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 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.	
	ACCIDENT STATEMENT
Date Of Report	22/04/2019 11:00
Date Of Accident	18/04/2019 14:30
Exact Location Of Accident	LOYANG CRESCENT TURNING RIGHT TO LOYANG WALK
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GBH3643J
Insured/Policyholder	
Name Of Registered Owner	ANNAT TRANSPORTATION & GENERAL SERVICES
Co Reg No	53187677B
Email Address	ANNAT@LIVE.COM.SG
Mobile Phone No	(LOCAL) +65-92220150
Alternative Phone No	OFFICE-92220150
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	H1 STAREX 2.5 CRDI MT 6DR
Exact Purpose for which vehicle was being used at time of accident	WORKING PURPOSES
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	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5100305230
Cover Note Number	
Driver	

Name of Driver TAN KOK HWA NRIC No S1187218B Date Of Birth 29/11/1956 Occupation **OUTDOOR Date Of Driving Pass** 28/03/1977

Driving Experience 42 YEARS AND 0 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-92220150

Fax Number

Contact Number OTHERS-92220150 **EMail Address** ANNAT@LIVE.COM.SG Address BLK 54 TELOK BLANGAH DRIVE

#10-36

Postcode 100054

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

-

Insurance Company of Driver's Own Vehicle

-

General Information of the Accident

Type Of Accident COLLISION - MAJOR/MINOR RD

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 NO

Was any body injured in the Accident?

Was any injured conveyed to hospital by NO

ambulance?

- -

Was any other material or property damaged? YES

I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

1

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name TELOK BLANGAH NEIGHBOURHOOD POLICE POST

ROAD: BLK 51 TELOK BLANGAH DRIVE , POSTCODE: 100051 ,

Police Station Address

COUNTRY: SINGAPORE

Police Station Contact TEL NO: 1800-2729999 - FAX NO: 63772526

Was notice of intended Prosecution given? NO

If Yes, against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190418/2135 (TYPE OF COLLISION IS HEAD TO SIDE)

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 UNKNOWN

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category MOTORCYCLE

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Page 2 of 40

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

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)
 - (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

for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature Date & Time:

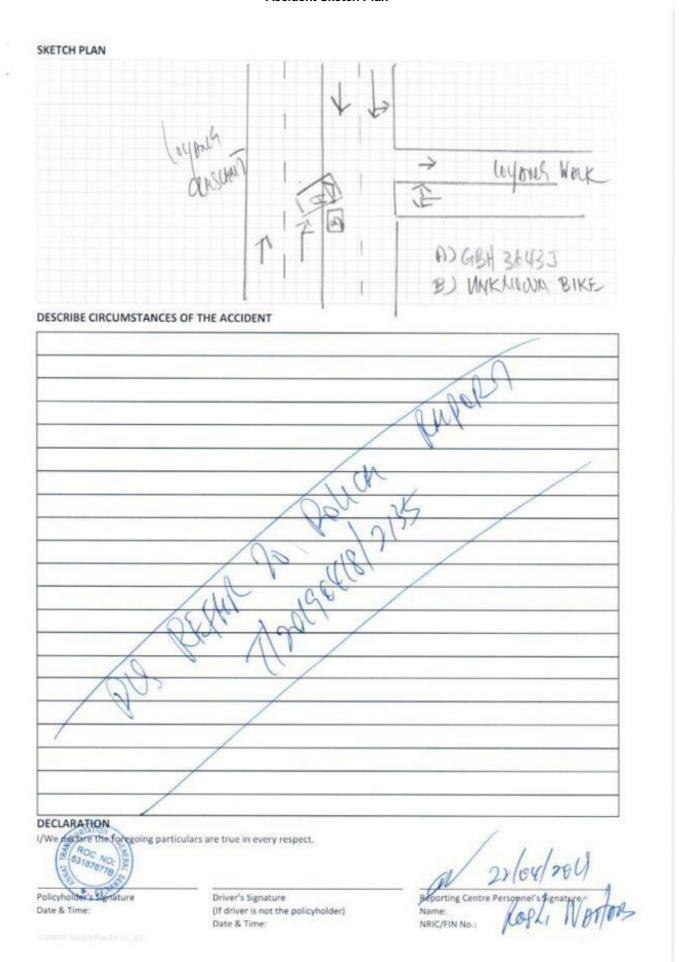
Driver's Signature (If driver is not the policyholder)

