

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	30/08/2018 11:23
Date Of Accident	29/08/2018 15:50
Exact Location Of Accident	T JUNCTION OPF UPP BT TIMAH RD TWDS WOODLANDS RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD4403D
Insured/Policyholder	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768

Vehicle Particulars

Manufacturer	HYUNDAI
Model	SONATA-2.0 (A)
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	TAXI

Insurance Company

Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	MCOM0015
Cover Note Number	

Driver

Name of Driver	TOH THIAM HOCK
NRIC No	S1446795E
Date Of Birth	11/10/1960
Occupation	OUTDOOR
Date Of Driving Pass	14/07/1978
Driving Experience	40 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-97429363
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 801C KEAT HONG CLOSE #12-43
Postcode	683801
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - TAXI DRIVER
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?	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)	1

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 POLICE REPORT NO: T/20180829/2169

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YP9303L
Vehicle Make/Model/Colour	ISUZU LORRY
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	LOO CHEE MENG
NRIC/Passport Number	F1199981Q
Contact Number	93828302
Address	
Postcode	
Insurance Company Name	

Nature Of Damage FRONT

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SJY1577X

Vehicle Make/Model/Colour MERCEDES

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver HOO KOK PENG

NRIC/Passport Number S8111643A

Contact Number 97494939

Address

Postcode

Insurance Company Name

Nature Of Damage REAR

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name TOH THIAM HOCK

Approximate Age

Injuries Sustain NECK AND BACK

Injured person in which vehicle? SHD4403D

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? YES

Address

Postcode

Sketch Plan Pg. 1

SKETCH PLAN

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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 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.

COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199303821R

Policyholder's Signature
Date & Time:

Driver's Signature
(If driver is not the policyholder)
Date & Time: 30.08.2018
@11:30 hrs

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



**SINGAPORE
POLICE FORCE**



T/20180829/2169

1 of 4

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

Report No. T/20180829/2169

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/08/2018 21:25	Vide Report No.:	Station Diary No.: 28
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Informant's Particulars

Name of Informant: TOH THIAM HOCK		Address: APT BLK 801C KEAT HONG CLOSE #12-43 SINGAPORE 683801	
ID Type / ID No.: NRIC NO / S1446795E		Contact No.: Home/Office: Mobile: 97429363	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 57	Date of Birth: 11/10/1960	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: Taxi driver		Driving Licence Information: Class: 3,4,5 Date of Expiry:	

General Information of the Accident

Type of Accident:	Non-Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 29/08/2018 15:50	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 UPPER BUKIT TIMAH ROAD WOODLANDS ROAD After traffic light junction of Cashew Road				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy
Type of Collision: Chain reaction accident				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No	Type	Make	Model	Color	Condition	No of Passenger
SHD4403D	COMFORT TAXI				Seriously Damaged	0
SJY1577X	Car					0
YP9303L	Lorry					0



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Report No. T/20180829/2169

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TOH THIAM HOCK	ID No.	S1446795E
Related Vehicle	SHD4403D (COMFORT TAXI)	Contact No.	97429363
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3,4,5 Date of Expiry: NIL
Date Treatment	29/08/2018	Date Discharge	29/08/2018
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Driver			
Name	HOO KOK PENG	ID No.	S8111643A
Related Vehicle	SJY1577X (Car)	Contact No.	97494939
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	LOO CHEE MENG	ID No.	F1199981Q
Related Vehicle	YP9303L (Lorry)	Contact No.	93828302
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 the 29/08/2018 at about 1550hrs, I was driving my Comfort Taxi SHD4403D along Upp Bt Timah Road towards Woodlands Rd. As I was approaching the traffic light junction after the Junction of Cashew Road, the traffic light turned red and I slowed down to a stop at the 2nd lane. At that point of time I noticed a black Mercedes Benz SJY1577X in front of me. As I was waiting for the Green light to come on, I suddenly felt a strong impact on my rear. The impact was strong enough that it pushed my taxi forward and hit onto the car in front of me. At that point of time, I felt pain on my back and neck. I managed to exit the taxi to take a look what had happened. I then realized that the impact from the rear was a collision from a lorry, YP9303L. The impact from the lorry caused my rear windscreen to be shattered and the rear



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SINGAPORE 650370
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Report No. T/20180829/2169

CONTINUATION OF REPORT

part was smashed. For the front, there are some scratches and dents due to the impact on the front vehicle. I managed to exchange particulars with the drivers and took some pictures of the damages. Shortly after, an ambulance arrived and conveyed me to Ng Teng Fong Hospital. I was diagnosed with neck and back pain initially. I was also issued 3 days of MC and to return for more follow up if required. As for my taxi, it had to be towed away. I wish to add on that I have informed my company regarding the accident. I wish to add also that my vehicle has an In Car camera and it is recording.



