#### 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 <u>truthful and accurate</u> 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 aforesaid.

Service and the service of	
MARKET HE STATE OF THE STATE OF	ACCIDENT STATEMENT
Date Of Report	29/12/2018 11:31
Date Of Accident	28/12/2018 17:10
Exact Location Of Accident	PIE TOWARDS TUAS
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SHB1884D
Insured/Policyholder	
Name Of Registered Owner	SMRT TAXIS PTE LTD
Co Reg No	198905369K
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-80000000
Vehicle Particulars	
Manufacturer	TOYOTA
Model	PRIUS TAXI-1.8 (A)
Exact Purpose for which vehicle was being used at time of accident	HIRE AND REWARD
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	TAXI
Insurance Company	
Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	D-18090213MFSH
Cover Note Number	
Driver	
Name of Driver	YEO NGEE BOON
NRIC No	S0703419I
Date Of Birth	02/07/1948
Occupation	OUTDOOR
Date Of Driving Pass	11/12/1974
Driving Experience	44 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-80000000
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address

Postcode

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured

OTHER - HIRER

114

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

Road Surface

DRY

#### Other Information

Was any foreign vehicle involved in this accident?

YES

Foreign Vehicle Registration Number

WJB1382 (PRIVATE CAR)

Number of vehicles (including own vehicle)

involved in the accident

6

Was any body injured in the Accident?

NO

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.

NO

Number of Passengers (Including Driver)

Passenger 1

NAME:

: UNKNOWN

GENDER:

: MALE

Passenger 2

NAME:

: UNKNOWN

GENDER:

: MALE

Passenger 3

NAME:

: UNKNOWN

GENDER:

: FEMALE

### **Details of Police Action**

Was the accident reported to the police?

YES

If Yes, Please state which Police Station

TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY

Police Station Name Police Station Address

ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY:

SINGAPORE

Police Station Contact

TEL NO: 65470000 - FAX NO:

Was notice of intended Prosecution given?

NO

If Yes, against whom?

### Circumstances of Accident

REFER TO POLICE REPORT - T/20181229/2033 ON THE ABOVE MENTIONED DATE, TIME AND LOCATION. THE ROAD SURFACE WAS DRY AND THE TRAFFIC FLOW WAS MODERATE, I WAS DRIVING ON THE 1 LANE OUT OF 4 LANE. I WAS ABLE TO SEE THE ACCIDENT AHEAD AND I STARTED TO APPLY MY BRAKES ON TIME, BUT THEN THE VEHICLE BEHIND ME COLLIDED ONTO MY REAR, WHICH SURGE MY VEHICLE FORWARD COLLIDING ONTO THE VEHICLE IN FRONT. THAT'S ALL.

#### 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

**SLH1072B** 

Vehicle Make/Model/Colour

**Details Of Properties** 

Vehicle Category

Name of Driver

PRIVATE CAR LIM QIAN LING

NRIC/Passport Number

S8320918F

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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

Vehicle Registration Number

WJB1382

Vehicle Make/Model/Colour

**Details Of Properties** 

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 OTHER VEHICLE PROPERTY 3**

Vehicle Registration Number

SKA8827T

Vehicle Make/Model/Colour

**Details Of Properties** 

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 OTHER VEHICLE PROPERTY 4**

Vehicle Registration Number

SKM4848X

Vehicle Make/Model/Colour

**Details Of Properties** 

PRIVATE CAR

Vehicle Category Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## DETAILS OF OTHER VEHICLE PROPERTY 5

Vehicle Registration Number

SHB7822T

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category

TAXI

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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DECLARATION	articulars are true in over	v respect			,
/We declare the foregoing p	articulars are true in ever	y respect.		1 28/11	120
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(0)		501.1			_
Policyholder's Signature	Driver's Signat			Reporting Centre Personnel's Signature Name:	
Date & Time:	(If driver is not Date & Time:	t the policyholder)		NRIC/FIN No.:	

#### Sketch Plan Pg. 2

#### SKETCH PLAN

#### IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 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.
- 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:
  - (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:

Drive 's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Mr 29 /1/24

Name:

NRIC/FIN No.:





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

1 of 3 Report No. T/20181229/2033

REPORT OF A TRAFFIC ACCIDENT		
Date/Time Report Made: 29/12/2018 10:07	Vide Report No.: G/20181228/0145	Station Diary No.:
Informant's Particulars		
Name of Informant: YEO NGEE BOON	Address: APT BLK 114 LORON 381114	G 3 GEYLANG #07-55 SINGAPORE
ID Type / ID No.: NRIC NO / S0703419I	Contact No.: Home/Office:	Mobile: 0624 0070
Nationality:	Email:	Mobile: 96319973

SINGAPORE CITIZEN Sex: Age: Date of Birth: Type of Informant: Male 70 02/07/1948 Driver Race: Language: Institution / School Name: Chinese Chinese Occupation: Driving Licence Information: Taxi driver Class: 3 Date of Expiry:

General information of the Accident Non-Injury Type of Drink Date/Time of Attended by Police Type of Location: Accident: Drive: Accident: Straight Road No 28/12/2018 17:10 Location: Along Road 1 PAN-ISLAND EXPRESSWAY PIE(TUAS) Weather: Road Surface: Road Speed Limit: Clear Traffic Flow: Traffic Control: One Way Traffic Volume: Not Controlled Moderate Type of Collision: Between Moving Vehicles - Head To Rear Anyone conveyed by ambulance: Yes

