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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	18/04/2019 12:17
Date Of Accident	17/04/2019 19:25
Exact Location Of Accident	TANAH MERAH COAST RD JUNC OF CHANGI COAST WALK
Country/State of Loss	SINGAPORE
D	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLR8097G
Insured/Policyholder	
Name Of Registered Owner	DARWIN-51 CAR RENTAL PTE LTD
Co Reg No	201407909C
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-88215151
Vehicle Particulars	
Manufacturer	TOYOTA
Model	PRIUS
Exact Purpose for which vehicle was being used at time of accident	CHAUFFEUR
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	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SD18V07071/VPZ/R01
Cover Note Number	
Driver	

Name of Driver TEO HENG HUAT

NRIC No S0126133I

Date Of Birth 22/02/1952

Occupation OUTDOOR

Date Of Driving Pass 23/05/1972

Driving Experience 46 YEARS AND 10 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-83799209

Fax Number

Contact Number

EMail Address NOEMAIL

BLK 170 LOR 1 TOA PAYOH Address

#02-1106

Postcode 310170

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

CHAIN COLLISION Type Of Accident

Weather Conditions **CLEAR** Road Surface DRY

Other Information

ambulance?

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

NO

Was any other material or property damaged?

I have been approached by unknown person(s)

YES NO

soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

2 Passenger 1

NAME: : THAM KOK KEONG

GENDER: : MALE

Details of Police Action

Was the accident reported to the police? YES

If Yes.Please state which Police Station

TRAFFIC POLICE DIVISION HQ Police Station Name

ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY: Police Station Address

SINGAPORE

Police Station Contact TEL NO: 65470000 - FAX NO:

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

PLS REFER TO THE POLICE REPORT:T/20190418/2024

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES

Remarks/ Reasons: WITH WORKSHOP

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number CB6522A

Vehicle Make/Model/Colour

Details Of Properties

COMMERCIAL VEHICLE Vehicle Category

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 XE3276R

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category COMMERCIAL VEHICLE

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 3

Vehicle Registration Number SLS2377H

Vehicle Make/Model/Colour

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 TEO HENG HUAT

Approximate Age

Injuries Sustain

SLIGHT
Injured person in which vehicle?

SLR8097G
Were seat belts worn?

YES

Was this injured conveyed to hospital by

ambulance?
Address

NO

Address Postcode

DETAILS OF INJURED PERSON 2

Name THAM KOK KEONG

Approximate Age

Injuries Sustain SLIGHT
Injured person in which vehicle? SLR8097G

Were seat belts worn? YES

Was this injured conveyed to hospital by

ambulance?

NO

Address

Postcode

Accident Sketch Plan

SKETCH PLAN

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.
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- 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.
- 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)

Lunderstand, 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:
 - 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:
 - 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

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C) XE 3276 R	Tanah Merah Coast Read	
0) 968 2377 4	→ ON®N®D	
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	A. Em	V
DESCRIBE CIRCUMSTANCES	E OE THE ACCIDENCE	
DESCRIBE LINCOMSTANCES	S OF THE ACCIDENT	
	11s refer to Police Report	
	11/8 refer to Police Report	
	11/3 refer To Police Report NO: 7/30190418/3034.	
	11/30190418/3034.	
	18 refer to Police Report NO: 7/20190418/2024.	
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	11s refer to Police Report NO: 7/20190418/2024.	
	No: 7/20190418/2024.	
DECLARATION	118 refer to Police Report NO: 7/20190418/2024.	

Individual Statement



Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

T/20190418/2024

2 of 3

Report No. T/20190416/2024

CONTINUATION OF REPORT

Details of V	ehicle Involv	red				
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
XE3276R	TIPPER	MITSUBISHI	FUSO FV51SJD2D FA	White	Condition	0

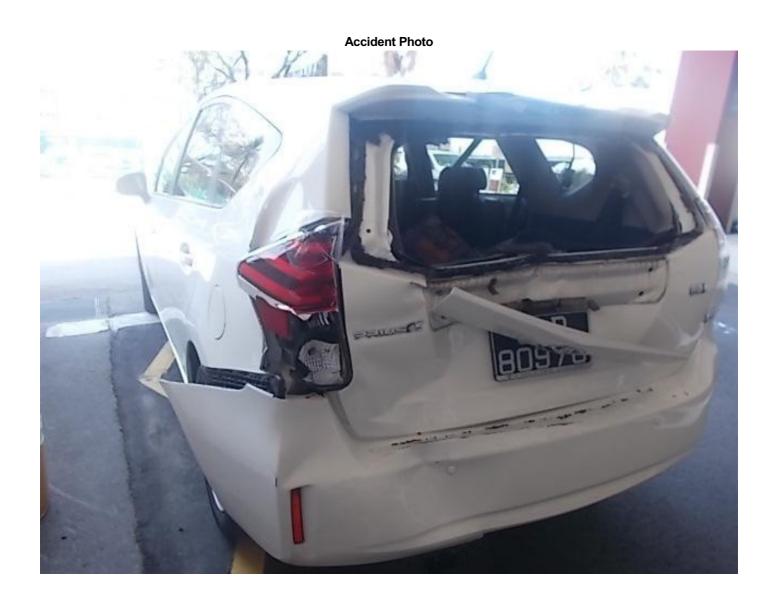
Brief Details.

