

## 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	18/02/2019 09:59
Date Of Accident	17/02/2019 09:15
Exact Location Of Accident	NORTH BUONA VISTA ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD5952D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TRANS-CAB SERVICES PTE LTD
Co Reg No	200303878K
Email Address	CLAIMS@TRANSCAB.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-62866666

### Vehicle Particulars

Manufacturer	RENAULT
Model	LATITUDE-2.0 L (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	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	VPX/P1680520
Cover Note Number	

### Driver

Name of Driver	ONG CHIN KHOON
NRIC No	S1182783G
Date Of Birth	17/07/1956
Occupation	OUTDOOR
Date Of Driving Pass	12/10/1981
Driving Experience	37 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97355513
Fax Number	
Contact Number	
E-Mail Address	NOEMAIL

Address	BLK 409 YISHUN RING ROAD #10-1795
Postcode	760409
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	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?	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)	3
Passenger 1	NAME: : UNKNOWN GENDER: : FEMALE
Passenger 2	NAME: : UNKNOWN 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

PLEASE SEE ATTACH POLICE REPORT : T/20190217/2025

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	FILE TOO BIG
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJN7310S
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)

**SKETCH PLAN**


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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:

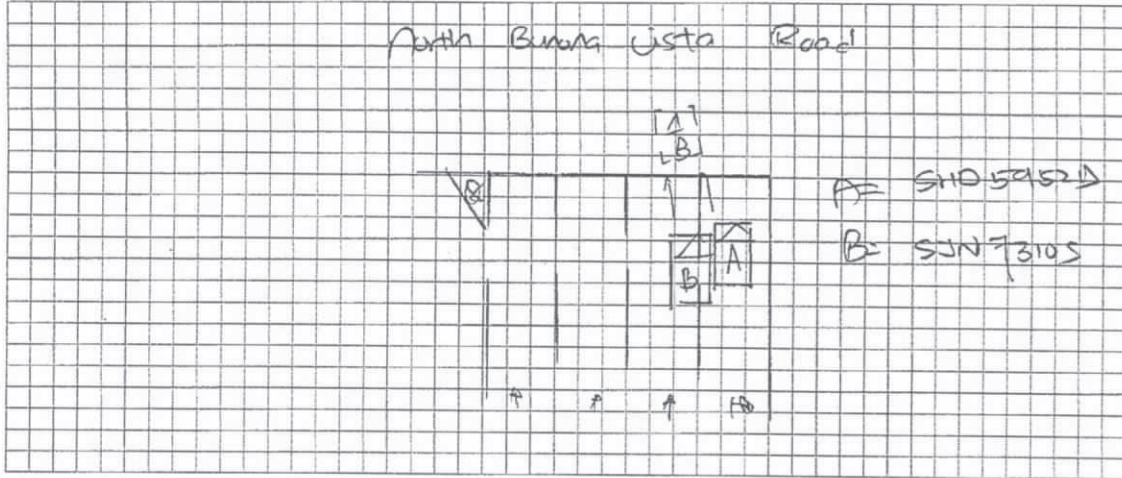
  
\_\_\_\_\_  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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



# Sketch Plan #2 Pg. 1

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

pls see attach police report

## 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.:

## POLICE REPORT Pg. 1



**SINGAPORE  
POLICE FORCE**



T/20190217/2025

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

1 of 3

Report No. T/20190217/2025

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 17/02/2019 11:02		Vide Report No.:		Station Diary No.: 41	
<b>Informant's Particulars</b>					
Name of Informant: ONG CHIN KHOON			Address: APT BLK 409 YISHUN RING ROAD #10-1795 SINGAPORE 760409		
ID Type / ID No.: NRIC NO / S1182783G			Contact No.: Home/Office: Mobile: 97355513		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 62	Date of Birth: 17/07/1956	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Taxi driver			Driving Licence Information: Class: 2B,2A,2,3,4 Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 17/02/2019 09:15	Type of Location: X-Junction
Location: Along Road 1 Traveling Toward Road 2 NORTH BUONA VISTA ROAD VISTA EXCHANGE GREEN TRAFFIC JUNCTION BETWEEN NORTH BUONA VISTA ROAD GOING RIGHT TOWARDS VISTA EXCHANGE GREEN ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHD5952D	TAXI				Seriously Damaged	2
SJN7310S	Car				No Damage	0



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T/20190217/2025

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2 of 3

Report No. T/20190217/2025

**CONTINUATION OF REPORT**

**Brief Details.**

On 17/02/2019 at about 0918hrs, I was driving my Transcab SHD5952D along North Buona Vista Road going to turn right to Vista Exchange Green Road.

When I was at the traffic junction waiting to turn right to Vista Exchange Green road, there was suddenly a black car travelling past on my left and brushed against my left side of my taxi.

It continued to drive very fast ahead without stopping to check on my vehicle. Due to this, my left side wing mirror was damaged and left side of the 2 side car doors were badly scratched.

I later checked my in-car camera and discovered that the car who hit and run was SJN7310S. I had also checked with my 2 passengers(1 lady in her 30s and her baby about 1 year old) and they mentioned to me that they are not hurt and don't required any medical attention.

I would like to state that I picked up my this 2 passengers via Grab job offer which is IOS-0701031-9-236.

I still have the camera footage of how to incident happened. I was not injured and decided to report this hit-and-run incident.



**SINGAPORE  
POLICE FORCE**



T/20190217/2025

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

3 of 3

Report No. T/20190217/2025

## 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 /

Staff Sgt LEE TECK LENG

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

17/02/2019 11:02

Officer In Charge Of Case:

TP / HRT /

SSI GOH GEOK LYE

Contact No.: 65476148



Signature:

Classification Of Case:

Authentication Stamp

NP168

Singapore Police Force



[> Back to OneMotoring](#)

### Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Company
Owner ID:	3878K
<b>Vehicle Details</b>	
Vehicle No.:	SHD5952D
Vehicle to be Exported:	Yes
Intended Deregistration Date:	18 Feb 2019
Vehicle Make:	RENAULT
Vehicle Model:	LATITUDE 2.0L DCI AUTO D/AB 4DR
Primary Colour:	Red
Manufacturing Year:	2015
Engine No.:	M9R8839C002802
Chassis No.:	VF1ABL15AUC281590
Maximum Power Output:	127.0 kW (170 bhp)
Open Market Value:	\$19,998.00
Original Registration Date:	08 May 2015
First Registration Date:	08 May 2015
Transfer Count:	0
Actual ARF Paid:	\$12,498.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	07 May 2023
PARF Rebate Amount:	\$9,373.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	07 May 2023
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$50,756.00
COE Rebate Amount:	\$26,766.00
<b>Total Rebate Amount:</b>	<b>\$36,139.00</b>
<b>Message</b>	
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 18 Feb 2019

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