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	02/05/2019 10:21
Date Of Accident	30/04/2019 16:45
Exact Location Of Accident	JUNC OF BUKIT TIMAH RD TURNINGLEFTTORACE COURSE RD
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMG9068E
Insured/Policyholder	
Name Of Registered Owner	TANJECKHUI
Co Reg No	53356221W
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98731213
Alternative Phone No	OFFICE-98731213
Vehicle Particulars	
Manufacturer	HONDA
Model	SHUTTLE HYBRID 1.5 AUTO
Exact Purpose for which vehicle was being used at time of accident	WORK
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5106644405
Cover Note Number	
Driver	
Name of Driver	TAN JECK HUI

Name of Driver TAN JECK HUI
NRIC No S7619728H
Date Of Birth 08/07/1976
Occupation OUTDOOR
Date Of Driving Pass 10/05/1999

Driving Experience 19 YEARS AND 11 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-98731213

Fax Number

Contact Number OTHERS-98731213

EMail Address NOEMAIL

Address BLK 172C EDGEDALE PLAINS

#03-468

2

NO

NO

3

Postcode 823172

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

salance company of Enter Committee to

General Information of the Accident

Type Of Accident SIDE SWIPE
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

Was any body injured in the Accident? YES

Was any injured conveyed to hospital by

ambulance?

Was any other material or property damaged? YES

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

Number of Passengers (Including Driver)

Passenger 1

NAME: : NIL

GENDER: : FEMALE

Passenger 2 NAME: : NIL

GENDER: : MALE

Details of Police Action

Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name PUNGGOL N.P.C

Police Station Address ROAD: 21A TEBING LANE, POSTCODE: 828837, COUNTRY:

YES

NO

SINGAPORE

Police Station Contact TEL NO: - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

Circumstances of Accident

PLS REFER TO THE POLICE REPORT : T/20190430/2190

Attachment(s)

Are accident photos available for attachment? YES
Was there any video captured by Car Camera? YES
Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SBS6371R

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category BUS

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

Approximate Age

Were seat belts worn?

Injuries Sustain **SLIGHT** Injured person in which vehicle? SMG9068E

Was this injured conveyed to hospital by

ambulance?

Address Postcode TAN JECK HUI

YES

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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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
- 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
- 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 Signati

NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN				/
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ESCRIBE CIRCUMSTANCI	ES OF THE ACCIDENT			1
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/				
	1			
ECLARATION			N	
We declare the foregoing par	ticulars are true in avery	respect.	1	1 2/5/2016
IJECKHU!		A	1	1 2/5/2010
olicyholder's Signature ate & Time:	Oriver's Signatu	the policyholder)	Reporting Centre I Name:	Personnel's Signature
	Date & Time:	de Mariament	NRIC/FIN No.:	

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Sketch Plan #3





Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999

2 of 4 Report No. T/20190430/2190

CONTINUATION OF REPORT

Details of Perso		BUILD	1577 (1985)	areni		DUNE NEW PROPERTY
Any Pedestrian I No. of Pedestrian			Use of Pe	dostria	Cross	sing: NA
Driver		2000	OSE OFFE	destrial	101088	sing, NA
Name	TAN JECK HUI		THE REAL PROPERTY.	ID No	1.	S7619728H
Related Vehicle	SMG9068E (Car)			Conta	ct No.	98731213
Hospital/Clinic	TH CHIA MEDICAL PRACTICE			Class of Driving Licence & Expiry Date		Class: 3 Date of Expiry: NIL
Date Treatment	30/04/2019 Date Di				NIL	
No. of Days gran	of Days granted Medical Leave 05			f Injury		
Driver	OV. SHARWERS	49.04	C. La Constant	THE REAL PROPERTY.	Oligit	PHONE THE PARTY OF
Name	GANESAN CHANDRAKASAN			ID No		G2094011K
Related Vehicle	NIL			Contact No.		85958275
Hospital/Clinic	NIL			Class Drivin Licent Expiry	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Disc	And the Control of th	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of		NIL	

Brief Details.