Date & Time:

Beporting Centre Pe Name

NRIC/FIN No.:

Accident Sketch Plan



POLICE REPORT





Police Station Of Origin: Telok Blangah NPP 51 Telok Blangah Drive #01-116 SINGAPORE 100055 Tel No: 1800-2729999 1 of 3 Report No. T/20190418/2135

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/04/2019 18:41		lade:	Vide Report No.: G/20190418/0104	Station Diary No.: 19		
Informa	nt's Particu	ulars	THE REAL PROPERTY OF THE PARTY OF	MANUAL PROPERTY OF THE PARTY OF		
Name of Informant: TAN KOK HWA			Address: APT BLK 54 TELOK BLANGAH DRIVE #10-36 SINGAPORE 100054			
ID Type / ID No.: NRIC NO / S1187218B			Contact No.: Home/Office:	Mobile: 81446922		
National SINGAP	ity: ORE CITIZ	EN	Email:	5 A		
Sex: Age: Date of Birth: Male 62 29/11/1956			Type of Informant: Driver			
Race: Chinese		10.000	Language:	Institution / School Name:		
Occupation: DELIVERYMAN			Driving Licence Information: Class: Date of Expiry:			

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 18/04/2019 14:30	Type of Location Straight Road	
LOYANG CR LOYANG WA			WALK	Road Speed Limit:	
Clear		Dry			
Traffic Flow: Dual Carriage	e Way	Traffic Control: Not Controlled		Traffic Volume: Moderate	
Type of Collis		Side		Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenge
GBH3643J	Van				Seriously Damaged	0

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

POLICE REPORT



T/20190418/2135

Police Station Of Origin: Telok Blangah NPP 51 Telok Blangah Drive #01-116 SINGAPORE 100055 Tel No: 1800-2729999 2 of 3 Report No. T/20190418/2135

CONTINUATION OF REPORT

Driver		SHEEL SALE	2411	All Marie	1	Water and Control
Name	TAN KOK HWA			ID No		S1187218B
Related Vehicle	GBH3643J (Van)			Conta	ict No.	81446922
Hospital/Clinic	NIL .			Class Drivin Licend Expiry	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL Date			harge	NIL	
			Degree of		NIL -	

Brief Details.

On 18/04/2019 at about 1430hours, I was driving my vehicle, a delivery van bearing GBH3643J along Loyang Crescent. I was driving along lane 2 of the road, when I approached Loyang Walk, I wanted to make a right turn into Loyang Walk, as such I signaled right to signal my intention to turn right. I then saw that the road was clear from traffic, I then made the right turn into Loyang Walk from lane 2.

Whilst making the turn into Loyang Walk, I heard a loud impact sound and I saw a motorcyclist rolling on the floor and the motorcycle skidded to the front of my vehicle. I then alighted to make a check on the motorcyclist and also made a check on my vehicle and found out that my vehicle's front main door was dented and also the right side mirror was broken. After the accident, the motorcyclist called his father down to the accident scene. Shortly after the father arrive, he called for the ambulance, shortly after the ambulance arrived, I was advised by the ambulance to move my vehicle slightly ahead as it was blocking the traffic. I then tried to drive forward and discovered that the motorcycle had also hit onto my tires and because of that I could not turn right as the steering was stuck. The traffic police then arrived, I then moved my vehicle to the side of the road. The traffic police then informed me that I need to go down to the traffic police headquarters on Monday.