Vehicle No.	Type	Make	Model	Color	Marie Transport Control (Co.)	<b>建</b> 等特别是其中共和国的
FBH5360L	Motorcycle	NATIONAL PROPERTY OF THE PARTY	INIOGE	Color	Condition	No of Passenger
						0
SHA7523L	Car				-	
21.10			1			0
SHB1884D	Car					
SHB7822T	0				1	0
311070221	Car					0
SKA8827T	Car					U
310 1002/1	Cai					0

#### Sketch Plan Pg. 4





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

2 of 3 Report No. T/20181229/2033

#### CONTINUATION OF REPORT

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Vehicle No.	lype	Make	Model	Color	Condition	No of Passenge
SKM4848X	Car			AND DESCRIPTION OF THE PROPERTY OF THE PROPERT		in o of the doser ige

No. of Pedestrian	ns Injured: NIL		Use of Pe	doctria	Cross	ing. NA
Driver			USG OF FE	destria	TCross	ang. NA
Name	YEO NGEE BOON			ID No	).	S0703419I
Related Vehicle	SHB1884D (Car)		Conta	act No.	96319973	
Hospital/Clinic	NIL			Class Drivin Licend Expire	g	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Disc		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of		NIL	

## Brief Details.

ON THE ABOVE MENTIONED ON THE DATE, TIME AND LOCATION.
THE ROAD SURFACE WAS DRY AND THE TRAFFIC FLOW WAS MODERATE, I WAS DRIVING ON THE 1 LANE OUT OF 4 LANE. I WAS ABLE TO SEE THE ACCIDENT AHEAD AND I STARTED TO APPLY MY BRAKES ON TIME, BUT THEN THE VEHICLE BEHIND ME COLLIDED ONTO MY REAR, WHICH SURGE MY VEHICLE FORWARD COLLIDING ONTO THE VEHICLE IN FRONT.
THAT'S ALL.

## Sketch Plan Pg. 5





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

3 of 3 Report No. T/20181229/2033

11

CONTINUATION OF REPORT

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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: TP / KEE CHUAN JIA MARCUS	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 29/12/2018 10:07
Officer In Charge Of Case: TP / GIT / Sr Staff Sgt SHAHRUL NIZAM BIN SAMARRI	Classification Of Case:
Contact No.: 65476904	
Authentication Stamp NP168	NV

## > Back to OneMotoring

## **Enquire Transfer Fee**

/ehicle No. :	SHB1884D
/ehicle Type :	H10 - Public Transport Taxi (Motor Car)
/ehicle Attachment 1 :	Air-Con (Taxi)
Vehicle Scheme :	Taxi (Company)
Vehicle Make :	TOYOTA
Vehicle Model :	PRIUS TAXI (SMRT)
Chassis No. :	JTDKN36U305746581
Propellant:	Petrol-Electric Petrol-Electric
Engine No. :	2ZR1385773
Motor No.:	3JM1385773
Engine Capacity :	1798 cc
Power Rating :	60.0 kW
Maximum Power Output :	100.0 kW (134 bhp)
Maximum Laden Weight:	1805 kg
Unladen Weight:	1370 kg
Year Of Manufacture :	2014
Original Registration Date :	25 Jun 2014
Lifespan Expiry Date :	24 Jun 2022
COE Category :	A - Car up to 1600cc & 97kW (130bhp)
PQP Paid :	\$57,338.00
COE Expiry Date :	24 Jun 2022
Road Tax Expiry Date :	24 Jun 2019
PARF Eligibility Expiry Date :	24 Jun 2022
Inspection Due Date :	24 Jun 2019
Intended Transfer Date :	03 Jan 2019
CO2 Emission :	92.00 (g/km)
CEV/VES Rebate Utilised	\$30,000.00
Amount:	
CO Emission :	
HC Emission :	
NOx Emission :	
PM Emission :	

Road tax, including Over Payment (if any), of a vehicle will follow the vehicle to the new registered owner when its ownership is being transferred.

Amount Payable	Amount Before GST	GST Amount	Amount After GST
	(S\$)	(S\$)	(S\$)
Transfer Fee :	25.00		25.00
Total Amount Payable :			25.00

Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

You may print this page for reference.

OK

Print

# > Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Owner ID Type:	Company	
Owner ID:	5369K	
Vehicle Details	A THE RESIDENCE OF THE PARTY OF	
Vehicle No.:	SHB1884D	
Vehicle to be Exported:	No	
Intended Deregistration Date:	03 Jan 2019	
Vehicle Make:	TOYOTA	
Vehicle Model:	PRIUS TAXI (SMRT)	
Primary Colour:	Maroon	
Manufacturing Year:	2014	
Engine No.:	2ZR1385773	
Chassis No.:	JTDKN36U305746581	
Maximum Power Output:	100.0 kW (134 bhp)	
Open Market Value:	\$32,920.00	
Original Registration Date:	25 Jun 2014	
First Registration Date:	25 Jun 2014	
Transfer Count:	0	
Actual ARF Paid:	\$8,088.00	
Intended PARF Rebate Details		-
PARF Eligibility:	Yes	
PARF Eligibility Expiry Date:	24 Jun 2022	
PARF Rebate Amount:	\$6,066.00	
Intended COE Rebate Details		1900
COE Expiry Date:	24 Jun 2022	
COE Category:	A - Car up to 1600cc & 97kW (130bhp)	
COE Period(Years):	8	
PQP Paid:	\$57,338.00	
COE Rebate Amount:	\$24,906.00	
Total Rebate Amount: Message	\$30,972.00	

Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.

The information contained herein is correct as at 03 Jan 2019