#### 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 witholding 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

7. By the lodgement of this report to the insurers, you hereby aforesaid.	consent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	12/11/2018 14:04
Date Of Accident	11/11/2018 22:20
Exact Location Of Accident	PIE TWDS CHANGI AIRPORT NEAR T4 EXIT
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SJJ2649U
Insured/Policyholder	
Name Of Registered Owner	SUPER STAR LIMO & CAR RENTAL
Co Reg No	53359119L
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-96233308
Vehicle Particulars	
Manufacturer	HONDA
Model	STREAM
Exact Purpose for which vehicle was being used time of accident	d at COMMERCIAL
Are you claiming under your own insurance poli for repair to your vehicle?	<sup>CY</sup> YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5092249196-01
Cover Note Number	-
Driver	
Name of Driver	TAN IIINWEI (CHEN IIINWEI)

Name of Driver TAN JUNWEI (CHEN JUNWEI)

NRIC No S8210602B Date Of Birth 01/04/1982 Occupation **OUTDOOR** 16/08/2006 **Date Of Driving Pass** 

**Driving Experience** 12 YEARS AND 2 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-81250852

Fax Number

**Contact Number** 

**EMail Address NOEMAIL** 

BLK 215A COMPASSVALE DR #08-518 Address

Postcode

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** DRY Road Surface

Other Information

Was any foreign vehicle involved in this accident?

JJV6238 (PRIVATE CAR) Foreign Vehicle Registration Number

Number of vehicles involved in the accident

YES Was any body injured in the Accident?

Was any injured conveyed to hospital by NO ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

Number of Passengers (Including Driver) 1

**Details of Police Action** 

Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name SENGKANG NEIGHBOURHOOD POLICE CENTRE

NO

NO

YES

ROAD: 2 SENGKANG SQUARE #01-02 SINGAPORE, POSTCODE: Police Station Address

545025, COUNTRY: SINGAPORE

TEL NO: 1800 - 3438999 - FAX NO: Police Station Contact

Was notice of intended Prosecution given?

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

Remarks/ Reasons: WITH DRIVER

Was there any audio recorded? NO

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

SLN8255M Vehicle Registration Number

Vehicle Make/Model/Colour

**Details Of Properties** 

PRIVATE CAR Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address Postcode

Page 2 of 23

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## **DETAILS OF OTHER VEHICLE PROPERTY 2**

Vehicle Registration Number

JJV6238

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category PR

Name of Driver

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

PRIVATE CAR

### **DETAILS OF INJURED PERSON 1**

Name TAN JUNWEI (CHEN JUNWEI)

Approximate Age

Injuries Sustain SWELLING LEFT ARM AND HAND

Injured person in which vehicle? SJJ2649U

Were seat belts worn? YES

Was this injured conveyed to hospital by

ambulance?

NO

Address

Postcode

### SKETCH PLAN

#### IMPORTANT NOTICE

- 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.
- information provided must be as <u>truthful</u> and accurate as <u>possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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. 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.
- 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:
  - 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.

SUPER STAR LIMO & CAR RENTAL

Policyholder's Signature Date & Time: Sp

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

Reporting Centre Personnel's Signature Name:

Name: NRIC/FIN No.:

## **Accident Sketch Plan**

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CLARATION Ve declare the forego SUPER STAR LIMO & C Reg. No.: 5335911	AR RENTAL	's are true in	every respect.					
Ve declare the forego SUPER STAR LIMO & C Reg. No.: 5335911	AR RENTAL	_ <	F		, and the second	Inn		
Ve declare the forego	AR RENTAL	Driver's S	ignature is not the policyhol	lder)	Reportin Name:	ng Centre Personne	il's Signature	





Police Station Of Origin:

Sengkang N.P.C

2 Sengkang Square #01-02 SINGAPORE

545025

Tel No: 1800-343 8999

1 of 4 Report No. T/20181112/2014

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: Vide Report No.: Station Diary No.: 12/11/2018 04:21 16 Informant's Particulars Name of Informant: Address: TAN JUNWEI APT BLK 215A COMPASSVALE DRIVE #08-518 SINGAPORE 541215 ID Type / ID No.: Contact No.: NRIC NO / S8210602B Home/Office: Mobile: 81250852 Nationality: Email: SINGAPORE CITIZEN Sex: Age: Date of Birth: Type of Informant: Male 36 01/04/1982 Driver Race: Language: Institution / School Name: Chinese Mandarin Occupation: Driving Licence Information: Grab Driver Class: 3 Date of Expiry:

General Infor	mation of the Accident			
Type of Accident:	Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 11/11/2018 22:20	Type of Location Straight Road
	EXPRESSWAY	inal 4 exit Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collis Between Mov	ion: ing Vehicles - Head To	Rear		Anyone conveyed by ambulance:

Details of Vehicle Involved							
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger	
JJV6238	Car			Silver	Slightly Damaged	0	
SJJ2649U	Car	HONDA	STREAM	Brown	Seriously Damaged	0	
SLN8255M	Car	BMW		White	Seriously Damaged	0	

hicle Insurance		STOCKSER	Auto Control
Insurance Company	Insurance No	Effective	Expiry Date
		Inquirones Company	Inquirones Company





Police Station Of Origin: Sengkang N.P.C 2 Sengkang Square #01-02 SINGAPORE 545025

2 of 4 Report No. T/20181112/2014

Tel No: 1800-343 8999

CONTINUATION OF REPORT

Details of V	ehicle Insurance			
Vehicle No.	Insurance Company	Incurance No.	I was	
	NTUC Income Inc.	Insurance No 5092249196-01	Effective	11/04/2019
	Limited Co-Operative		12/04/2018	

Details of Pers	on Involved					
Any Pedestrian	Involved: No					
No. of Pedestria	ns Injured: NII	111				
Driver	mo mjered. NIL	Use of F	edestria	n Cro	ssing: NA	
Name	Unknown Driver		IDN	0.	NIL	
Related Vehicle	JJV6238 (Car)			act No	. NIL	
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL	
Date Treatment		Date Dis	charge	NIL	1	
No. of Days gran	nted Medical Leave NIL	Degree o	of Injury	NIL		
Driver		and the second	21 Hijury	IAIL		
Name	TAN JUNWEI		ID No		S8210602B	
Related Vehicle	SJJ2649U (Car)		Contact No.		81250852	
Hospital/Clinic	NIL		Class Drivin Licent	g ce &	Class: 3 Date of Expiry: NIL	
Date Treatment	NIL	Data Dia	Expiry	_		
lo. of Days gran	ed Medical Leave NIL	Date Disc	narge	NIL		
river	IVIL	Degree o	Injury	Sligh	t	
lame	Unknown Driver		ID No.		NIL	
Related Vehicle	SLN8255M (Car)		Contact No.		NIL	
lospital/Clinic				of e &	Class: NIL Date of Expiry: NIL	
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Police Station Of Origin: Sengkang N.P.C 2 Sengkang Square #01-02 SINGAPORE 545025

3 of 4 Report No. T/20181112/2014

Tel No: 1800-343 8999

CONTINUATION OF REPORT

## Brief Details.

On 11/11/2018 at about 10.19 pm, I was driving my vehicle bearing registration plate no. SJJ2649U along lane 2 of PIE towards Changi Airport near to Terminal 4 exit when I started to filter to lane 3. After filtering to lane 3, the vehicle bearing registration plate no. SLN8255M which was travelling in front of my vehicle suddenly applied emergency brake. As such, I also applied emergency brake on my vehicle but I was unable to stop in time and the front of my vehicle collided onto the rear of the vehicle SLN8255M. Thereafter, I alighted from my vehicle and realized that there is another Malaysia registered vehicle bearing registration plate no. JJV6238 in front of the vehicle SLN8255M. The vehicle SLN8255M had collided onto the rear of the Malaysia's vehicle. I did not managed to take down the particulars of both the vehicle's drivers and I suffered some swelling on my left arm and hand.

Page 8 of 23





Police Station Of Origin: Sengkang N.P.C 2 Sengkang Square #01-02 SINGAPORE 545025 Tel No: 1800-343 8999

4 of 4 Report No. T/20181112/2014

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:	Signature Of Informant:
Staff Sgt LEE SHAO WEI	- 100
Signature Of Interpreter:	Date Time
Not applicable	Date/Time: 12/11/2018 04:21
Officer In Charge Of Case:	Classification Of Case:
TP / AEIT /	Classification of Case;
SSI 2 YEO GEAK ENG CECILIA	
Contact No.: 65476404	1 25-25
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