I wish to say that because of the shock I received from the accident, I did not managed to exchange particulars with the motorcyclist nor did I manage to get the number plate of the motorcycle. There is incar camera in my van and the traffic police has taken the footage already.

POLICE REPORT





Police Station Of Origin: Telok Blangah NPP 51 Telok Blangah Drive #01-116 SINGAPORE 100055 Tel No: 1800-2729999

, 3 of 3 Report No. T/20190418/2135

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 <u>report number</u> as reference.

Sgt 1 TAN YEW ANN	Signature Of Informant:			
Signature Of Interpreter: Not applicable	Date/Time: 18/04/2019 18:41			
Officer In Charge Of Case: TP / GIT / Sgt 2 HO JIEKANG, IVAN Contact No.: 65476170	Classification Of Case:			
Authentication Stamp NP168 Logi	4			











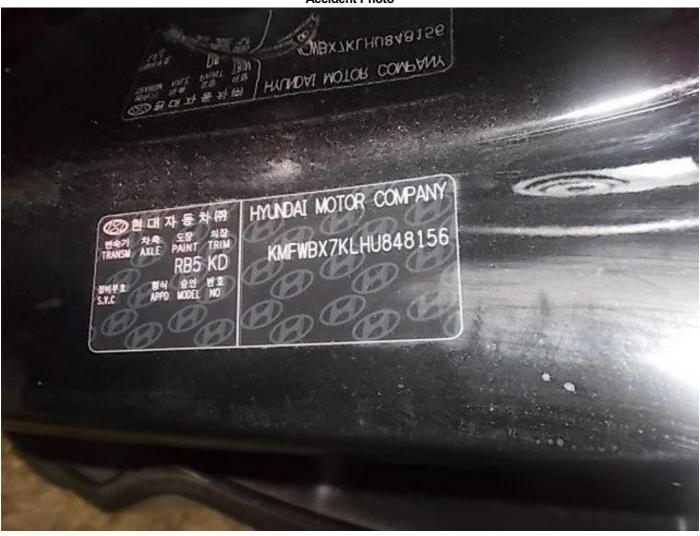


