018

CONTINUATION OF REPORT

Driver			
Name	CHEE HIONG KIN	ID No.	S1660180B
Related Vehicle	SH2807J (Car)	Contact No.	97476752
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 16/08/2018 at about 1200hrs, I was driving my taxi SH2807J along PIE from Toa Payoh area heading towards Changi with a male Chinese passenger. Upon reaching Kallang area, there is one grey Honda vehicle overtake my vehicle and started to hogging the road by slowing down her vehicle. I had no choice to slow down my taxi and follow through. As the speed was too slow, I tried to overtake her vehicle however the driver had block my way driving left to right. I subsequently slow down my vehicle and let the vehicle to drive through. After a few distance, I managed to overtake the said vehicle somewhere near Paya Lebar exit. Out of sudden, the said vehicle had ramp onto my rear bumper.

After the collision, we had stop our vehicles on the road shoulder. I came out from my taxi and confronted the driver. Upon reaching the vehicle, the driver started to speed off and left the scene. I would like to state that a few moment later, the driver had stop her vehicle on the extreme right lane along exit Paya Lebar Road slip road. I had tried to approach her again however the driver was very aggressive towards me before left the scene again.

I would like to state further that I could not remember the vehicle number. It is either SLR2945R or SLB2945R however it was a grey Honda Mobilio and I managed to snap a picture from the side of said vehicle. There is a vehicle cam installed in my taxi however it was on switch off mode.

SH

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



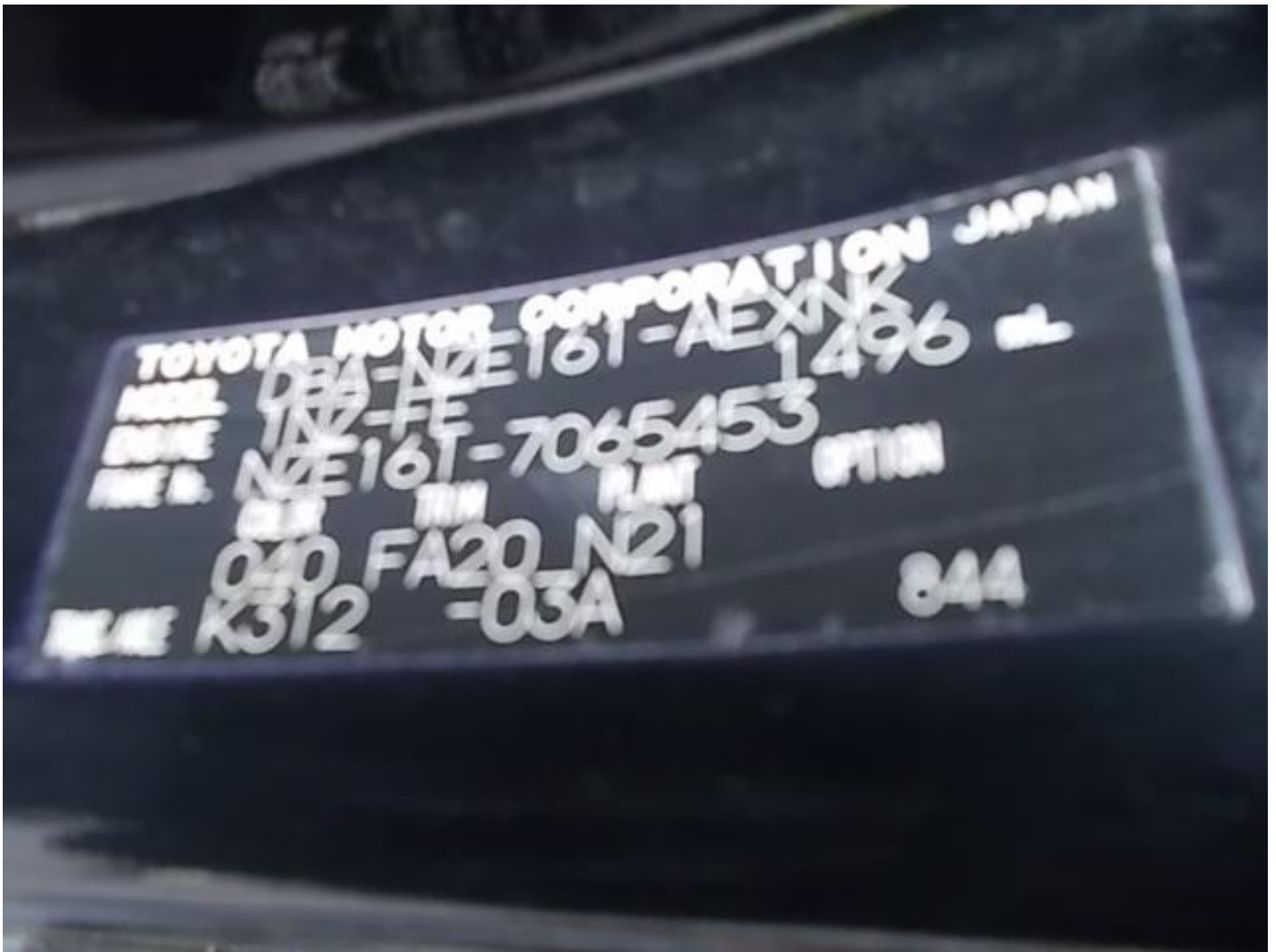
Accident Photo



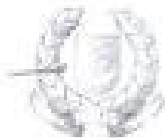
Accident Photo



Accident Photo



Police Report



SINGAPORE
POLICE FORCE



T2018081602000

Police Station Of Origin:

Geylang N.P.C

132 Paya Lebar Road SINGAPORE 409014

Tel No: 1800-8485999

1 of 3

Report No: T2018081602000

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/08/2018 13:42		Vide Report No.		Station Diary No.: 51
Informant's Particulars				
Name of Informant: CHEE HIONG KIN		Address: 12 VEERASAMY ROAD SINGAPORE 207320		
ID Type / ID No: NRIC NO / S16801806		Contact No: Home/Office: Mobile: 97478752		
Nationality: SINGAPORE CITIZEN		Email:		
Sex: Female	Age: 54	Date of Birth: 08/05/1964	Type of Informant: Driver	
Race: Chinese		Language: English	Institution / School Name:	
Occupation: Taxi driver		Driving Licence Information: Class:		Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 16/08/2018 12:00	Type of Location: Straight Road
Location: Along Road 1 PAN ISLAND EXPRESSWAY				
Along PIE from Toa Payoh area heading towards Changi				
Weather: Clear	Road Surface: Dry		Road Speed Limit:	
Traffic Flow: One Way	Traffic Control: Not Controlled		Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SH2807J	Car	TOYOTA			Slightly Damaged	2
	Car					1

Details of Person Involved

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

Police Report



SINGAPORE
POLICE FORCE



Police Station: 01/01/2018

Geylang M.P.C.

132 Paya Lebar Road SINGAPORE 400134

Tel No: 1800-8468888

Report No: T201808150257

CONTINUATION OF REPORT

Driver Name	CHEE HONG KIN	ID No	S18601808
Related Vehicle	SH2807J (Car)	Contact No	97478752
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 18/08/2018 at about 1200hrs, I was driving my taxi SH2807J along PIE from Toa Payoh area heading towards Changi with a male Chinese passenger. Upon reaching Katong area, there is one grey Honda vehicle overtake my vehicle and started to hogging the road by slowing down her vehicle. I had no choice to slow down my taxi and follow through. As the speed was too slow, I tried to overtake her vehicle however the driver had block my way driving left to right. I subsequently slow down my vehicle and let the vehicle to drive through. After a few distance, I managed to overtake the said vehicle somewhere near Paya Lebar exit. Out of sudden, the said vehicle had ramp onto my rear bumper.

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SH

Police Report



SINGAPORE
POLICE FORCE



T/20190815/603955

Police Station Of Origin:
Geylang N.P.C.
132 Paya Lebar Road SINGAPORE 409014
Tel No: 1800-8486959

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Report No: T/20190815/603955

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:
G /
Staff Sgt JUHARDI BIN SAADON

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
16/08/2019 13:42

Officer In Charge Of Case:
IP / HRT /
SI ABDUL KAREEM BIN ABDUL HAGUE
Contact No.: 65476079

Classification Of Case:

Authentication Stamp
NP165

