



## 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	11/02/2019 14:26
Date Of Accident	09/02/2019 11:20
Exact Location Of Accident	JUNC OF SENGKANG WEST RD & SENGKANG WEST WAY
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKN1317B
Insured/Policyholder	
Name Of Registered Owner	TAN JUNYU
NRIC No	S8325664H
Email Address	JUNYU83@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96697894
Alternative Phone No	OTHERS-96697894
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	ELANTRA
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	THIRD PARTY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPPHQ18-004182
Cover Note Number	
Driver	
Name of Driver	TAN JUNYU
NRIC No	S8325664H
Date Of Birth	01/09/1983
Occupation	INDOOR
Date Of Driving Pass	04/10/2005
Driving Experience	13 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96697894
Fax Number	
Contact Number	OTHERS-96697894
E-Mail Address	JUNYU83@GMAIL.COM

Address	BLK 406A FERNSVALE ROAD #12-33
Postcode	791406
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	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
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: : LIM SIEW CHENG GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	SENGKANG NPC
Police Station Address	<b>ROAD: 2 SENGKANG SQUARE #01-02 , POSTCODE: 545025 , COUNTRY: SINGAPORE</b>
Police Station Contact	<b>TEL NO: - FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLS REFER TO THE POLICE REPORT:T/20190209/2122

#### 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	SMC2456K
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 INJURED PERSON 1**

Name

TAN JUNYU

Approximate Age

Injuries Sustain

NECK & SPINE

Injured person in which vehicle?

SKN1317B

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

## 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:

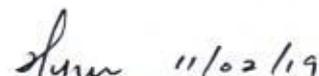
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the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

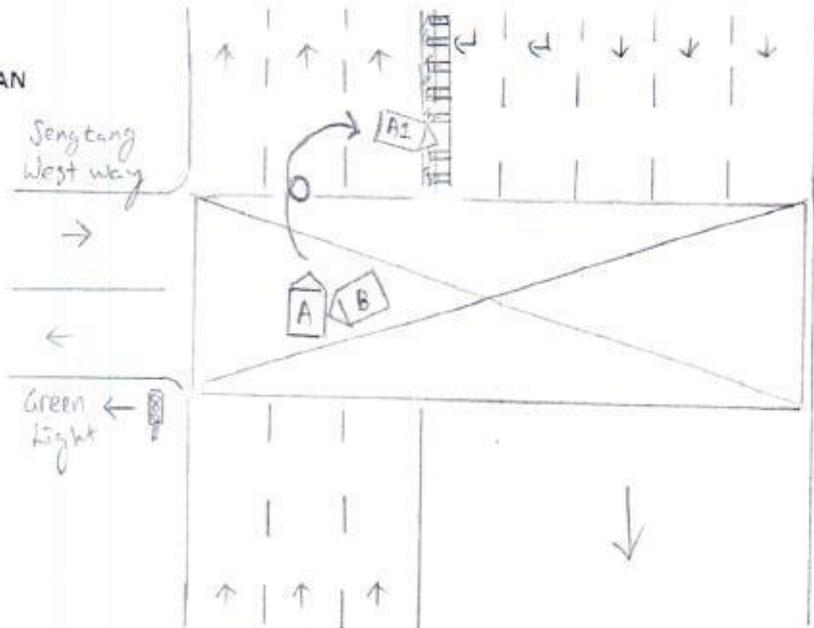


Driver's Signature  
(If driver is not the policyholder)  
Date & Time:



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

SKETCH PLAN



A = SKN1317 B  
 B = SMC2456K

Junction of  
 Sengkang West Road  
 and  
 Sengkang West Way

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report  
 Report NO: T/20190209/2122

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:

 11/02/19  
 Reporting Centre Personnel's Signature  
 Name:  
 NRIC/FIN No.:





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

Report No. T/20190209/2122

**CONTINUATION OF REPORT**

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKN1317B	EQ INSURANCE COMPANY LTD.	DMPPHQ18-004182	18/06/2018	17/06/2019

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	TAN JUNYU		ID No.	S8325664H
Related Vehicle	SKN1317B (Car)		Contact No.	96697894
Hospital/Clinic	SENGKANG GENERAL HOSPITAL PTE. LTD.		Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	09/02/2019		Date Discharge	09/02/2019
No. of Days granted Medical Leave	05		Degree of Injury	Slight
Driver				
Name	TEO WEE KEONG		ID No.	S7729192Z
Related Vehicle	NIL		Contact No.	98426005
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 the 09/02/2019 at about 1120hrs, I was driving SKN1317B along Sengkang West Road. As there was a stationary car in front of me, I then change to the right lane before approaching junction of Sengkang West Road and Sengkang West Way. I then continue to drive on as the traffic light was green however as I was driving halfway passing the junction, I suddenly felt an impact coming from the right side of my vehicle. It caused my vehicle to spin out of control and mounted the kerb, it caused damages 2 of the metal railings of the centre divider.

Once my vehicle stopped, I did not come out from the vehicle as my door was driver's door was blocked however I took a short rest before I called the police for assistance. The traffic police and ambulance came to the accident scene, I was then conveyed to hospital as I felt pain on my neck and spine area. I was given 5 days of MC due to my injuries I suffered. I also wish to state there was dent on the right side driver and passenger doors, the front bumper also was damaged due to the collision.