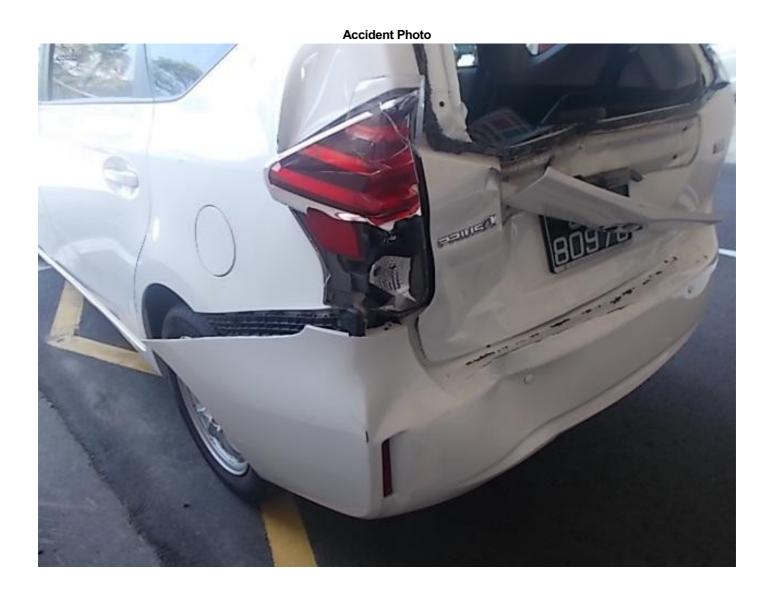
ON THE ABOVE MENTIONED DATE TIME AND LOCATION, ON 17/04/2019 AT 1925HRS, ALONG TANAH MERAH COAST ROAD(ACCIDENT OCCUR ON RED TRAFFIC LIGHT) INVOLVING 2 CARS OF (SLR8097G)(SLS2377H), 1 BUS OF (CB6522A) AND 1 TIPPER TRUCK OF (XE3276R). I WAS DRIVING OF (SLR8097G), THERE WAS 4 LANES. I WAS AT THE 2ND LANE OF 4TH LANE. I WAS WAITING AT THE RED TRAFFIC LIGHT, SUDDENLY MY FRIEND AND I HEARD A LOUD BANG FROM BEHIND, A TIPPER TRUCK BANG ONTO THE BUS AND THE BUS OF (CB6522A) SURGE FORWARD AND COLLIDED ONTO MY REAR VEHICLE. A BUS VEHICLE OF (CB6522A) COLLIDED ONTO MY REAR, THE IMPACT WAS SO STRONG THAT MY VEHICLE SURGE FORWARD. THE BUS OF (CB6522A) DID SWERVE TO THE LEFT AND HIT ONTO THE CAR OF (SLS2377H) ON THE 3RD LANE BEFORE THE RED TRAFFIC LIGHT CHANGE TO GREEN. THAT'S ALL.











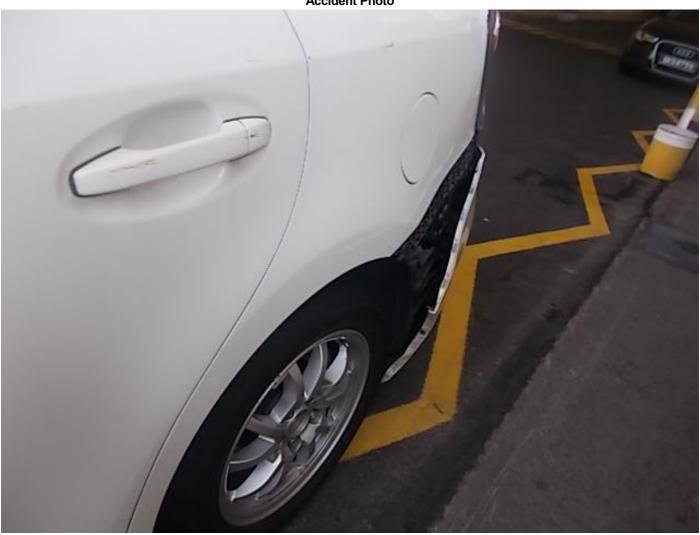












Police Report





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20190418/2024

REPORT OF A TRAFFIC ACCIDENT

	ne Report 5 019 10:00	/ade:	Vide Report No.: G/20190417/0180	Station Diary No.:
Informa	nt's Partic	ulars		
	Informent NG HUAT		Address: APT BLK 170 LORONG 1 TO SINGAPORE 310170	A PAYOH #02-1106
	/ ID No.: 0 / S01281	331	Contact No.: Home/Office:	Mobile: 83799269
National SINGAP	ity: ORE CITIZ	EN	Email:	
Sex: Male	Age:	Date of Birth: 22/02/1952	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupies PRIVAT	ion: E HIAER		Driving Licence Information: Class: 3	Date of Expiry:

