

## 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	04/03/2019 15:28
Date Of Accident	01/03/2019 11:50
Exact Location Of Accident	ALONG ADAM DRIVE TOWARDS ADAM ROAD - FILTER LANE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGT2947S
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAN AH CHYE
NRIC No	S1211506G
Email Address	T.AHCHYE56@YAHOO.COM
Mobile Phone No	(LOCAL) +65-90034149
Alternative Phone No	OFFICE-90034149

### Vehicle Particulars

Manufacturer	HONDA
Model	AIRWAVE-1.5 (A)
Exact Purpose for which vehicle was being used at time of accident	PRIVATE
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	LONPAC INSURANCE BHD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	Z18VP05018053
Cover Note Number	

### Driver

Name of Driver	TAN AH CHYE
NRIC No	S1211506G
Date Of Birth	07/03/1956
Occupation	INDOOR
Date Of Driving Pass	24/07/1976
Driving Experience	42 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90034149
Fax Number	
Contact Number	OFFICE-90034149
Email Address	T.AHCHYE56@YAHOO.COM

Address	BLOCK 435 HOUGANG AVENUE 8 #04-1667
Postcode	530435
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	CHAIN COLLISION
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	3
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)	1

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
POLICE STATION NAME [OTHER]	HOUGANG NPC - PLEASE REFER TO THE ATTACHED POLICE REPORT AND THE ACCIDENT DETAILS.
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

Please refer to the attached Police Report and the Sketch Plan for the accident details.

#### 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	SJS7773M
Vehicle Make/Model/Colour	VEHICLE ( B )
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 2**

Vehicle Registration Number	SMH2767L
Vehicle Make/Model/Colour	VEHICLE ( C )
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 AH CHYE
Approximate Age	62
Injuries Sustain	NECK PAINS
Injured person in which vehicle?	SGT2947S
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	BLOCK 435 HOUGANG AVENUE 8 #04-1667
Postcode	530435

**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.

3/4/19  
17:59hrs  
AnChy

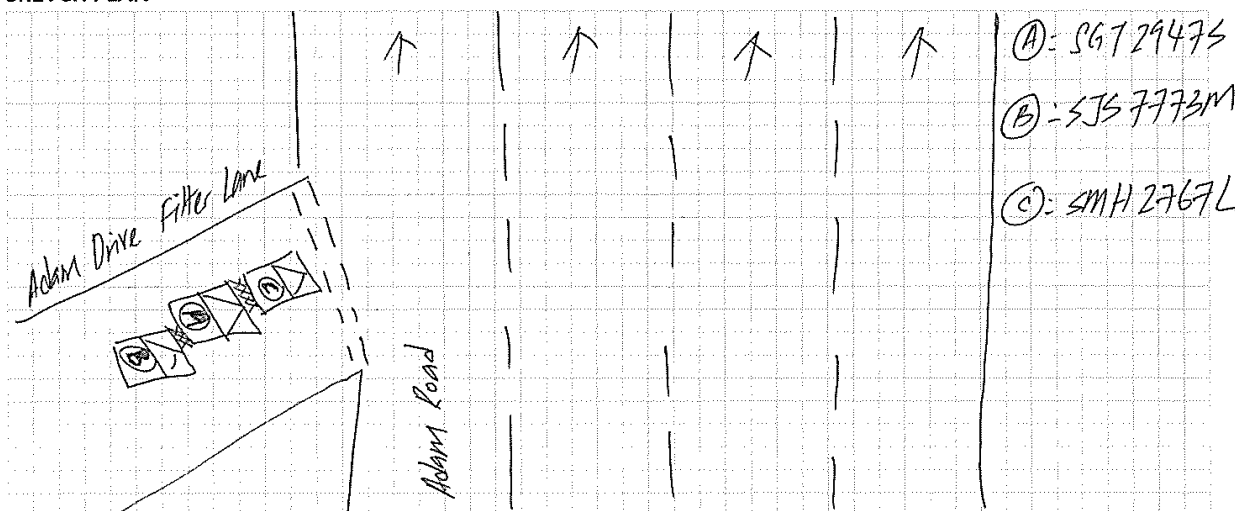
Policyholder's Signature  
Date & Time:

