

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	08/03/2019 23:00
Date Of Accident	08/03/2019 13:15
Exact Location Of Accident	ALONG ECP BEFORE ROCHOR EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLS2169S
Insured/Policyholder	
Name Of Registered Owner	GRAB RENTALS PTE LTD
Co Reg No	201617200G
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-66550005

Vehicle Particulars

Manufacturer	TOYOTA
Model	PRIUS HYBRID 1.8 CVT
Exact Purpose for which vehicle was being used at time of accident	HIRE & 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	PRIVATE HIRE

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	A29114756MKF
Cover Note Number	

Driver

Name of Driver	WONG DING JIE, LYON
NRIC No	S9201704D
Date Of Birth	05/01/1992
Occupation	OUTDOOR
Date Of Driving Pass	21/09/2011
Driving Experience	7 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81134244
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	NIL
Postcode	
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	HIT AND RUN / VANDALISM / DAMAGED WHILST PARKED
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
POLICE STATION NAME [OTHER]	BISHAN NPC
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

Please Refer to Police Report No. T/20190308/2117 Lodge at Bishan NPC On 08/03/2019 at about 1315hrs I was driving my car SLS2169S along ECP to city. Before Rochor Road exit I noticed Trans Cab SHA2968U swerving recklessly between lanes 1 and 2 and subsequently hitting the centre concrete divider twice. He came to a stop on the first lane, I then stopped my car on the second lane to help the taxi driver and his passenger. However, before I could alight the taxi moved forward to hit the front of my car and drove off. Subsequently I drove off too. The front bumper and headlights of my car are damaged, I am unsure of repairs cost. No one was injured. Centre divider is damaged. I am lodging this report for insurance claims purposes.

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	SHA2968U
Vehicle Make/Model/Colour	HYUNDAI I40
Details Of Properties	NA
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 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.

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 my 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.
- (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.

Cw

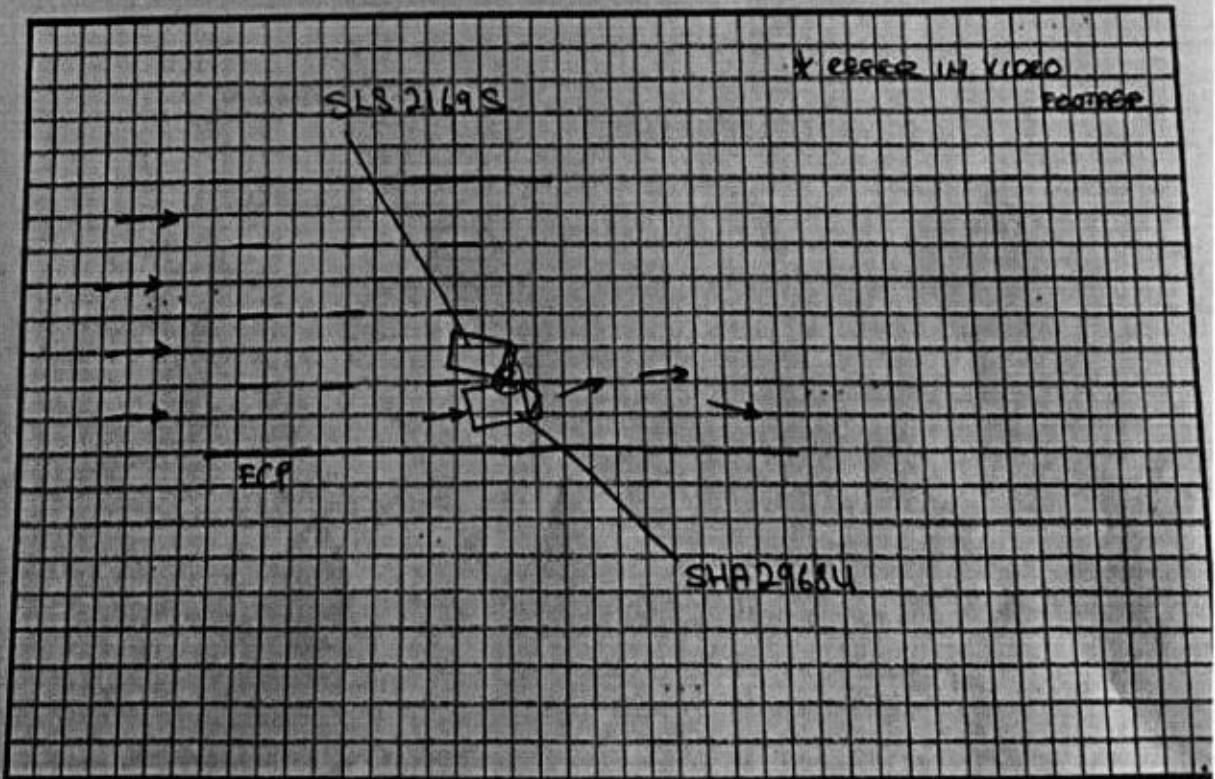
VERIFIED BY AJAX MARS
REPORTING OFFICER
MOHD FADZLY BIN ISMAIL

Policyholder's Signature / Date & Time

Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre
Personnel

Sketch Plan



POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190308/2117

1 of 3

Report No. T/20190308/2117

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/03/2019 15:14	Vide Report No.:	Station Diary No.: 101
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Informant's Particulars

Name of Informant: WONG DING JIE, LYON		Address: APT BLK 609 ANG MO KIO AVENUE 4 #11-1149 SINGAPORE 560609	
ID Type / ID No.: NRIC NO / S9201704D		Contact No.: Home/Office: Mobile: 81134244	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 27	Date of Birth: 05/01/1992	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: Private Hire driver		Driving Licence Information: Class: 3	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 08/03/2019 13:15	Type of Location: Straight Road
Location: Along Road 1 EAST COAST EXPRESSWAY Before Rochor Exit				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 90 Km/h	
Traffic Flow:		Traffic Control:	Traffic Volume: Light	
Type of Collision:			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHA2968U	Car				Slightly Damaged	1
SLS2169S	Car				Slightly Damaged	1

Details of Person Involved

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

POLICE REPORT



**SINGAPORE
POLICE FORCE**

T/20190308/2117

2 of 3

Report No. T/20190308/2117

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

CONTINUATION OF REPORT

Driver Name	WONG DING JIE, LYON		ID No.	S9201704D
Related Vehicle	NIL		Contact No.	81134244
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 08/03/2019 at about 1315hrs I was driving my car(SLS2169S) along ECP to city. Before Rochor Rd exit I noticed Trans Cab(SHA2968U) swerving recklessly between lanes 1 and 2 and subsequently hitting the center concrete divider twice. He came to a stop on the first lane, I then stopped my car on the second lane to help the taxi driver and his passenger. However, before I could alight the taxi moved forward to hit the front of my car and drove off. Subsequently I drove off too. The front bumper and headlights of my car are damaged, I am unsure of repair costs. No one was injured. Centre divider is damaged. I am lodging this report for insurance claims purposes.

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T/20190308/2117

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

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Report No. T/20190308/2117

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 /
K MANOJ KUMAR

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
08/03/2019 15:14

Officer In Charge Of Case:
TP / HRT /
Sr Staff Sgt TAN JEOK LENG
Contact No.: 65476144



Classification Of Case:

SN 061

Authentication Stamp
NP168

SIGNA