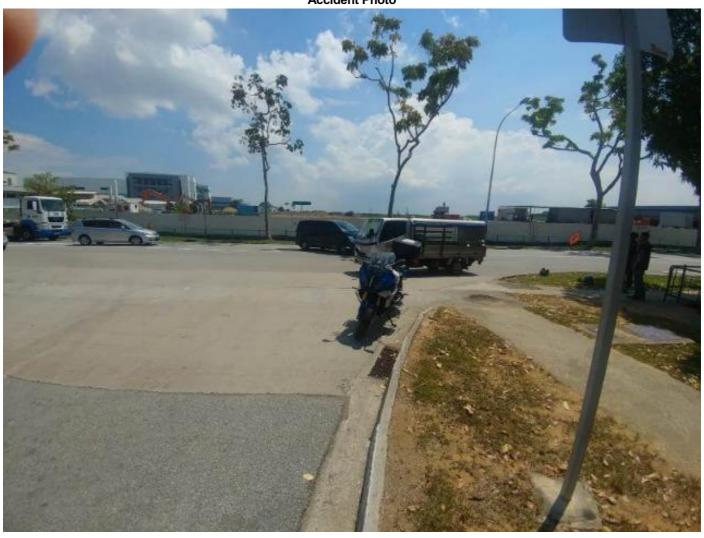




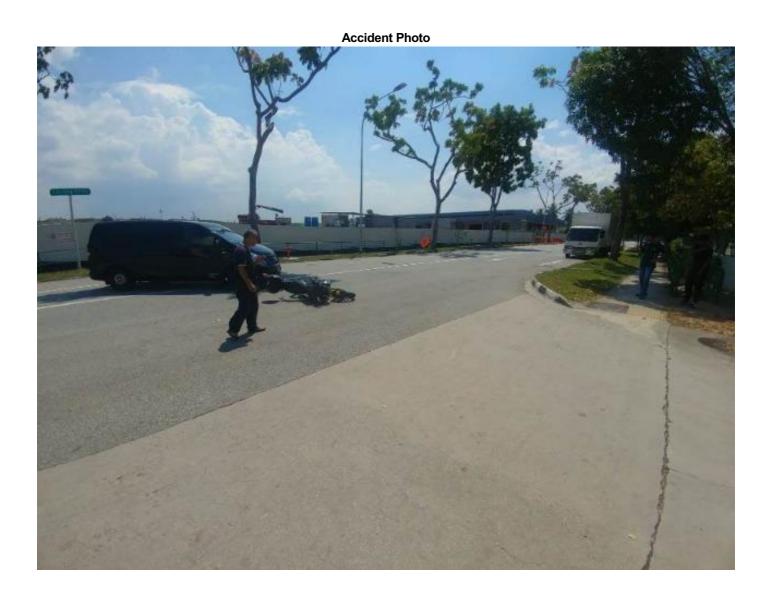


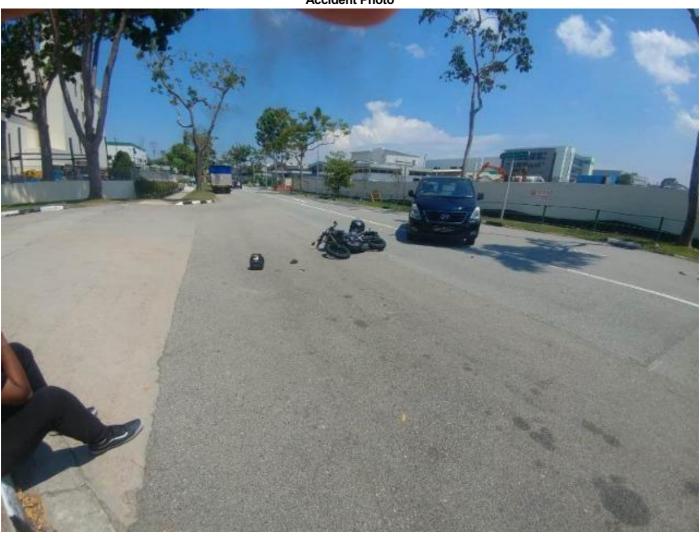


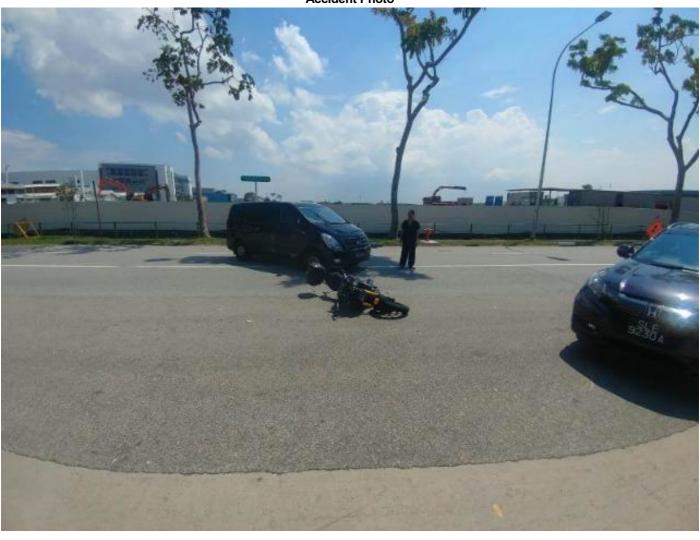




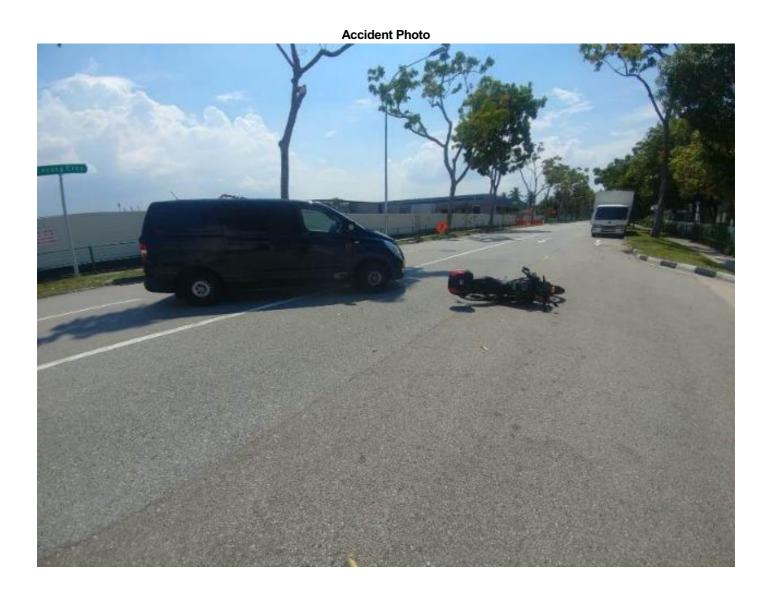




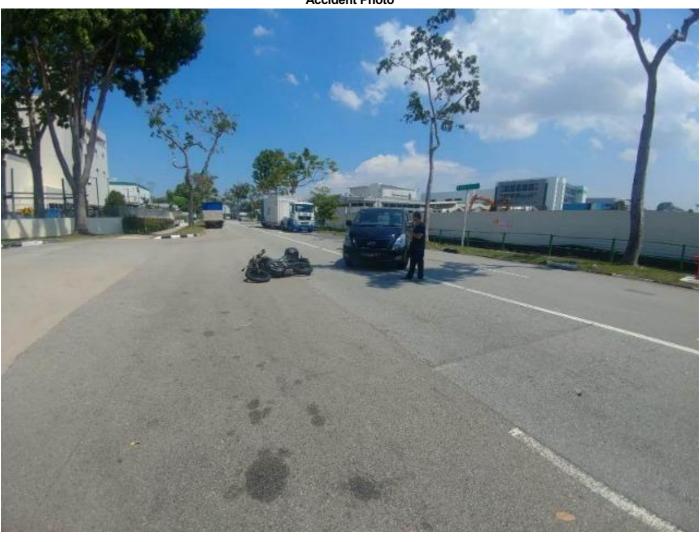


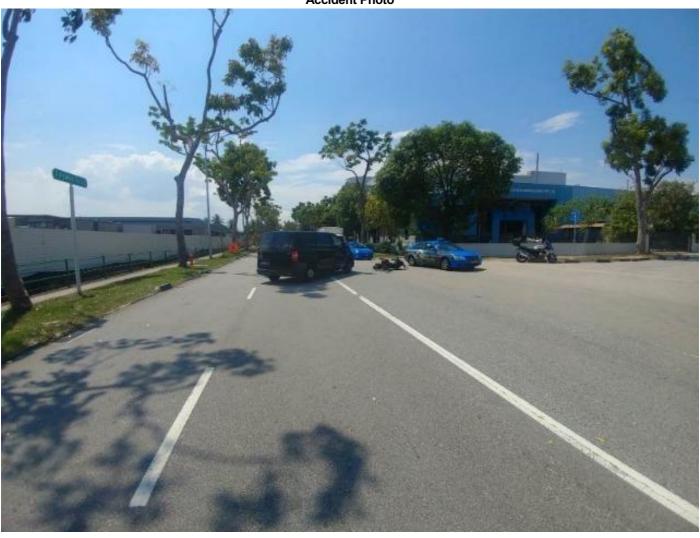




