

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 liability.
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	09/11/2018 17:58
Date Of Accident	25/03/2018 22:30
Exact Location Of Accident	JUNC ESPLANADE DR & FULLERTON RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJR812K
Insured/Policyholder	
Name Of Registered Owner	TAN CHYE YONG VINCENT
NRIC No	S7337346H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98785544
Alternative Phone No	OFFICE-98785544

Vehicle Particulars

Manufacturer	TOYOTA
Model	VIOS 1.5E A
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	A28961220TMP
Cover Note Number	

Driver

Name of Driver	HOH XIN EN, JOVELL
NRIC No	S9527059Z
Date Of Birth	24/07/1995
Occupation	INDOOR
Date Of Driving Pass	03/02/2014
Driving Experience	4 YEARS AND 1 MONTH
Gender	FEMALE
Mobile Number	(LOCAL) +65-87143306
Fax Number	
Contact Number	OFFICE-87143306
Email Address	NOEMAIL

Address	BLK 20 LORONG 7 TOA PAYOH #06-740
Postcode	310020
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	2
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)	2
Passenger 1	NAME: : - GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	ANG MO KIO SOUTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 81 ANG MO KIO AVE 3 , POSTCODE: 569929 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4519999 - FAX NO: 65535679
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20180510/2030. VEHICLES HAS BEEN SOLD.

Attachment(s)

Are accident photos available for attachment?	NOT AVAILABLE DUE TO CIRCUMSTANCES OF ACCIDENT
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHD5848Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	LIM TECK HOCK
NRIC/Passport Number	S1189264G
Contact Number	82818981
Address	

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver) 1

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

Esplende Dr

	A	R		
	X	X		

A: SJR8121C
B: JWD5848Y

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

refer to police report - 7/10/18 0510/1030.

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

Police Station Of Origin
Ang Mo Kio South N.P.C.
81 Ang Mo Kio Avenue 3 SINGAPORE
569820
Tel No: 1800-4519999

1 of 3
Report No: T/20180510/2039

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/05/2018 10:43	Video Report No.	Station Diary No. 61
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Informant's Particulars

Name of Informant: HOH XIN EN JOVELL		Address: APT BLK 20 LORONG 7 TOA PAYOH #06-740 SINGAPORE 310020	
ID Type / ID No: NRIC NO / S9527059Z		Contact No: Home/Office: Mobile: 87143305	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Female	Age: 22	Date of Birth: 24/07/1995	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: Student		Driving Licence Information: Class: Date of Expiry:	

General Information of the Accident

Type of Accident: Non-Injury Others:	Drink Drive: No	Date/Time of Accident: 25/03/2018 22:30	Type of Location: T-Junction
Location: Along Road 1 FULLERTON ROAD			
Traffic light outside Fullerton Bay			
Weather: Clear	Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way	Traffic Control: Traffic Light - Working	Traffic Volume: Heavy	
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
SHD5848Y	Car	RENAULT	LATITUDE 2.0L DCI AUTO D/AB 4DR	Red	Slightly Damaged	0
SJR812K	Car	TOYOTA	VIOS 1.5E A	Black	Slightly Damaged	1

Police Report



**SINGAPORE
POLICE FORCE**



T/20180510/2030

Police Station Of Origin:
Ang Mo Kio South N.P.C.
81 Ang Mo Kio Avenue 3 SINGAPORE
569629
Tel No: 1800-4519996

2 of 3

Report No: T/20180510/2030

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	Lim Teck Hock	ID No.	S1189264G
Related Vehicle	SHD5848Y (Car)	Contact No.	82818961
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	HOH XIN EN, JOVELL	ID No.	S9527059Z
Related Vehicle	SJR812K (Car)	Contact No.	87143308
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 25/03/2018 at about 10.25am, I was driving my car (plate number SJR812K) along Fullerton Road. As I was approaching the traffic light outside the Fullerton Bay, the traffic light turned amber and I had already started breaking. However, there is a taxi in front of me (plate number SHD5848Y) of about one car length ahead that had made at emergency brake in front of me as his car has crossed the white line. The taxi then reversed and as I have not come to a complete stop, the front of my car had collided into the rear of the said taxi.

No Traffic Police or Ambulance came to scene. Both cars are slightly damaged, no one is injured. I am lodging this report under instructions from SI Cecilia from Traffic Police.

Police Report



POLICE FORCE



T/20180510/2030

Police Station Of Origin
Ang Mo Kio South N P C
81 Ang Mo Kio Avenue 3 SINGAPORE
569829
Tel No: *800-4518888

3 of 3

Report No: T/20180510/2030

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:

F /

Sgt 2 ELLIE PRATIWI RAHMASARIYANTI BINTI
MOHAMED YUSOF

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

10/05/2018 10:43

Officer In Charge Of Case:

TP / GIA /
Staff Sgt TANG SIEW PING
Contact No.: 65476430

Classification Of Case:

Authentication Stamp

NP168

PURCHASE / SALES AGREEMENT

NAME Bonny Lee Zhou Shun VC NO 587231937
 OF Platinum Leasing HK Ltd. TEL 81870446
 HEREBY CONFIRM THE PURCHASE / SALES OF THE MENTION VEHICLE FROM / TO:
 NAME Vincent TAN CHIE YONG VC NO 573373464
 OF - TEL 98785544
 AT AGREED PRICE \$18000 \$ \$18000
 DEPOSIT - \$ -
 BAL ON DELIVERY - \$ -
 FINANCE CO Hong Leung DATE DUE 17/5/2018 FINANCE BALANCE \$14887.10
 FULL SETTLEMENT FEE - BALANCE DUE -
 MAKE / MODEL Totola Vias 1.5A REG NO SJR 812 K
 ENGINE NO 1A2X431024 REG DATE 23 MAY 2006
 CHASSIS NO MR0534Y4204137675

REMARKS

- In The Event of the purchasers failing to pay the balance, the vendor shall have the right to seize the car and forfeit the deposit paid by the purchaser.
- It's agreed that the buyer will be fully responsible for the vehicle for any illegal acts which may rise from the use thereof including traffic offences.

from 17/5/2018 at - am/pm.

Signature of Seller

\$

Cash/Cheque

Signature of Buyer

Note: In case breach of Agreement

- The seller will have to pay Double of the deposit amount Exact pay to him/her.
- The buyer will have his deposit forfeited.

