

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	15/12/2018 14:32
Date Of Accident	14/12/2018 22:00
Exact Location Of Accident	MIDDLE ROAD TO NICHOLL HIGHWAY (BEFORE BEACH RD).
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKW3321C
Insured/Policyholder	
Name Of Registered Owner	TOH JU HONG
NRIC No	S8436223I
Email Address	JOHNSONTOH84@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91507684
Alternative Phone No	OFFICE-91507684

Vehicle Particulars

Manufacturer	KIA
Model	K3
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	PRIVATE CAR

Insurance Company

Name of Insurance Company	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D18MPC0001126
Cover Note Number	

Driver

Name of Driver	TOH JU HONG
NRIC No	S8436223I
Date Of Birth	28/11/1984
Occupation	INDOOR
Date Of Driving Pass	16/12/2008
Driving Experience	9 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91507684
Fax Number	
Contact Number	OFFICE-91507684
Email Address	JOHNSONTOH84@GMAIL.COM

Address	BLK 152 CANBERRA DR #10-14, THE BROWNSTONE
Postcode	768080
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 - 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?	YES
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)	2
Passenger 1	NAME: : TAN CHEW MUI. EILEEN GENDER: : FEMALE

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	ROAD: 31 YISHUN CENTRAL , POSTCODE: 768827 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8529999 - FAX NO: 68522299
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE POLICE REPORT NO.T/20181218/2006.

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	SHD2776R
Vehicle Make/Model/Colour	
Details Of Properties	VEH B
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	

Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name TOH JU HONG
Approximate Age
Injuries Sustain
Injured person in which vehicle? SKW3321C
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?
Address
Postcode

DETAILS OF INJURED PERSON 2

Name TAN CHEW MUI, EILEEN
Approximate Age
Injuries Sustain
Injured person in which vehicle? SKW3321C
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?
Address
Postcode

Accident Sketch Plan Pg. 1

SKETCH PLAN

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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:

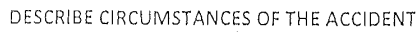
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "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.

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.:

DISCUSSION



DECLARATION

Policyholder's Signature _____
Date & Time: _____

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Accident Sketch Plan Pg. 1



**SINGAPORE
POLICE FORCE**



T/20181215/2006

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

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Report No. T/20181215/2006

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 15/12/2018 02:35		Vide Report No.:		Station Diary No.: 15	
Informant's Particulars					
Name of Informant: TOH JU HONG			Address: 152 CANBERRA DRIVE #10-14 THE BROWNSTONE SINGAPORE 768080		
ID Type / ID No.: NRIC NO / S84362231			Contact No.: Home/Office: Mobile: 91507684		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 34	Date of Birth: 28/11/1984	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Electrical engineer (general)			Driving Licence Information: Class: 2B,3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 14/12/2018 22:00	Type of Location: Straight Road
Location: Along Road 1 MIDDLE ROAD Towards Nicoll Highway before Beach Road				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHD2776R	Car	TOYOTA	PRIUS HYBRID 1.8L A			0
SKW3321C	Car	KIA	CERATO FORTE KOUP 1.6 AT SX ABS D/AB SR	Red	Seriously Damaged	1

Accident Sketch Plan Pg. 1



**SINGAPORE
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T/20181215/2006

Police Station Of Origin:
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Tel No: 1800-8529999

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Report No. T/20181215/2006

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKW3321C	INDIA INTERNATIONAL INSURANCE PTE LTD	D18MPC0001126	23/08/2018	22/08/2019

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	TOH JU HONG		ID No.	S8436223I
Related Vehicle	SKW3321C (Car)		Contact No.	91507684
Hospital/Clinic	KHOO TECK PUAT HOSPITAL		Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	15/12/2018		Date Discharge	15/12/2018
No. of Days granted Medical Leave	05	Degree of Injury	Slight	
Passenger				
Name	TAN CHEW MUI, EILEEN		ID No.	S8422585A
Related Vehicle	SKW3321C (Car)		Contact No.	98267576
Hospital/Clinic	KHOO TECK PUAT HOSPITAL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	15/12/2018		Date Discharge	15/12/2018
No. of Days granted Medical Leave	05	Degree of Injury	Slight	

Brief Details.

On the 14/12/2018 at around 2200hrs, I was driving along Middle Road heading towards Nicoll Highway. I was driving a Red Kia Cerato Forte with plate number SKW3321C. The road I was driving on was a 3 lane road. I was driving on the second lane. While driving along Middle Road nearing the junction of Beach Road, there was a Prime Taxi which is a Toyota Prius with plate number SHD2776R, did an abrupt lane change from lane 3 to lane 2. While the taxi driver was changing lane, the taxi driver hit the left side of my vehicle. At that point in time, I had a passenger in my vehicle.