Type of Accident:	Injury Others	Orink Orive: No	Date/Time of Accident: 17/04/2019 19:25	Type of Location X-Junction
	AH COAST ROAD AH MERAH COAST			
Weather: Clear	AN MICHAEL GUAS	Road Surface; Dry		Road Speed Limit:
Traffic Flow:		Traffic Control: Traffic Light - Wo	rking	Traffic Volume: Moderate
	on:			Anyone conveyed by

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
CB6522A	Bus/Coach/Mi nibus	YUTONG	ZK6100H	Purple		0
SLR8097G	Car	TOYOTA	PRIUS ALPHA HYBRID 1.8S CVT	White		1
SLS2377H	Car	TOYOTA	PRIUS HYBRID 1.8S CVT	Grey		0

Police Report



T/20190418/0004

Police Station Of Origin; Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No. 65470005

2 of a Report No. 1/20190418/2084

CONTINUATION OF REPORT

Vahide No.	Type	Make	Model	Color	Constitue	No of Passenge
XE3276B	TIPPED	MITSUBISHI	FUSO	The state of the s	Condition	NO OF Passenge
- 200,000	TRUCK	mir dobiani	FV51SJD2D	White		0

Brief Details.

ON THE ABOVE MENTIONED DATE TIME AND LOCATION,
ON 17/04/2019 AT 1925HRS, ALONG TANAH MERAH COAST ROAD(ACCIDENT OCCUR ON RED
TRAFFIC LIGHT) INVOLVING 2 CARS OF (SLRB097G) (SLS2377H), 1 BUS OF (CB6522A) AND 1
TIPPER TRUCK OF (XE3276H), I WAS DRIVING OF (SLRB097G), THERE WAS 4 LANES, I WAS AT
THE 2ND LANE OF 4TH LANE. I WAS WAITING AT THE RED TRAFFIC LIGHT, SUDDENLY MY
FRIEND AND I HEARD A LOUD BANG FROM BEHIND, A TIPPER TRUCK BANG ONTO THE BUS
AND THE BUS OF (CB6522A) SURGE FORWARD AND COLLIDED ONTO MY REAR VEHICLE. A BUS
VEHICLE OF (CB6522A) COLLIDED ONTO MY REAR, THE IMPACT WAS SO STRONG THAT MY
VEHICLE SURGE FORWARD. THE BUS OF (CB6522A) DID SWERVE TO THE LEFT AND HIT ONTO
THE CAR OF (SLS2377H) ON THE 3RD LANE BEFORE THE RED TRAFFIC LIGHT CHANGE TO

Police Report





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470900 3 of 3 Report No. 100198418/3634

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 TP / MUHAMMAD HAZIG BIN SAIFUDDIN	Signature Of Informant L8 04 2019
Signature Of Interpreter: Not applicable	Dete/Titrie: 18/04/2019 10:00
Officer in Charge Of Case: TP / AEIT / Staff 8gt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:
Authentication Stamp NP168	POLICE FORCE

Identification Card









This card is not transferable and is the property of the Land Therispon Authority (LTA). It result be surrespond to LTA, or respect. If found, playing nation to LTA, 10 Sin Ming Drive, Singapore \$75701.

1) PRIVATE HIRE CAR VL 14/06/2014



SAME IN

Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE 6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours: Monday to Friday, 09:00 – 17:00
UEN: 566500206 / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the <u>same</u> Authorised Reporting Centre

	ADDENDUM
PARTICULARS OF P	ERSON MAKING THE AMENDMENTS:
Original Report No	: MNA 119050166 Vehicle Registration No: SCR80974
Name(as shownin NRIC	: TEO HENG HUAT NRIC/FIN/Passport No : 501261337
	ehicle Owner) (*) Please delete as appropriate
Address	: BLK 170 LOR , TOA PAYOH #03 -110 6 Singapore()
Contact (Tel)	:Mobile No.:_ 83799209
Email Address	÷
Date of Accident	:
	TANAH MEDAN COAST RD JUNE OF CHANGE CO.
	LIBERTY
ADD	IN ANOTHER VEH NUMBER
	Syra 18/04/19
Policyholder / Driver' Date:	7_