

## 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	13/05/2019 20:30
Date Of Accident	10/05/2019 22:25
Exact Location Of Accident	BT TIMAH OUTSIDE THE NEXUS CONDO A/F BUS STOP
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBJ2466A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	FASTRAG SERVICES
Co Reg No	53372832X
Email Address	ALVINTANSM@GMAIL.COM
Mobile Phone No	(LOCAL) +65-92218155
Alternative Phone No	OFFICE-92218155

### Vehicle Particulars

Manufacturer	TOYOTA
Model	REGIUS ACE-3.0 GL (A)
Exact Purpose for which vehicle was being used at time of accident	DOING DELIVERY
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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMCVSN3016681900
Cover Note Number	

### Driver

Name of Driver	TAN SHIUAN MENG, ALVIN
NRIC No	S9444525F
Date Of Birth	27/11/1994
Occupation	OUTDOOR
Date Of Driving Pass	31/03/2015
Driving Experience	4 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-92218155
Fax Number	
Contact Number	OTHERS-92218155
Email Address	ALVINTANSM@GMAIL.COM

Address	BLK 9 JALAN RUMAH TINGGI #15-459
Postcode	150009
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 - CHANGE/CROSS LANE
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
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)	1

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TIONG BAHRU NEIGHBOURHOOD POLICE POST
Police Station Address	<b>ROAD:</b> BLK 128 KIM TIAN ROAD #01-123/ 125 , <b>POSTCODE:</b> 160128 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-2739999 - <b>FAX NO:</b> 62785651
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190511/2084

#### 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	GBG5996H
Vehicle Make/Model/Colour	TOYOTA HIACE
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	GOH CHIN KEONG
NRIC/Passport Number	S7510886I
Contact Number	91943577
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver) 1

## Accident Sketch Plan

### SKETCH PLAN

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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: 14/05/19

Driver's Signature

(If driver is not the policyholder)

Date & Time:

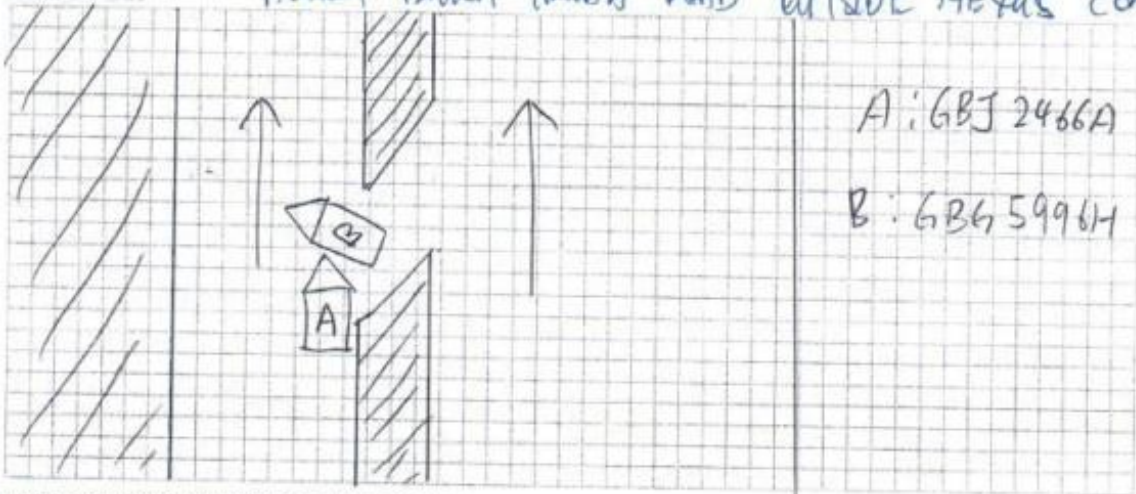
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

# Accident Sketch Plan

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


Please refer to police report. T/20190511/2084

## DECLARATION

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

☒ Policyholder's Signature  
Date & Time: 14/05/19

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Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

 14/05/2019  
Reporting Centre Personnel's Signature  
Name: Roha  
NRIC/FIN No.:



# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20190511/2084

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

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Report No. T/20190511/2084

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/05/2019 14:14	Vide Report No.:	Station Diary No.: 28
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### Informant's Particulars

Name of Informant: TAN SHIUAN MENG, ALVIN			Address: APT BLK 618 ANG MO KIO AVENUE 4 #06-1055 SINGAPORE 560618		
ID Type / ID No.: NRIC NO / S9444525F			Contact No.: Home/Office: Mobile: 92218155		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 24	Date of Birth: 27/11/1994	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: DELIVERY DRIVER			Driving Licence Information: Class: 3 Date of Expiry:		

### General Information of the Accident

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 10/05/2019 22:25	Type of Location: Straight Road
Location: Along Road 1 BUKIT TIMAH ROAD				
Outside The Nexus Condo, After Bus Stop (B42041)				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: No Traffic	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: No	

### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBG5996H	Van	TOYOTA	HIACE	Blue	Slightly Damaged	0
GBJ2466A	Van	TOYOTA	REGIUS ACE	Black	Slightly Damaged	0

### Details of Person Involved

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

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T/20190511/2084

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160128  
Tel No: 1800-2739999

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Report No. T/20190511/2084

## CONTINUATION OF REPORT

<b>Driver</b>			
Name	GOH CHIN KEONG	ID No.	S7510886I
Related Vehicle	GBG5996H (Van)	Contact No.	91943577
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
<b>Driver</b>			
Name	TAN SHIUAN MENG, ALVIN	ID No.	S9444525F
Related Vehicle	GBJ2466A (Van)	Contact No.	92218155
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	NIL

### Brief Details.

On 10/05/2019 at about 2225hrs, I was travelling along Bukit Timah Road towards Clementi Road. I was driving on the second lane from the left, on the left side of the road divider. While I was outside The Nexus condo and after the bus stop (Bus Stop No.: B42041), there was a blue van (GBG5996H) driving on the right side of the road, on the right side of the road divider. There was an exit filter road along the road divider and the exit is for the left side of the road to the right side of the road. The van travelled from the right side of road and went into the left side of the road. As I could not brake in time, I hit onto the left side of the van.

Subsequently, both of us alighted from our vehicle and exchanged our particulars. He told me that he will pay for the damages on my van privately.

On 11/05/2019 at about 0900hrs, I went to checked the damages on the van and I told him about it. He then told me that I can just proceed to inform my insurance about the matter.

I wish to inform that the front right of my van had dents and scratches while his van has dents and scratches above the rear left wheel.

I wish to further inform that the van ignored the sign as the exit filter was only for exiting from the left side of the road to the right side of the road.

My van has a working in-car camera and it managed to capture the footage of the accident.

POLICE REPORT



SINGAPORE  
POLICE FORCE

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



T/20190511/2084

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Report No. T/20190511/2084

CONTINUATION OF REPORT



# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20190511/2084

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

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Report No: T/20190511/2084

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 LEOW JUN CONG

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

11/05/2019 14:14

Officer In Charge Of Case:

TP / GIA /

Staff Sgt WONG SIEU LUI

Contact No.: 65476151

Classification Of Case:

Authentication Stamp

NP168

Accident Photo



Accident Photo



Accident Photo





Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo





# Identification Card

REPUBLIC OF SINGAPORE			
IDENTITY CARD NO. S9444525F			
	Name TAN SHUAN MENG, ALVIN		
	陈宜鸣		
	Race CHINESE		
	Date of Birth 27-11-1988		
	Place of Birth SINGAPORE		
		Sex M	
5737358			
			
Identity No. S9444525F			
	Date of Issue 03-08-2017		
Address APT BLK 918 ANG MO KIO AVENUE 4 #08-1088 SINGAPORE 680818			

## Driving License



### YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

EFFECTIVE DATE

Class 3 Motor cars with unladen weight  $\leq 3500\text{kg}$  with  $\leq 7$  passengers, exclusive of driver, and other motor vehicles with unladen weight  $\leq 3500\text{kg}$  31 Mar 2018

NP 4204