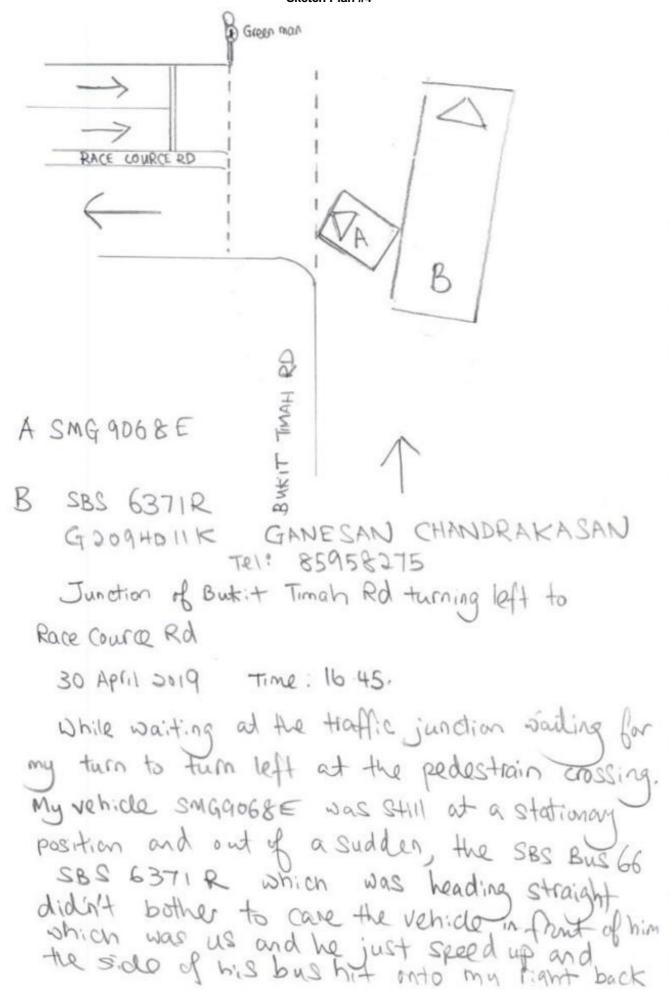
On 30/04/2019 at around 1624hrs, I picked up my passenger and that was the last time I saw my vehicle, SMG9068E, intact.

On 30/04/2019 at around 1645hrs, I was driving along Bukit Timah Road when I approached a junction going towards Race Course Road. As the green man is still on and pedestrians were crossing, I stopped my vehicle. Suddenly, I felt an impact coming from my right rear bumper for about 5 seconds. That was when I discovered that a Go-Ahead Singapore Bus, SBS6371R had hit my vehicle. I stopped my vehicle and went out. The driver then approached me. That was when I discover a crack at lower area of my test rear bumper. I then exchanged particulars with the driver.

On 30/04/2019 at around 1930hrs, I went to TH Chia Medical Practice to seek treatment and was given 5 days MC bearing number 0000024518.

I wish to inform that I have an in car CCTV in the front and the rear capturing the whole incident.

I am lodging this report for Police's assistance.



Sketch Plan #5

on board shorting formaring bedand having shock

Page 8 of 31















































Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999 1 of 4 Report No. T/20190430/2190

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 30/04/2019 23:05			Vide Report No.:	Station Diary No.:		
Informant's Particulars				工作的 有用的		
Name of	f Informant: CK HUI		Address: APT BLK 172C EDGEDALE PLAINS #03-468 SINGAPORE 823172			
ID Type / ID No.: NRIC NO / S7619728H			Contact No.: Home/Office:	Mobile: 98731213		
Nationality: SINGAPORE CITIZEN		EN	Email:			
Sex: Male	Age:	Date of Birth: 08/07/1976	Type of Informant: Driver			
Race: Chinese			Language: English	Institution / School Name:		
Occupation: PRIVATE HIRER DRIVER		RIVER	Driving Licence Information: Class: 3	Date of Expiry:		

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 30/04/2019 16:4	S	ype of Location traight Road
Location: Along Road 1 BUKIT TIMAI RACE COUR	The state of the s	load 2			
Weather: Sunny	TOTAL CONTRACTOR OF THE PROPERTY OF THE PROPER			Road Speed Limit: 50 Km/h	
		Traffic Control: Traffic Light - Wo	rking	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyono	conveyed by

Details of V	ehicle Involved		200	No Valencia Sill		
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SBS6371R	Bus/Coach/Mi nibus				Slightly Damaged	7
SMG9068E	Car	HONDA	Shuttle	White	Slightly Damaged	2

Details of V	ehicle Insurance	在一般的工作的表现	当时经济农村	SUPPLEMENT OF THE PARTY OF THE
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMG9068E	NTUC Income Insurance Co-Operative Limited	5106644405	03/01/2019	03/01/2020





Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999 2 of 4 Report No. T/20190430/2190

CONTINUATION OF REPORT

Details of Perso	n Involved			Kree is	TANK	THE RESERVE TO THE PARTY OF THE
Any Pedestrian Ir	nvolved: No					
No. of Pedestrian	s Injured: NIL		Use of Per	destrian	Cross	ing: NA
Driver	THE PERSON		U see Eller TV	75103		Carthery Street City and a
Name	TAN JECK HUI			ID No.		S7619728H
Related Vehicle	SMG9068E (Car)			Conta	ct No.	98731213
Hospital/Clinic	TH CHIA MEDICAL PRACTICE			Class of Driving Licence & Expiry Date		Class: 3 Date of Expiry: NIL
Date Treatment	30/04/2019	Date Disc	harge	NIL		
No. of Days granted Medical Leave 05			Degree of			
Driver					200	DESCRIPTION OF STREET
Name	GANESAN CHANDE		ID No		G2094011K	
Related Vehicle	NIL			Contact No.		85958275
Hospital/Clinic	NIL			Class Drivin Licens Expiry	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Disc	harge	NIL	
No. of Days gran	ted Medical Leave	NIL	Degree of		NIL	

Brief Details.

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Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999



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3 of 4 Report No. T/20190430/2190

CONTINUATION OF REPORT





Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999 4 of 4 Report No. T/20190430/2190

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 Informant:
Date/Time:
30/04/2019 23:05
Classification Of Case:
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