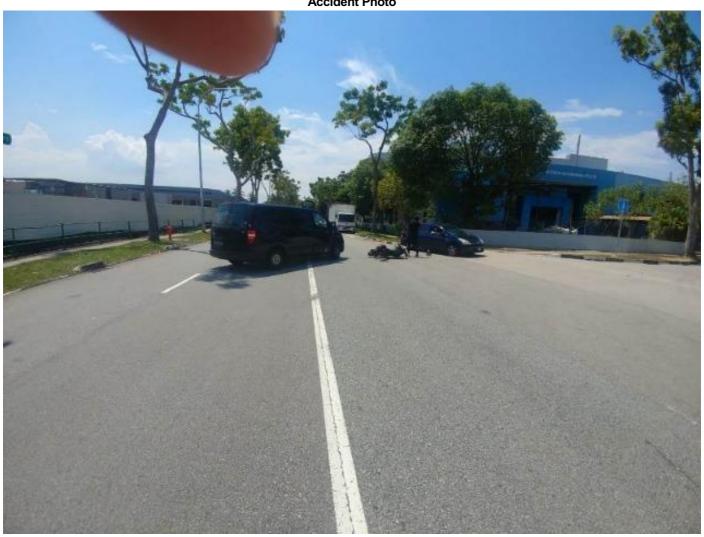




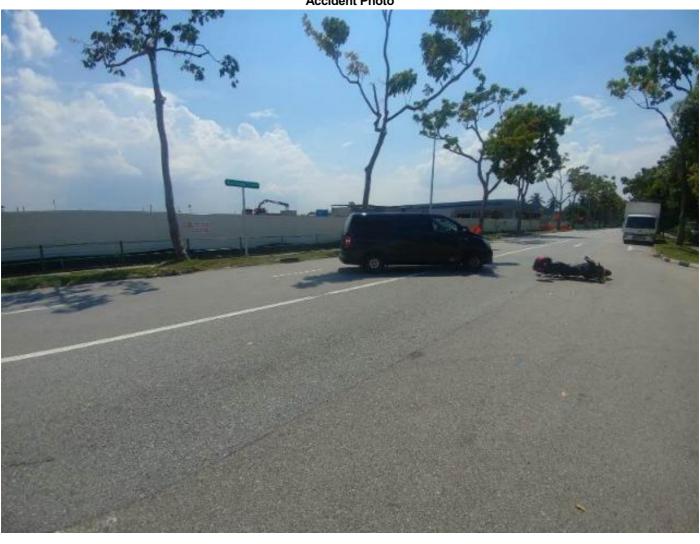


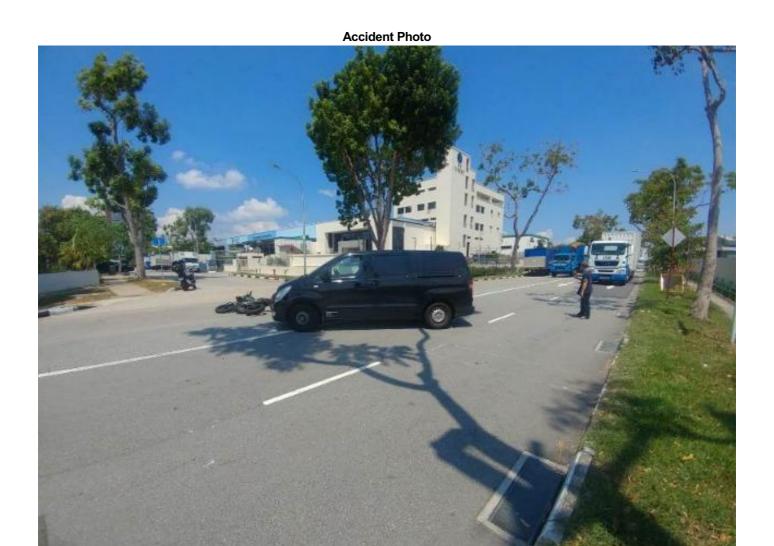


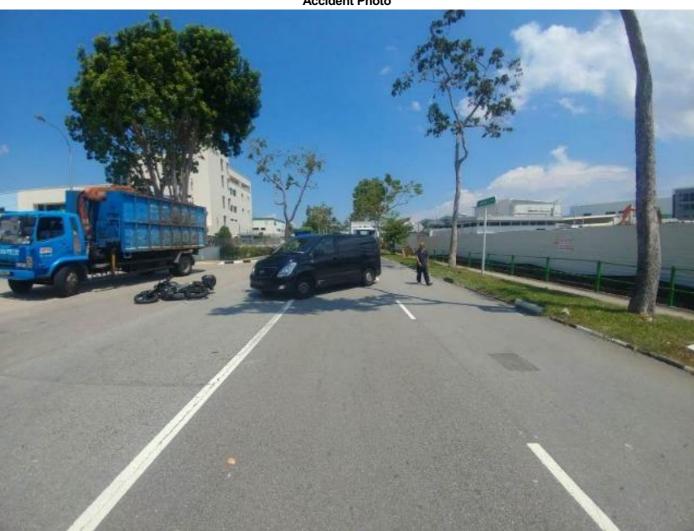


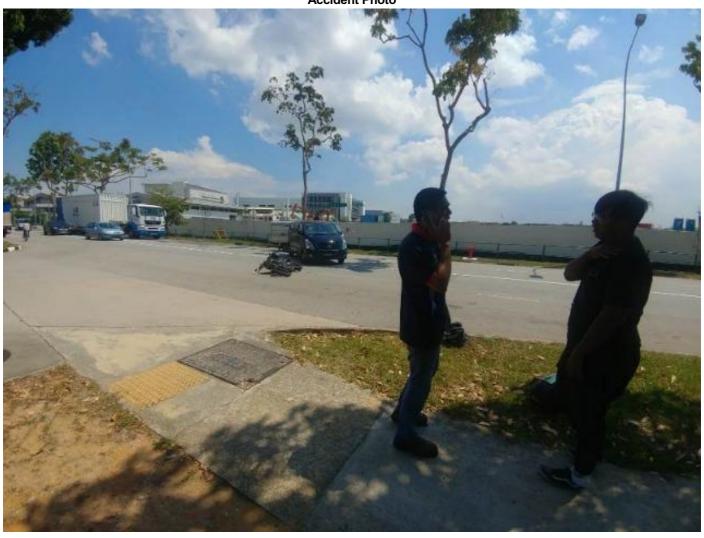






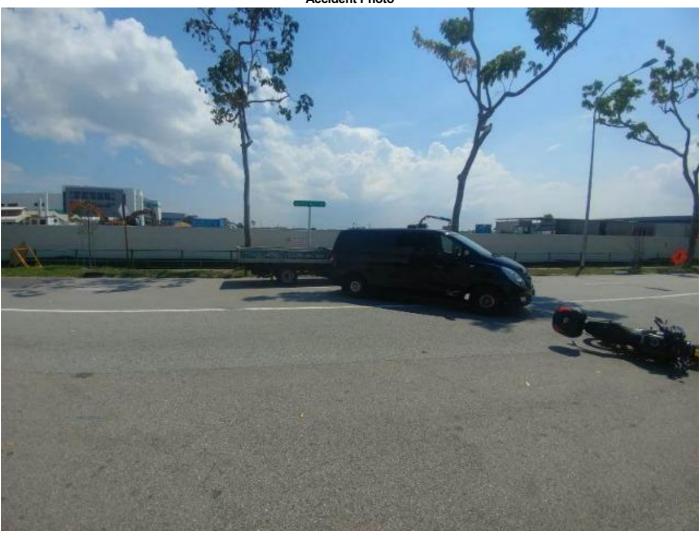












Identification Card



