

## 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	17/12/2018 14:22
Date Of Accident	15/12/2018 12:15
Exact Location Of Accident	JUNC OF GUILLEMARD RD & CASSIA LINK
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKU6142T
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAY HUNG TUENG
NRIC No	S1176064C
Email Address	PHILTHT.PT@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96167289
Alternative Phone No	OTHERS-96167289

### Vehicle Particulars

Manufacturer	TOYOTA
Model	CAMRY
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5084748162-01
Cover Note Number	

### Driver

Name of Driver	TAY HUNG TUENG
NRIC No	S1176064C
Date Of Birth	06/07/1956
Occupation	INDOOR
Date Of Driving Pass	24/11/1981
Driving Experience	37 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96167289
Fax Number	
Contact Number	OTHERS-96167289
Email Address	PHILTHT.PT@GMAIL.COM

Address	507 SEMBAWANG ROAD #02-52
Postcode	757709
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
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	CLOUDY
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?	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)	1

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	YISHUN NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 31 YISHUN CENTRAL , <b>POSTCODE:</b> 768827 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-8529999 - <b>FAX NO:</b> 68522299
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20181215/2096

#### Attachment(s)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBD4232B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	KHAIRULL SJAM BIN SABRI
NRIC/Passport Number	S7133511I
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

## Accident Sketch Plan

### SKETCH PLAN

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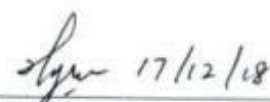
#### **8. Consent under the Personal Data Protection Act (PDPA)**

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:

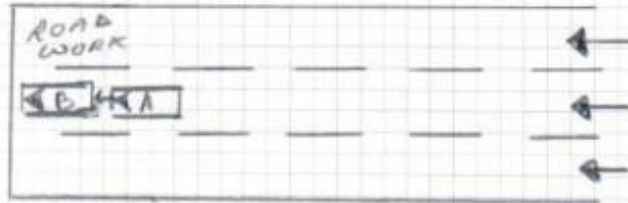
\_\_\_\_\_  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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

# Accident Sketch Plan

SKETCH PLAN  
CASSIA  
LINK

GUILLEMAUD ROAD



A - SKU6142T  
B - GBD4232B

## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Pls refer to the police report: T/20181215/2096

## 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.:

# Individual Statement



**SINGAPORE  
POLICE FORCE**



T/20181215/2096

Police Station Of Origin:  
Yishun North N.P.C  
31 Yishun Central SINGAPORE 768827  
Tel No: 1800-8529999

2 of 3

Report No. T/20181215/2096

## CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TAY HUNG TUENG	ID No.	S1176064C
Related Vehicle	NIL	Contact No.	96167289
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

### Brief Details.

On 15/12/2018 at about 1215hrs, I was driving along Guillemard Road towards Nicoll Highway on the extreme right lane. As the traffic was heavy and there were road works conducted on the said lane, I had signalled left to switch to the second lane and safely filtered to changed lane. Upon reaching the Traffic junction, the Cisco van which was in front of me had stopped as the lights had changed to red. I had also stopped at a safe distance behind the vehicle.

A few seconds later, the car to my left had moved off. As such, I had thought that the traffic lights had changed to green and I had stepped on my accelerator. Suddenly, I realised that the Cisco van had not moved off and I immediately stepped hard on my brakes. I had managed to stop on time however my front bumper had slightly hit the rear bumper of the said van.

I had alighted from my vehicle and spoke to the van's driver. The driver is on Khairull Sjam Bin Sabri, S7133511I. There was no one injured during the incident. There was only a slight crack on my number plate. There were no visible damaged to the Cisco Van. There is a camera installed at the rear of the van. I am lodging this report as requested by the Cisco personnel. That is all.



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo





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Accident Photo



# Police Report



**SINGAPORE  
POLICE FORCE**



T/20181215/2096

Police Station Of Origin:  
Yishun North N.P.C  
31 Yishun Central SINGAPORE 768827  
Tel No: 1800-8529999

1 of 3

Report No: T/20181215/2096

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 15/12/2018 17:30		Vide Report No.:		Station Diary No.: 124	
<b>Informant's Particulars</b>					
Name of Informant: TAY HUNG TUENG			Address: 507 SEMBAWANG ROAD #02-52 SINGAPORE 757709		
ID Type / ID No.: NRIC NO / S1176064C			Contact No.: Home/Office: Mobile: 96167289		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 82	Date of Birth: 06/07/1956	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Retail/Shop sales manager			Driving Licence Information: Class: 3 Date of Expiry:		

## General Information of the Accident

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 15/12/2018 12:15	Type of Location: X-Junction
Location: Along Road 1 GUILLEMARD ROAD CASSIA LINK				
Weather: Cloudy		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: Heavy
Type of Collision: Moving Vehicle Against - Others				Anyone conveyed by ambulance: No

## Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GRD4232B	Van					0
SKU6142T	Car	TOYOTA	CAMRY 2.0 AUTO ABS AIRBAG	Silver	Slightly Damaged	0

## Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKU6142T	NTUC Income Insurance Co-Operative Limited	5084748162-01	28/10/2017	27/04/2019

# Police Report



**SINGAPORE  
POLICE FORCE**



T/2018/1215/0096

Police Station Of Origin:  
Yishun North N.P.C  
31 Yishun Central SINGAPORE 768327  
Tel No: 1800-8529999

2 of 3

Report No: T/2018/1215/0096

## CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TAY HUNG TUENG	ID No.	S1176064C
Related Vehicle	NIL	Contact No.	95167289
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

### Brief Details.

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## Police Report



SINGAPORE  
POLICE FORCE



T/20181215/2096

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31 Yishun Central SINGAPORE 768827  
Tel No: 1800-8529999

3 of 3

Report No: T/20181215/2096

### 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: L / Sgt 2 NUR RAUDHA BINTE SHEIKH ABDUL NAZIR	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 15/12/2018 17:30
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case: 
Authentication Stamp NP188	