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T/20180829/2169

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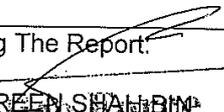
Report No. T/20180829/2169

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 2 MUHAMMAD NORHAZREEN SHAHRIM HARIZAN SINGAPORE POLICE FORCE	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 29/08/2018 21:25
Officer In Charge Of Case: TP / GIT / Sr Staff Sgt RAZIZ BIN TAHAR Contact No.: 65476200	Classification Of Case:

Authentication Stamp
NP168

SCENE



SCENE



SCENE



SCENE



SCENE



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SCENE



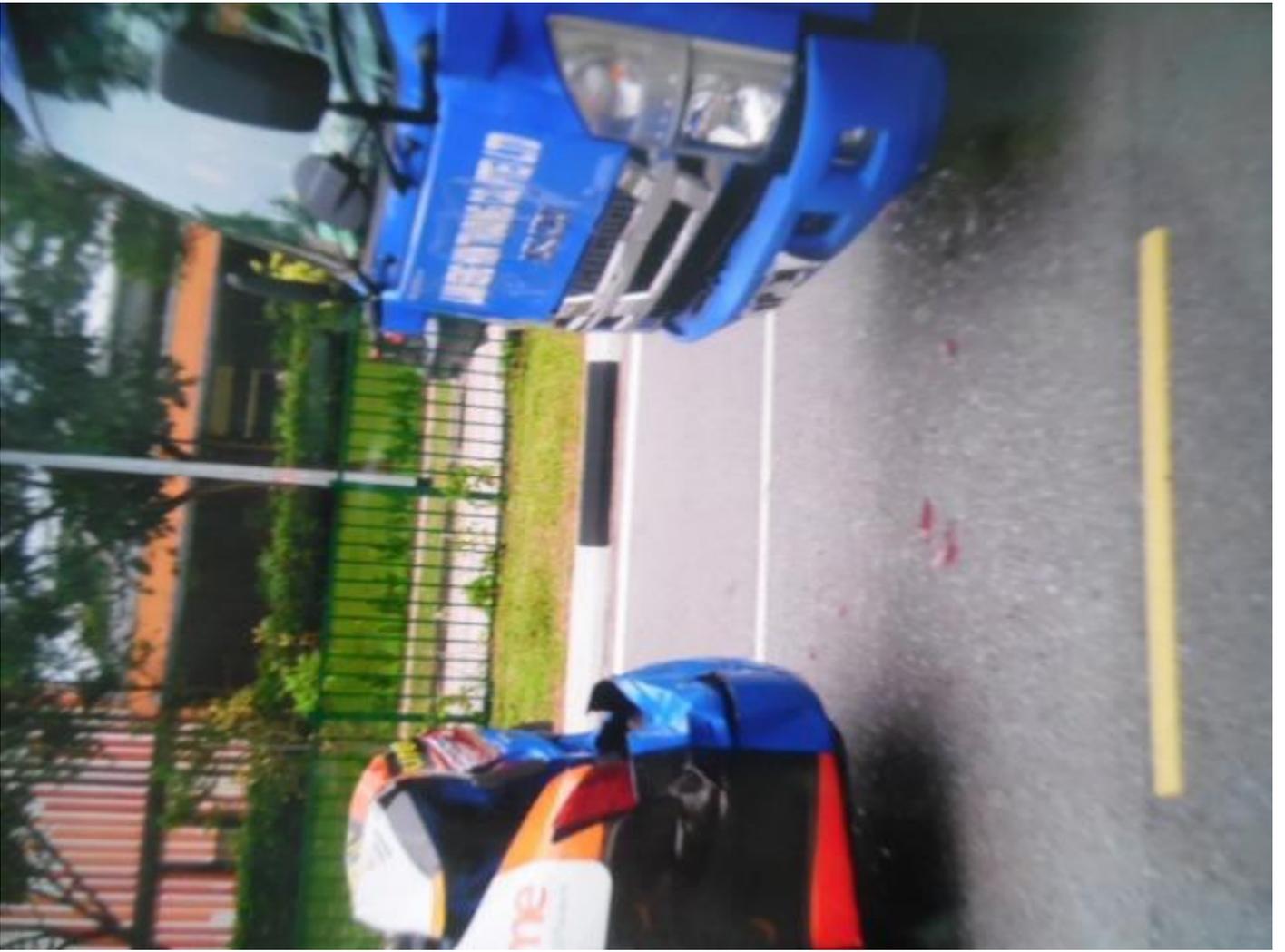
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SCENE



SCENE



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: S665500206 / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MCD618112366 Vehicle Registration No: SHD4403D
Name (as shown in NRIC) : TOH THIAM HOCK NRIC/FIN/Passport No : _____
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : _____ Singapore ()
Contact (Tel) : _____ Mobile No. : _____
Email Address : _____
Date of Accident : 29/082018 Time of Accident : 15:50
Place of Accident : T JUNCTION OPF UPP BT TIMAH RD TWDS WOODLANDS RD
Insurance Company: India International Insurance Pte Ltd

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

UPLOAD ACCIDENT PHOTOS

Policyholder / Driver's Signature
Date:


Reporting Centre Personnel's Signature
Name: JANET
NRIC/FIN No.:
Date: 31.08.2018