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

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

## Sketch Plan Pg. 2

### SKETCH PLAN



**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

Please Refer to Police Report

Report No: T/20190301/2144

## DECLARATION

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



 3/4/19  
 14-53114

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Policyholder's Signature

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.:



**SINGAPORE  
POLICE FORCE**



T/20190301/2144

Police Station Of Origin:  
Hougang N.P.C.  
50 Hougang Avenue 9 SINGAPORE 538775  
Tel No: 1800-4890989

1 of 3

Report No. T/20190301/2144

#### REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 01/03/2019 17:44	Vide Report No.:	Station Diary No.: 125
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#### Informant's Particulars

Name of Informant: TAN AH CHYE			Address: APT BLK 435 HOUGANG AVENUE 8 #04-1667 SINGAPORE 530435	
ID Type / ID No.: NRIC NO / S1211506G			Contact No.:	Mobile: 90034149
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 62	Date of Birth: 07/03/1956	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: SELF EMPLOYED			Driving Licence Information: Class: 2B.3.4 Date of Expiry:	

#### General Information of the Accident

General Information of the Accident				
Type of Accident	Non-Injury Others	Drink Drive No	Date/Time of Accident 01/03/2019 11:50	Type of Location: Bend
Location: Along Road 1 ADAM DRIVE ADAM ROAD Along Adam Drive towards Adam Road (filter lane)				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

#### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGT2947S	Car	HONDA	AIRWAVE 1.5 A	Grey		0
SJS7773M	Car					0
SMH2767L	Car					0

#### Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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T/20190301/2144

2 of 3

Report No. T/20190301/2144

Police Officer's Name:

Police Officer's No.:

Police Station: 9 SINGAPORE 536775

Phone: 1800-4890899

## CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SGT2947S	LONPAC INSURANCE BHD.	Z18VP05018053	05/04/2018	04/04/2019

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TAN AH CHYE	ID No.	S1211506G
Related Vehicle	SGT2947S (Car)	Contact No.	90034149
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	05	Degree of Injury	Slight

**Brief Details.**

On 01/03/2019 at about 1150hrs, I was stationary at the filter lane going to turn left to Adam Road when all of a sudden, one car SJS7773M collided onto the rear of my car. Due to the impact, my car surge forwards and hit onto one car in front of me SMH2767L. No one required ambulance but I did feel some neck pains. TP also came down and advised accordingly. I went to see a doctor later and received 5 days MC for my injuries. I also reported the matter to my insurance. I installed CCTV in my car but upon the accident impact, I think it was spoilt as I am unable to retrieve any footage. I already sent my car to the workshop as there were damages on the front and rear.



SINGAPORE  
POLICE FORCE

1/20190301/2144

Place of Origin:

8 of 8

100-4890999  
Singapore Avenue 9 SINGAPORE 538775

Report No. T/20190301/2144

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 MOHAMED ALI S/O MUBARAK HUSSAIN

Signature Of Informant:

*Al Cye*

Signature Of Interpreter:

Not applicable

Date/Time:

01/03/2019 17:44

Officer In Charge Of Case:

TP / GIA /

Staff Sgt WONG SIEU LUI

Contact No.: 65476151

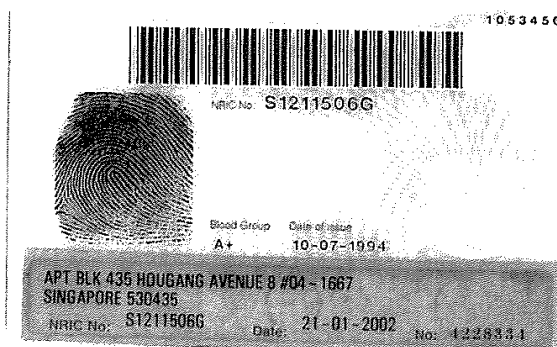
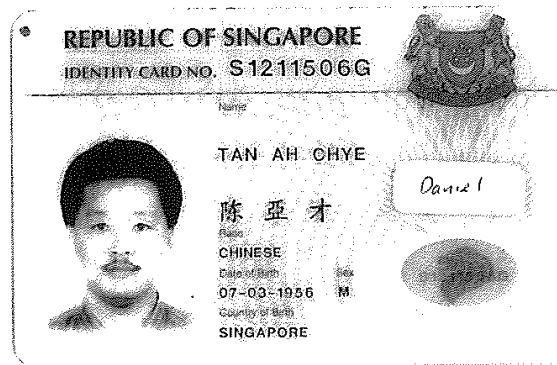
Classification Of Case:

Classification Stamp  
NP185

Singapore Police Force



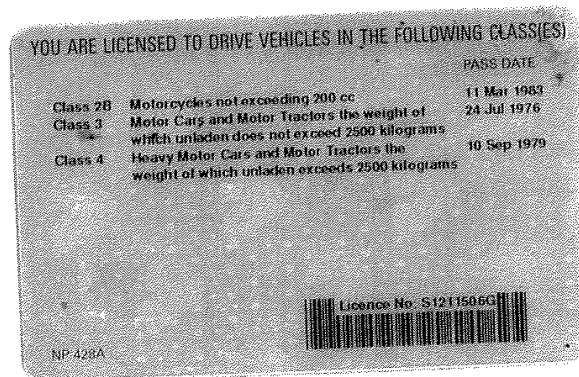
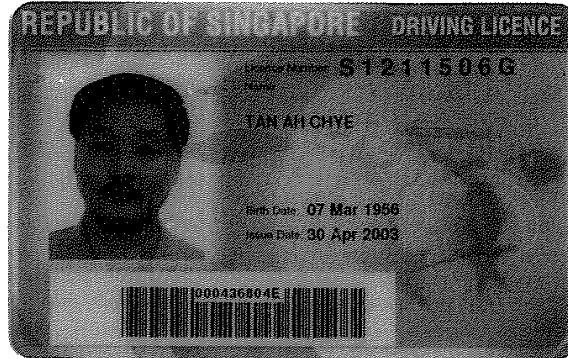
Identity Card Pg. 1



*f.dhchye56@yahoo.com*

*f.dhchye56@yahoo.com*

# Driving License Pg. 1





**LONPAC INSURANCE BHD** (S68FC5635C)  
 (Incorporated in Malaysia)  
 Singapore Office: 300 Beach Road #17-04/07, The Concourse, Singapore 199555.  
 Tel: (65) 6250 7388 Fax: (65) 6296 3767 Website: www.lonpac.com.sg  
 GST Reg No.: F0-0005635-C

MX1

## CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) ACT (CAP 189) REPUBLIC OF SINGAPORE.  
 MOTOR VEHICLES (THIRD PARTY RISKS AND COMPENSATION) RULES 1969 (REPUBLIC OF SINGAPORE).  
 ROAD TRANSPORT ACT 1987 (MALAYSIA).  
 MOTOR VEHICLES (THIRD PARTY RISKS) RULES 1969 (MALAYSIA).

Certificate No. : Z18VP05018053

Type of Cover : THIRD PARTY

1. Index Mark and Vehicle Registration Number  
HONDA AIRWAVE 1.5  
- SGT2947S
2. Name of Policy Holder  
TAN AH CHYE
3. Effective Date of the Commencement of Insurance  
for the purpose of the Act  
05/04/2018
4. Date of Expiry of the Insurance  
04/04/2019
5. Persons 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/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 USE FOR HIRE OR REWARD, RACING, PACE-MAKING, RELIABILITY TRIAL, SPEED-TESTING OR THE CARRIAGE OF GOODS (OTHER THAN SAMPLES) IN CONNECTION WITH ANY TRADE OR BUSINESS OR USED FOR ANY PURPOSE IN CONNECTION WITH THE MOTOR TRADE.

\* Limitations rendered inoperative by Section 95 of the Road Transport Act 1987 (Malaysia) or Section 8 of the Motor Vehicles (Third Party Risks and Compensation) Act (Cap 189) Republic of Singapore are not included under heading.

I/WE hereby certify that this covering Note is issued in accordance with the provisions of Part IV of the Road Transport Act 1987 (Malaysia) and Motor Vehicles (Third-Party Risks and Compensation) Act (Cap 189) Republic of Singapore.

CHIEF EXECUTIVE  
(Singapore Branch)

User ID: KWOKLING  
Date Issued: 26/03/2018

Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo

