

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	26/06/2019 17:04
Date Of Accident	02/03/2019 12:00
Exact Location Of Accident	STEVENS-WHITLEY RD U TURN AFT BALMORAL RD JUNCTION
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFS4243T
Insured/Policyholder	
Name Of Registered Owner	ANG WAN MAY
NRIC No	S7315586Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-91127576
Alternative Phone No	OFFICE-91127576

Vehicle Particulars

Manufacturer	TOYOTA
Model	-
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3019521801
Cover Note Number	

Driver

Name of Driver	MARC SCOTT HARDY
NRIC No	S7289543F
Date Of Birth	03/07/1972
Occupation	INDOOR
Date Of Driving Pass	30/07/2014
Driving Experience	4 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91127576
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	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
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: : PASSENGER GENDER: : MALE
Passenger 2	NAME: : PASS GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT TIMAH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 1 DUKE ROAD , POSTCODE: 268914 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4629999 - FAX NO: 64628933
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

refer attached 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	SHA8850K
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)

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:

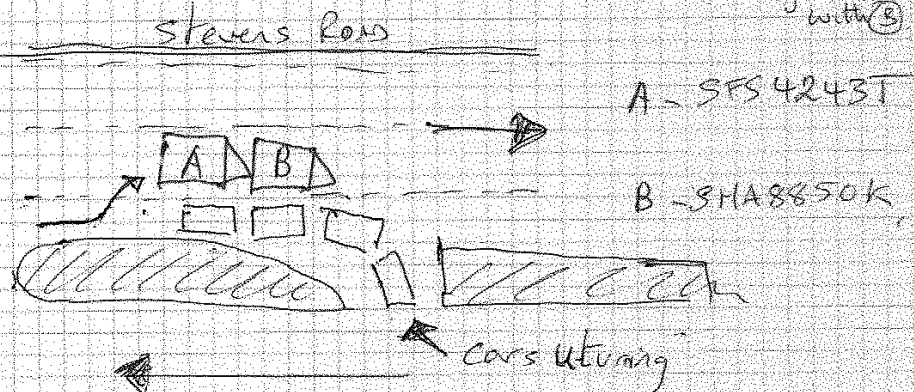
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

26/6/2019

Sketch Plan #2 Pg. 1

SKETCH PLAN

(A) Moves into middle lane after (B) passes but then (B) suddenly stops causing (A) to brake hard and make light contact with (B)



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to the attached police report. For the avoidance of doubt there was no visible damage of any kind to either vehicle and no harm of any kind to persons as the point of contact was very light. Photos and video of the two cars and the other driver provide evidence of this.

As there was zero damage I asked other driver if we wanted to make it incident and that I would make report if he did. I also messaged him on the number he gave me but got no reply. I was later informed to make police report which I did.

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.:

CGASAC SketchPlanForm 1.13

26/6/2019



**SINGAPORE
POLICE FORCE**



T/20190321/2088

1 of 4

Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 268914
Tel No: 1800-4629999

Report No. T/20190321/2088

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 21/03/2019 15:31	Video Report No.:	Station Diary No.: 51
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Informant's Particulars

Name of Informant: MARC SCOTT HARDY			Address: 61 DUCHESS AVENUE SINGAPORE 269124		
ID Type / ID No.: NRIC NO / S7289543F			Contact No.: Home/Office: Mobile: 91127576		
Nationality: BRITISH			Email:		
Sex: Male	Age: 46	Date of Birth: 03/07/1972	Type of Informant: Driver		
Race: Caucasian			Language: English		Institution / School Name:
Occupation: SOFTWARE			Driving Licence Information: Class: 2B,3		Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 02/03/2019 12:00	Type of Location: Straight Road
Location: Along Road 1 STEVENS ROAD				
Stevens road towards Whitley Road, at the u turn after the junction of Balmoral Road and Stevens Road				
Weather: Sunny		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One 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 Passeng
SFS4243T	Car				No Damage	0
SHA8850K	Car				No Damage	0

Details of Person Involved

Any Pedestrian Involved: No	Use of Pedestrian Crossing: NA
No. of Pedestrians Injured: NIL	



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T/20190321/2088

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Report No. T/20190321/2088

CONTINUATION OF REPORT

Driver				
Name	MARC SCOTT HARDY		ID No.	S7289543F
Related Vehicle	SFS4243T (Car)		Contact No.	91127576
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
Driver				
Name	Unknown Driver		ID No.	NIL
Related Vehicle	SHA8850K (Car)		Contact No.	81413732
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

Brief Details.

On 02/03/2019 at 1200hrs, I was travelling along Stevens Road towards Whitley Road at the u turn just after the junction of Balmoral Road and Stevens Road. I was alone in my vehicle SFS4243T.

I was travelling at the most right lane at the point of time and I came to a stop as there was a build up of vehicles in front of me doing u turn. I then waited to filter out to the lane on the left of me. A taxi SHA8850K went past me, I checked for traffic behind me and it was clear before I filter out to the left lane beside me.

As I am filtering in, I looked forward and saw that the taxi which has just past me came to a sudden stop and I could not stop in time. I immediately went down of the vehicle and I observed that it was quite some time later that the driver of taxi came down. Before the driver came down, I looked at both our vehicles and did not see any damages between our vehicles. it was just a very light touch on the taxi as I was filtering out of my lane and could not be driving any faster than 10km/hour.

After both of us took photos of the collision, we drove and parked on the side and I checked both our vehicles again and did not see any damage at all on both our vehicles. There seem to be passengers in the taxi at that point of collision but they did not alight the vehicle at all.

I exchanged numbers with the taxi driver and I also sent a text message and a message through WhatsApp within 1 hour of the accident but there was no reply from the taxi driver.

I received a letter from traffic police on 21/03/2019 reference TP/IP/16241/2019.



**SINGAPORE
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T/20190321/2088

3 of 4

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CONTINUATION OF REPORT



**SINGAPORE
POLICE FORCE**



T/20190321/2088

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Report No. T/20190321/2088

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:

E /

Sgt 2 AELMA SHEIQA BINTE MOHAMED
PADILLAH

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIA /

Contact No.:

Authentication Stamp
NP168

Signature Of Informant:

Date/Time:

21/03/2019 15:31

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