After the accident, the taxi driver and I got out of the vehicle however, the taxi driver refused to give any particulars and immediately left the scene. No TP and ambulance were at scene. I have an in car camera facing the front and back of my vehicle that should've captured the footage of the accident. There is a witness who has also given me footage of the accident from his point of view. After the accident, I then proceeded to Khoo Teck Puat Hospital with my passenger and we were given 5 days MC.

Accident Sketch Plan Pg. 1



**SINGAPORE
POLICE FORCE**



T/20181215/2006

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

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Report No. T/20181215/2006

CONTINUATION OF REPORT



**SINGAPORE
POLICE FORCE**



T/20181215/2006

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

Report No. T/20181215/2006

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 / <i>LOW WEI DE</i> Sgt 2 <i>LOW WEI DE</i>	Signature Of Informant: <i>[Signature]</i>
Signature Of Interpreter: Not applicable	Date/Time: 15/12/2018 02:35
Officer In Charge Of Case: TP / HRT / SI KALESWARI PALANI Contact No.: 65476902	Classification Of Case: 0100
Authentication Stamp NP168	

Accident Sketch Plan Pg. 1



REPUBLIC OF SINGAPORE DRIVING LICENCE


 Licence Number: **S8436223I**
 Name: **TOH JU HONG (ZHOU JIHONG)**
 Birth Date: **1984**
 Issue Date: **13 Oct 2003**

000922808G



REPUBLIC OF SINGAPORE


 IDENTITY CARD NO. **S8436223I**


Name: **TOH JU HONG (ZHOU JIHONG)**
 卓 继 鸿
 Race: **CHINESE**
 Date of birth: **28-11-1984** Sex: **M**
 Country/Place of birth: **SINGAPORE**

S8436223I

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


Class	Description	Pass Date
Class 2B	Motorcycles =< 200 CC	13 Oct 2003
Class 3	Motor cars =< 3000 kg with =< 7 passengers, exclusive of the driver; and motor tractors/vehicles =< 2500 kg	16 Dec 2008

S/N: 9000091090

S8436223I

NA428A


Licence No: S8436223I



5475319



NRIC No. **S8436223I**



Date of issue: **26-05-2015**
 152 CANBERRA DRIVE #10-14
 THE BROWNSTONE SINGAPORE 768080
 NRIC No. **S8436223I** Date: **01/12/2018**

Accident Sketch Plan Pg. 1



INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703702K | GST Reg. No. M2 0078806-X
 65 Cecil Street | #03 | #05 | #06-02 | DB Building | Singapore 049711
 Office (65) 63476100 Email: insure@in.com.sg
 Fax: (65) 62244174 Website: www.in.com.sg

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
 MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES, 1960 (ROAD TRANSPORT ACT, 1987 (MALAYSIA))
 MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

All Accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

CERTIFICATE NO.: D18MPC0001126		COVER: COMPREHENSIVE
1. Index Mark and Registration Number of Vehicle	:	SKW3321C
Chassis No	:	KNAFW611MA5203199
2. Name of Policyholder	:	TOH JU HONG
3. Effective date of Insurance	:	23 Aug 2018
4. Expiry date of Insurance	:	22 Aug 2019
5. Persons or Classes of Persons entitled to drive*		
(a) The Policyholder The Policyholder may also drive a Motor Car not belonging to or hired (under a hire purchase agreement or otherwise) to him/her or his/her employer or his/her partner. (b) Any other person who is driving on the Policyholder's order or with his/her permission. Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle		
6. Limitations as to use*		
Use only for social, domestic and pleasure purposes and for the Policyholder's business.		
The Policy does not cover		
a) Use for hire or reward. b) Use for racing, pace-making, reliability trial, speed-testing. c) Use for the carriage of goods other than samples in connection with any trade or business. d) Use for any purpose in connection with the Motor Trade.		
*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.		
Insured & Named Drivers Excess Sect I : SGD600.00 Unnamed Drivers Excess Sect I : SGD1,100.00 Windscreen Excess : SGD100.00 Hire Purchase Company : DBS Bank Ltd FOR DRIVERS BELOW 21 YEARS OR ABOVE 65 YEARS OF AGE &/OR LESS THAN 2 YEARS SINGAPORE DRIVING LICENCE, ADDITIONAL EXCESS OF \$2500/- ON SECTION I WILL BE APPLICABLE.		
I/We HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia). Agent/Broker : A000050/Sunmex Enterprise Date of Issue : 06/08/2018 11:17:01 MX1-Private Car (Insured Driving)		
		For India International Insurance Pte Ltd R. Ravindra Kumar MD & CEO

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

