

## 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	09/05/2019 09:23
Date Of Accident	08/05/2019 07:30
Exact Location Of Accident	BUANGKOK EAST DRIVE TOWARDS TAMPINES ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLP4037S
<b>Insured/Policyholder</b>	
Name Of Registered Owner	KARZ-TA LEASING
Co Reg No	53318368E
Email Address	KARZTALEASING@GMAIL.COM
Mobile Phone No	(LOCAL) +65-94775271
Alternative Phone No	OFFICE-94775271

### Vehicle Particulars

Manufacturer	TOYOTA
Model	VIOS-1.5 E CVT (A)
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	REPORTING ONLY
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	5084904286-02
Cover Note Number	

### Driver

Name of Driver	TAN HOCK YONG
NRIC No	S7420804E
Date Of Birth	06/07/1974
Occupation	OUTDOOR
Date Of Driving Pass	04/09/1998
Driving Experience	20 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94775271
Fax Number	
Contact Number	OTHERS-94775271
EEmail Address	KARZTALEASING@GMAIL.COM

Address	BLK 126C EDGEDALE PLAINS #15-300
Postcode	823126
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	CHAIN COLLISION
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	3
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)	2
Passenger 1	NAME: : PASSENGER GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police?	NO
If Yes, Please state which Police Station	
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO SKETCH PLAN

#### 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	SKR9039E
Vehicle Make/Model/Colour	MAZDA 3
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MR LAI
NRIC/Passport Number	
Contact Number	90029172
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)2

Passenger 1NAME: :  
GENDER: :

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SLM7574D

Vehicle Make/Model/Colour

HONDA VEZEL

Details Of Properties

Vehicle Category

PRIVATE CAR

Name of Driver

NRIC/Passport Number

Contact Number

91370106

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## 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**.
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. 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) 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:

*Hydant*  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 8/5/19

69/05/2019  
Reporting Centre Personnel's Signature  
Name: *Rishi*  
NRIC/FIN No.: *100101010101010101*

## Accident Sketch Plan

### SKETCH PLAN

Cor A-SLP4037S

Car B-S1KR9039E

Car C - 8LM75740

Terapias Rood

039E  
5740  
Buongkur East Drive  
B

→ Towards left

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As per attached Police Report

### DECLARATION

I/We declare the foregoing particulars are true in every respect.

Policyholder's Signature

Date & Time: 8/5/19

Driver's Signature

(If driver is not the policyholder)

Date & Time: 8/5/19

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20190508/2125

1 of 3

Police Station Of Origin:  
Tiong Bahru NPP  
128 Kim Tian Road #01-123 SINGAPORE  
160128  
Tel No: 1800-2739999

Report No. T/20190508/2125

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/05/2019 15:04	Vide Report No.:	Station Diary No.: 49
--	------------------	--------------------------

### Informant's Particulars

Name of Informant: TAN HOCK YONG			Address: APT BLK 126C EDGEDALE PLAINS #15-300 SINGAPORE 823126	
ID Type / ID No.: NRIC NO / S7420804E			Contact No.: Home/Office:	Mobile: 94775271
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 44	Date of Birth: 06/07/1974	Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation: Other car and light goods vehicle drivers nec			Driving Licence Information: Class:	Date of Expiry:

### General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 08/05/2019 07:30	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 BUANGKOK EAST DRIVE TAMPINES ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		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
SKR9039E	Car	MAZDA	3	Grey	Slightly Damaged	1
SLM7574D	Car	HONDA	VEZEL	Black	Slightly Damaged	0
SLP4037S	Car	TOYOTA	VIOS	Grey	Slightly Damaged	1

# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20190508/2125

Police Station Of Origin:  
Tiong Bahru NPP  
128 Kim Tian Road #01-123 SINGAPORE  
160128  
Tel No: 1800-2739999

2 of 3

Report No. T/20190508/2125

## CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TAN HOCK YONG	ID No.	S7420804E
Related Vehicle	SLP4037S (Car)	Contact No.	94775271
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 the above mentioned date, time and location, I was driving along Buangkok East Drive towards Tampines Rd when the car in front of me (SKR9039E) had done an emergency brake however it failed to come to a stop and the front of the car had hit into the rear bumper of the car in front of it (SLM7574D). As a result of that collision, I also did an emergency brake and couldn't stop in time. The front of my car had hit into the rear bumper of the car in front. None of us faced any injuries nor was anyone conveyed by ambulance. We didn't call for the police.

I only exchanged particulars with the driver of SKR9039E. Particulars as follow: Mr Lai 90029172.

POLICE REPORT



SINGAPORE  
POLICE FORCE



T/20190508/2125

Police Station Of Origin:  
Tiong Bahru NPP  
128 Kim Tian Road #01-123 SINGAPORE  
160128  
Tel No: 1800-2739999

3 of 3

Report No. T/20190508/2125

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 2 HADI BIN HAFIZ ABDULLAH QUEK *[Signature]*

Signature Of Informant:

*[Signature]*

Signature Of Interpreter:

Not applicable

Date/Time:

08/05/2019 15:04

Officer In Charge Of Case:

TP / GIA /

Staff Sgt WONG SIEU LUI

Contact No.: 65476151

Classification Of Case:

Authentication Stamp

NP168



*[Signature]*

Signature

Singapore Police Force



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo

