

## 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	24/04/2019 14:45
Date Of Accident	23/04/2019 19:30
Exact Location Of Accident	ALONG KALLANG AVE TURNING RIGHT INTO CITY HUB 2
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBG957D
<b>Insured/Policyholder</b>	
Name Of Registered Owner	A1 SANITARY PLUMBING & ELECTRICAL SERVICES
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-98178906

### Vehicle Particulars

Manufacturer	NISSAN
Model	NV350
Exact Purpose for which vehicle was being used at time of accident	WORK
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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN3033381800
Cover Note Number	-

### Driver

Name of Driver	TAN YEN TAI
NRIC No	S1236532B
Date Of Birth	07/01/1957
Occupation	OUTDOOR
Date Of Driving Pass	05/03/1985
Driving Experience	34 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-98178906
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 106 HOUGANG AVE 1 #04-1239
Postcode	530106
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)	1

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	HOUGANG NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 60 HOUGANG AVE 9 , <b>POSTCODE:</b> 538775 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-4890999 - <b>FAX NO:</b> 63128989
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

#### 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	FBH5629M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
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	RIDER
Approximate Age	
Injuries Sustain	UNKNOWN
Injured person in which vehicle?	FBH5629M
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

## Accident Sketch Plan

### SKETCH PLAN

#### IMPORTANT NOTICE

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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.
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.

**A1 SANITARY PLUMBING & ELECTRICAL SERVICES**  
BLK 106 HOUGANG AVENUE 1 #04-1239  
SINGAPORE 530106  
M/P: 9817 8908

Policyholder's Signature  
Date & Time:

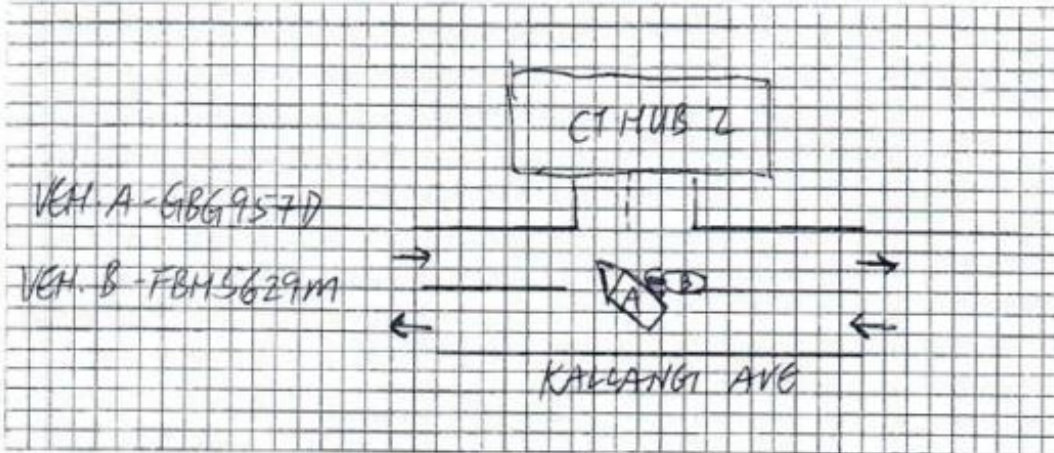
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

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

PARVAI SketchPlanForm\_v3

# Accident Sketch Plan

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO POLICE REPORT.

## DECLARATION

I/We declare the foregoing particulars are true in every respect.

**A1 SANITARY PLUMBING & ELECTRICAL SERVICES**  
 BLK 106 HOUGANG AVENUE 1 #04-1239  
 SINGAPORE 630108  
 H/P: 9817 8906

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.:

DIAR10 SketchPlanForm\_V3

2



# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20190423/2200

Police Station Of Origin:  
Hougang N.P.C  
60 Hougang Avenue 9 SINGAPORE 538775  
Tel No: 1800-4890999

1 of 3  
Report No. T/20190423/2200

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 23/04/2019 23:57	Vide Report No.:	Station Diary No.: 133
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### Informant's Particulars

Name of Informant: TAN YEN TAI			Address: APT BLK 106 HOUGANG AVENUE 1 #04-1239 SINGAPORE 530106		
ID Type / ID No.: NRIC NO / S1236532B			Contact No.: Home/Office: Mobile: 98178906		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 62	Date of Birth: 07/01/1957	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: PLUMPER			Driving Licence Information: Class: 2B.3 Date of Expiry:		

### General Information of the Accident

General Information of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 23/04/2019 19:30	Type of Location: T-Junction
Location: Along Road 1 KALLANG AVENUE				
Along Kallang Avenue turning right into City Hub 2				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: Yes

### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBH5629M	Motorcycle	YAMAHA	YZF-R15 MANUAL	White		0
GBG957D	Van	NISSAN	NV350 PANEL VAN 2.5 5MT 5DR EURO V	Brown		0

# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20190423/2200

2 of 3

Police Station Of Origin:  
Hougang N.P.C  
60 Hougang Avenue 9 SINGAPORE 538775  
Tel No: 1800-4890999

Report No: T/20190423/2200

## CONTINUATION OF REPORT

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Rider</b>			
Name	GOH JIA WEI, JEREMY	ID No.	S98905471
Related Vehicle	FBH5629M (Motorcycle)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
<b>Driver</b>			
Name	TAN YEN TAI	ID No.	S1236532B
Related Vehicle	GBG957D (Van)	Contact No.	98178906
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,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 23/04/2019 at about 1930hrs, I was driving my van(Registration No. GBG957D) along Kallang Avenue when I was tuning right into City Hub 2 on a one way lane. Suddenly another motorcycle(Registration No. FBH 5629M) tried to overtake me and side swipe my van's right side resulting in dent damages and the rider fell onto the road. I then alighted from my van to render assistance. As it was a one-way lane, I shifted my van forward not to obstructed traffic. Ambulance and Traffic Police was called in and the rider was conveyed to unknown hospital. I am not injured. There is dashcamera in my van facing front however the SD card has been seized by Traffic Police. I am lodging this Traffic Accident report as advised.



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CamScanner

POLICE REPORT



SINGAPORE  
POLICE FORCE



T/20190423/2200

Police Station Of Origin:

Hougang N.P.C

60 Hougang Avenue 9 SINGAPORE 538775

Tel No: 1800-4890999

3 of 3

Report No: T/20190423/2200

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 BOH YONG SENG

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / GIT /  
SI MOHAMMAD ABDILLAH BIN PALIL  
Contact No: 65476246

Authentication Stamp  
NP168

Signature Of Informant:

Date/Time:  
23/04/2019 23:57


Classification Of Case:




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Singapore Police Force



5323179





NRIC No. S1236532B


Date of issue  
02-07-2014

APT BLK 106 HOUGANG AVENUE 1 #04-1239  
SINGAPORE 530106

NRIC No: S1236532B      Date: 15/01/2017

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

		EFFECTIVE DATE
Class 2B	Motorcycles =< 200 cc	27 Feb 1985
Class 3	Motor cars with unladen weight =< 3000kg with =< 7 passengers, exclusive of driver; and other motor vehicles with unladen weight =< 2500kg	05 Mar 1985



Licence No: S1236532B

NP 428A

DRIVING DOC

**REPUBLIC OF SINGAPORE**

IDENTITY CARD NO. **S1236532B**



Name  
**TAN YEN TAI**

**陈 演 财**

Race  
**CHINESE**

Date of birth  
**07-01-1957**

Sex  
**M**

Country/Place of birth  
**SINGAPORE**



**REPUBLIC OF SINGAPORE** **DRIVING LICENCE**

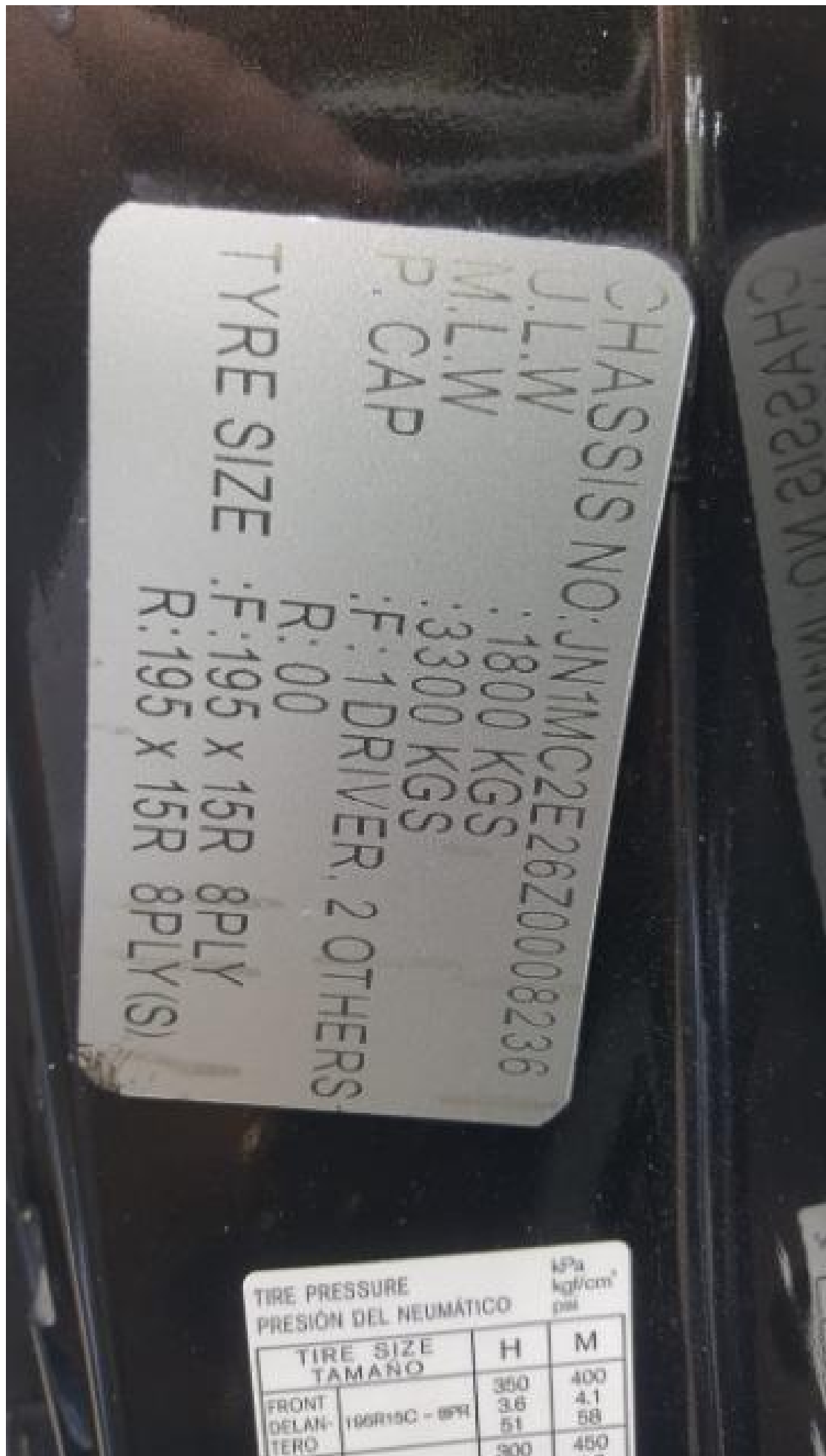
Licence Number: **S1236532B**

Name:  
**TAN YEN TAI**

Birth Date: **07 Jan 1957**

Issue Date: **11 Apr 2018**





Accident Photo





Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo

