

## 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	26/03/2019 15:44
Date Of Accident	26/03/2019 09:00
Exact Location Of Accident	TPE (PIE) BEFORE ELIAS RD EXIT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMA5034K
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TAN BEE PENG
NRIC No	S7722072J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97422898
Alternative Phone No	OFFICE-97422898

### Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	JETTA 1.4 TSI AT 1623Q5
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5101657402
Cover Note Number	

### Driver

Name of Driver	TAN BEE PENG (CHEN MEIBING)
NRIC No	S7722072J
Date Of Birth	15/08/1977
Occupation	INDOOR
Date Of Driving Pass	09/11/2016
Driving Experience	2 YEARS AND 4 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97422898
Fax Number	
Contact Number	OFFICE-97422898
EEmail Address	NOEMAIL

Address	BLK 675C YISHUN AVENUE 4 #07-804
Postcode	763675
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	COLLISION - HEAD TO REAR
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	WXD5242 (PRIVATE CAR)
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?	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)	2
Passenger 1	NAME: : RUFE JANE C SOLIS GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	KOLAM AYER NEIGHBOURHOOD POLICE POST
Police Station Address	<b>ROAD:</b> BLK 72 GEYLANG BAHRU #01-3038 , <b>POSTCODE:</b> 330072 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-2969999 - <b>FAX NO:</b> 62937659
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT - T/20190326/2098.

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	VIDEO FOOTAGE WITH DRIVER
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	WXD5242
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAN KIAN PIN

NRIC/Passport Number	
Contact Number	83559051
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	5
Passenger 1	NAME: : GENDER: :
Passenger 2	NAME: : GENDER: :
Passenger 3	NAME: : GENDER: :
Passenger 4	NAME: : GENDER: :

#### DETAILS OF INJURED PERSON 1

Name	TAN BEE PENG (CHEN MEIBING)
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SMA5034K
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

#### DETAILS OF INJURED PERSON 2

Name	RUFE JANE C SOLIS
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SMA5034K
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

## Accident Sketch Plan

### SKETCH PLAN

#### IMPORTANT NOTICE

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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.:

## Accident Sketch Plan

### SKETCH PLAN

A: JMA503YK.  
B: WXD524V

TPE (PIE)

A  
B

### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report - 1/20190226/2098.

### 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



**SINGAPORE  
POLICE FORCE**



T/20190326/2098

Police Station Of Origin:  
Kolam Ayer NPP  
72 Geylang Bahru #01-3038 SINGAPORE  
330072  
Tel No: 1800-2969999

1 of 4

Report No. T/20190326/2098

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/03/2019 15:08	Vide Report No.: G/20190326/0071	Station Diary No.: 25
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Informant's Particulars				
Name of Informant: TAN BEE PENG		Address: APT BLK 675C YISHUN AVENUE 4 #07-804 SINGAPORE 763675		
ID Type / ID No.: NRIC NO / S7722072J		Contact No.: Home/Office: Mobile: 97422898		
Nationality: SINGAPORE CITIZEN		Email:		
Sex: Female	Age: 41	Date of Birth: 15/08/1977	Type of Informant: Driver	
Race: Chinese		Language:	Institution / School Name:	
Occupation: Business consultant		Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 26/03/2019 09:00	Type of Location: Straight Road
Location: Along Road 1 PAN ISLAND EXPRESSWAY Exit 4, Before Elias Road, Opposite Courts and IKEA				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
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
SMA5034K	Car	VOLKSWAGO N	JETTA 1.4 TSI AT 1623Q5	Red	Slightly Damaged	1
WXD5242	Car			Black	Seriously Damaged	4

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date

# Police Report



**SINGAPORE  
POLICE FORCE**



T/20190326/2098

Police Station Of Origin:  
Kolam Ayer NPP  
72 Geylang Bahru #01-3038 SINGAPORE  
330072  
Tel No: 1800-2969999

2 of 4

Report No. T/20190326/2098

## CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMA5034K	NTUC Income Insurance Co-Operative Limited	5101657402	22/06/2018	21/06/2019

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	TAN BEE PENG		ID No.	S7722072J
Related Vehicle	SMA5034K (Car)		Contact No.	97422898
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	Slight
Driver				
Name	TAN KIAN PIN		ID No.	781122075479
Related Vehicle	WXD5242 (Car)		Contact No.	83559051
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 26/03/2019 at about 0900hrs, I was driving my vehicle SMA5034K along PIE heading towards White Sands together with a friend on the utmost right lane. The traffic along the expressway at the point of time was heavy and traffic was slow. All vehicles on the expressway were all just inching forward slowly along the way. As my vehicle was nearing Exit 4 before Elias Road, I suddenly felt an impact at the rear of my vehicle. I then stopped my vehicle and when I alighted from my vehicle I spotted that a black Malaysian car, bearing plate number WXD5242, had collided onto the rear of my vehicle. I then spoke to the said driver and he apologized to me and asked me to proceed for insurance claims. I then called for the Police as the driver was unwilling to provide his particulars. After the Traffic Police came to scene, the said driver then provided me with his details. After I got the case card from the Traffic Police officer I then proceeded to lodge a report for the matter. I am currently feeling nauseous, and soreness on my neck area and on my right arm and I will be seeking medical treatment later. The rear bumper of my vehicle was dented inwards and slightly dislodged, and both the rear lights were cracked. As for the other driver, his car front hood cover was bent and the front bumper was dislodged.

## Police Report



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72 Geylang Bahru #01-3038 SINGAPORE  
330072  
Tel No: 1800-2969999



T/20190326/2098

3 of 4

Report No. T/20190326/2098

CONTINUATION OF REPORT



## Police Report



**SINGAPORE  
POLICE FORCE**



T/20190326/2098

Police Station Of Origin:  
Kolam Ayer NPP  
72 Geylang Bahru #01-3038 SINGAPORE  
330072  
Tel No: 1800-2969999

4 of 4

Report No. T/20190326/2098

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:

A /

Sgt 3 KALVIN NG YONG KIAT

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

SI ANG YI TING, STEPHANIE

Contact No.: 65476414

Signature Of Informant:

Date/Time:

26/03/2019 15:08

Classification Of Case:

Authentication Stamp

NP158

Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo



**Accident Photo**





Accident Photo



Accident Photo





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