

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	28/09/2018 09:08
Date Of Accident	27/09/2018 19:00
Exact Location Of Accident	PIE TWDS CHANGI B4 EUNOS EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GZ4595D
Insured/Policyholder	
Name Of Registered Owner	PJ & KC DELIVERY SERVICES
Co Reg No	53065957C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-96411687

Vehicle Particulars

Manufacturer	RENAULT
Model	KANGOO
Exact Purpose for which vehicle was being used at time of accident	GOING HOME
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	DMCVSN1616461802
Cover Note Number	-

Driver

Name of Driver	WOO CHEN YI (HU CHENGYI)
NRIC No	S8008232J
Date Of Birth	25/03/1980
Occupation	INDOOR
Date Of Driving Pass	25/11/2005
Driving Experience	12 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96411687
Fax Number	
Contact Number	
Email Address	KYORIWOO@GMAIL.COM

Address	BLK 144 BEDOK RESERVOIR RD #04-1591
Postcode	470144
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - FATHER COMPANY
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	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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	BEDOK NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 30 BEDOK NORTH ROAD , POSTCODE: 469676 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2449999 - FAX NO: 62447258
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBF3866T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	SHAFIQ MEDRIE BIN HARDI
NRIC/Passport Number	S9611667E
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN


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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:


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

Accident Sketch Plan

SKETCH PLAN

A = GZ 4595 D
B = FBF 3866 T

PIE (Changi) B4 Eunos Exit


DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


Please Refer to Police Report

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:


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

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180927/2190

Police Station Of Origin:
Bedok North N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

1 of 3

Report No. T/20180927/2190

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 27/09/2018 21:37	Vide Report No.: G/20180927/0193	Station Diary No.: 127
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Informant's Particulars

Name of Informant: WOO CHEN YI	Address: APT BLK 144 BEDOK RESERVOIR ROAD #04-1591 SINGAPORE 470144		
ID Type / ID No.: NRIC NO / S8008232J	Contact No.: Home/Office: Mobile: 96411687		
Nationality: SINGAPORE CITIZEN	Email:		
Sex: Male	Age: 38	Date of Birth: 25/03/1980	Type of Informant: Driver
Race: Chinese	Language:		Institution / School Name:
Occupation: Auditor	Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 27/09/2018 19:00	Type of Location: Straight Road
Location: Along Road 1 PAN ISLAND EXPRESSWAY Towards Changi Airport at the 10.5km mark				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBF3866T	Motorcycle				Slightly Damaged	1
GZ4595D	Van				No Damage	0

Details of Person Involved

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

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T/20180927/2190

Police Station Of Origin:
Bedok North N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

2 of 3
Report No. T/20180927/2190

CONTINUATION OF REPORT

Rider			
Name	SHAFIQ MEDRIE BIN HARDI		ID No. S9611667E
Related Vehicle	FBF3866T (Motorcycle)		Contact No. NIL
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	Slight
Driver			
Name	WOO CHEN YI		ID No. S8008232J
Related Vehicle	GZ4595D (Van)		Contact No. 96411687
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 27th September 2018 at about 7pm, I was driving my van GZ4595D, along PIE towards Changi Airport on the 2nd lane. As I was on the 10.5km mark, I was filtering to the 3rd lane to exit via Eunos I noticed that it was clear for me to do so. In the midst of filtering, a motorcycle, FBF3866T, then hit the rear of my car. As a result, both rider and pillion had a fall.

Traffic Police and ambulance came down vide incident G/20180927/0193. Both rider and pillion were conveyed to Changi General Hospital. I did not sustained any injuries and there were no damages on my car. I wish to state that I do not have any camera in my vehicle.

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20180927/2190

Police Station Of Origin:
Bedok North N.P.C
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2449999

3 of 3

Report No. T/20180927/2190

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 /

Sgt 2 MOHAMED NASZRUL BIN MOHD HELMI

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

27/09/2018 21:37

Officer In Charge Of Case:

TP / GIT /

Staff Sgt NORAMEERA BINTE MOHAMED
HUSSEIN

Contact No.: 65476236

Classification Of Case:

Authentication Stamp

NP168

DRIVING DOC

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S8008232J



Name
WOO CHEN YI
(HU CHENGYI)
胡 成 毅

Race
CHINESE

Date of birth
25-03-1980

Sex
M

Country of birth
SINGAPORE




REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: S8008232J

Name
WOO CHEN YI
(HU CHENGYI)

Birth Date: 25 Mar 1980

Issue Date: 25 Nov 2005





4859807



NRIC No: S8008232J



Date of issue
20-12-2010

APT BLK 144 BEDOK RESERVOIR ROAD #04-1581
SINGAPORE 470144

NRIC No: S8008232J Date: 22/02/2015

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

PASS DATE

Class 3A: Motor cars without clutch pedals (Auto) <= 3000kg with <= 7 passengers, exclusive of the driver; and other motor vehicles without clutch pedals <= 2500kg

25 Nov 2005

NP 429A

Licence No: S8008232J



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