**SINGAPORE  
POLICE FORCE**



T/20190209/2122

4 of 4

Report No. T/20190209/2122

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

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 MUHAMMAD FAIRUZ ZAMEEN	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 09/02/2019 19:19
Officer In Charge Of Case: TP / GIT / Staff Sgt MOHAMED SUFIAN BIN MOHAMED JUNID Contact No.: 65476247	Classification Of Case: SN 085 
Authentication Stamp NP168	Signature: 

SINGAPORE ACCIDENT STATEMENT

Accident Date: 09/02/2019		Time: 11:20		(hh:mm) 24 hr format	
Location Junction of Sengkang West Road and Sengkang West Way					
Vehicle Number SKN1317B					
Insured Name Tan Junyu					
NRIC / FIN S8325664H			Contact Number 9669 7894		
Make Hyundai		Model Elantra			
Are you claiming under your own insurance policy for repair to your vehicle?					
( ) Yes If No, Pls select: ( <input checked="" type="checkbox"/> ) Third Party ( ) Reporting					
Insurance Company EQ Insurance					
Type of Policy ( <input checked="" type="checkbox"/> ) Comprehensive ( ) Third Party Fire & Theft ( ) TP Only					
Policy Number 3MPPH G 18 - 004182					
Name of Driver				( <input checked="" type="checkbox"/> ) Same as Insured	
NRIC / FIN		Contact Number			
Date of Birth 01/09/1983					
Driving Pass Date 04/10/2005					
Occupation ( <input checked="" type="checkbox"/> ) Indoor ( ) Outdoor					
Gender ( <input checked="" type="checkbox"/> ) Male ( ) Female					
Email Address junyu83@gmail.com				( ) NO EMAIL	
Address of Driver B1K 406A Fernvale Road #12-33 S (791406)					
Was driver an employee of the Insured's Company? ( ) Yes ( ) No					
If No, Relationship of the Driver with the Insured					
( <input checked="" type="checkbox"/> ) Owner ( ) Spouse ( ) Friend ( ) Relative ( ) Children ( ) Sibling					
Does the Driver Own Any Other Vehicle? ( ) Yes ( ) No					
If Yes, Vehicle Registration Number of Driver's Own Vehicle					
Insurance Company of Driver's Own Vehicle					
Weather Conditions ( <input checked="" type="checkbox"/> ) Clear ( ) Raining ( ) Others					
Road Surface ( <input checked="" type="checkbox"/> ) Dry ( ) Wet ( ) Others					
Was any foreign vehicle involved in this accident? ( ) Yes ( <input checked="" type="checkbox"/> ) No					
Was anybody injured in the accident? ( <input checked="" type="checkbox"/> ) Yes ( ) No					
If yes, injured detail Tan Junyu ( Neck, Spine )					
Was there any video captured by Car Camera? ( ) Yes ( ) No					
Was the Accident reported to the Police? ( <input checked="" type="checkbox"/> ) Yes ( ) No If yes attach police report					
DETAILS OF 3 <sup>rd</sup> party		Name / Nric		Contact	
Veh B		SMC 2456 F			
Veh C					
Veh D					
Veh E					
Veh F					

Passenger 1: Lim Siew Cheng (Female)

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S8325664H**



Name

**TAN JUNYU  
(CHEN JUNYU)**

**陈俊宇**

Race

**CHINESE**

Date of birth

**01-09-1983**

Sex

**M**

Country/Place of birth

**SINGAPORE**



*SKN1317B*

*Own & driver*

5214432



NRIC No. **S8325664H**



Date of issue

**05-09-2013**

Address

**APT BLK 408A FERNSVALE ROAD  
#12-33  
SINGAPORE 791406**

**REPUBLIC OF SINGAPORE DRIVING LICENCE**

Licence Number: **S8325664H**  
Name:  
**TAN JUNYU  
(CHEN JUNYU)**

Birth Date: 01 Sep 1983  
Issue Date: 04 Oct 2005

001373612C



SEN 1317 B

Owner & driver

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

	PASS DATE
<b>Class 3</b> Motor cars $\leq$ 3000 kg with $\leq$ 7 passengers, exclusive of the driver, and motor tractors / vehicles $\leq$ 2500 kg	04 Oct 2005

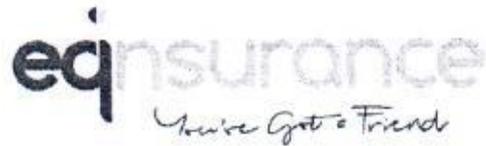
NP 428A

Licence No: S8325664H



**EQ Insurance Company Limited**

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110  
tel 65 6223 9433 | fax 65 6224 3903 | www.eqinsurance.com.sg  
reg no. 1978-00490-N



**CERTIFICATE OF INSURANCE**

ROAD TRANSPORT ACT 1987 (MALAYSIA)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (FEDERATION OF MALAYSIA)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP. 189 OF THE REVISED EDITION)  
(REPUBLIC OF SINGAPORE)  
THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1996 EDITION (REPUBLIC OF SINGAPORE)  
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF.

**PRIVATE CAR  
Comprehensive**

Certificate No.: **DMPPHQ18-004182**

Form: MX2

Excess:

Insured/Named Driver SGD500.00

Unnamed Drivers SGD1,000.00

YEID Additional SGD3,000.00

1. Index Mark and Registration Number of Vehicles

SKN13178

2. Name of Policyholder

TAN JUNYU

3. Effective Date of the Commencement of Insurance for the purpose of the Act

18/06/2018

4. Date of Expiry of Insurance

17/06/2019

5. Person or Classes of Persons entitled to drive\*

(a) The Policyholder

(b) Any other person who is driving on the Policyholder's order or with his permission.

EQ Insurance-MARS Motor  
Accident Help Center

**6311 3211**



\*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 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act has not been cancelled at the time of accident loss or damage.

6. Limitations as to use\*

Use 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 trials or 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.

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) or and Amendment, Act or Acts passed in substitution thereof.

unwck/HO/A000319/DASSURANCE

Authorised Signatory  
EQ Insurance Company Limited