

## 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	24/05/2019 16:44
Date Of Accident	10/04/2019 12:45
Exact Location Of Accident	JUNC OF TANJONG KATONG RD SOUTH & MOUNTBATTEN RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKX2153Y
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TWINCAR LEASING PTE LTD
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-83802233

### Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	999994387
Cover Note Number	-

### Driver

Name of Driver	LOH CHENG KIAT
NRIC No	S7122508I
Date Of Birth	23/06/1971
Occupation	OUTDOOR
Date Of Driving Pass	17/02/2009
Driving Experience	10 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-97883356
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	62 ELIAS RD #12-06
Postcode	519939
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	COLLISION - HEAD TO REAR
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?	
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: : UNKNOWN GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	PASIR RIS NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 1 PASIR RIS DRIVE 4 , <b>POSTCODE:</b> 519457 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-5852999 - <b>FAX NO:</b> 65855261
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

#### 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	SLV1541R
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)

## Accident Sketch Plan

### SKETCH PLAN

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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:

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

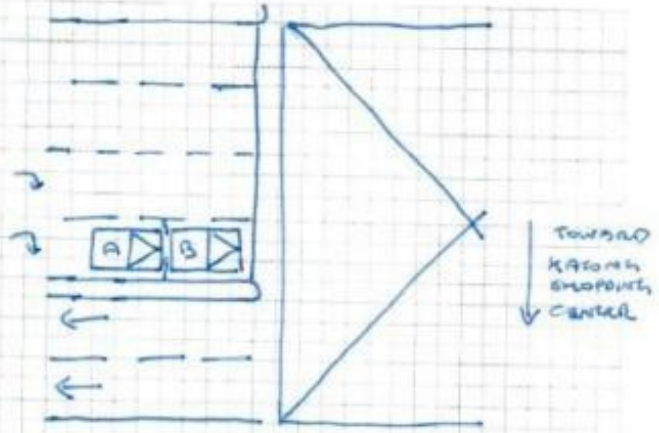
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

# Accident Sketch Plan

## SKETCH PLAN

VEHICLE A  
- SKX 2153 Y

VEHICLE B  
- SLV 1541 R



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

AS PER POLICE REPORT.

REPORT NUMBER

1/20190512/2085

AND I WOULD LIKE TO ADD ON,

-UPON THE ACCIDENT THERE WAS NO DAMAGE TO THE BOTH VEHICLE.

VEHICLE A

- SKX 2153 Y

VEHICLE B

- SLV 1541 R

## DECLARATION

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

Policyholder's Signature  
Date & Time:

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

Reporting Centre Personnel's Signature  
Name:

# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20190512/2085

Police Station Of Origin:  
Pasir Ris N.P.C  
1 Pasir Ris Drive 4 #01-01 SINGAPORE  
519457  
Tel No: 1800-5852999

1 of 3

Report No. T/20190512/2085

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 12/05/2019 19:19	Vide Report No.:	Station Diary No.: 96
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### Informant's Particulars

Name of Informant: LOH CHENG KIAT			Address: 62 ELIAS ROAD #12-06 SINGAPORE 519939		
ID Type / ID No.: NRIC NO / S7122508I			Contact No.: Home/Office: Mobile: 97883356		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 47	Date of Birth: 23/06/1971	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: GRAB DRIVER			Driving Licence Information: Class: 3A Date of Expiry:		

### General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 10/04/2019 12:45	Type of Location: X-Junction
Location: Junction of Road 1 and Road 2 TANJONG KATONG ROAD SOUTH MOUNTBATTEN ROAD				
Weather: Clear	Road Surface: Dry	Road Speed Limit:		
Traffic Flow:	Traffic Control: Traffic Light - Working	Traffic Volume: Moderate		
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
SKX2153Y	Car				No Damage	1
SLV1541R	Car				No Damage	1

### Details of Person Involved

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



# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20190512/2085

2 of 3

Report No. T/20190512/2085

Police Station Of Origin:  
Pasir Ris N.P.C  
1 Pasir Ris Drive 4 #01-01 SINGAPORE  
519457  
Tel No: 1800-5852999

## CONTINUATION OF REPORT

<b>Driver</b>				
Name	LOH CHENG KIAT		ID No.	S7122508I
Related Vehicle	SKX2153Y (Car)		Contact No.	97883356
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 3A Date of Expiry: NIL
Date Treatment	NIL			
No. of Days granted Medical Leave	NIL	Date Discharge	NIL	
Driver			Degree of Injury	NIL
<b>Driver</b>				
Name	TAN TECK YONG		ID No.	S7411994H
Related Vehicle	SLV1541R (Car)		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL			
No. of Days granted Medical Leave	NIL	Date Discharge	NIL	
		Degree of Injury	NIL	

### Brief Details.

On 10/04/2019 at about 1245hrs, I was driving my vehicle bearing the plate number SKX2153Y along Tanjong Katong Road South towards Paya Lebar. I then stopped at the traffic junction of Tanjong Katong Road South and Mountbatten Road as the traffic light was red. I was in the turn right lane and there is a vehicle bearing the plate number SLV1541R in front of me. As my eyes was dry, I rubbed both of my eyes. However, as I was rubbing my eyes, my foot released the brake and my vehicle moved forward slowly. My vehicle then touched the rear end of SLV1541R.

I then came out of my vehicle and made a check, both drivers then exchange particulars and left the scene. No one was injured at that point of time and I informed my vehicle rental company about the accident. Both of us agreed to settle the accident through the rental company.

On 12/05/19 at about 1700hrs, I discovered a letter from the Traffic police asking me to lodge an accident report regarding the matter.

# POLICE REPORT



SINGAPORE  
POLICE FORCE



T/20190512/2085

Police Station Of Origin:  
Pasir Ris N.P.C  
1 Pasir Ris Drive 4 #01-01 SINGAPORE  
519457  
Tel No: 1800-5852999

3 of 3

Report No. T/20190512/2085

## 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: G / Sgt 2 JEREMY CHUNG	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 12/05/2019 19:19
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:

Authentication Stamp  
NP168



SINGAPORE  
POLICE FORCE



SCENE PHOTO



# DRIVING DOC

REPUBLIC OF SINGAPORE  
DRIVING LICENCE S71225081



LOH CHENG KIAT

何清吉

CHINESE

23-08-1971 M

SINGAPORE

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number **S71225081**

Name

LOH CHENG KIAT

Birth Date: 23 Jun 1971

Issue Date: 17 Feb 2009



AUTO TRANSMISSION  
VEHICLE ONLY



VOCATIONAL LICENCE

Licence No : S71225081

Name : LOH CHENG KIAT

Please visit [www.lta.gov.sg](http://www.lta.gov.sg) to check  
the status of this vocational licence



2771873



NRIC No: S71225081

Valid Until: 28-12-1995

62 ELIAS ROAD #12-06  
SINGAPORE 519639

NRIC No: S71225081

Date: 01/02/2012

No: 6943986

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

PASS DATE

Class 3A Motor cars without clutch pedals (Auto) <= 2000kg  
with <= 7 passengers, exclusive of the driver, and  
other motor vehicles without clutch pedals <= 2500kg

17 Feb 2009



Licence No: S71225081

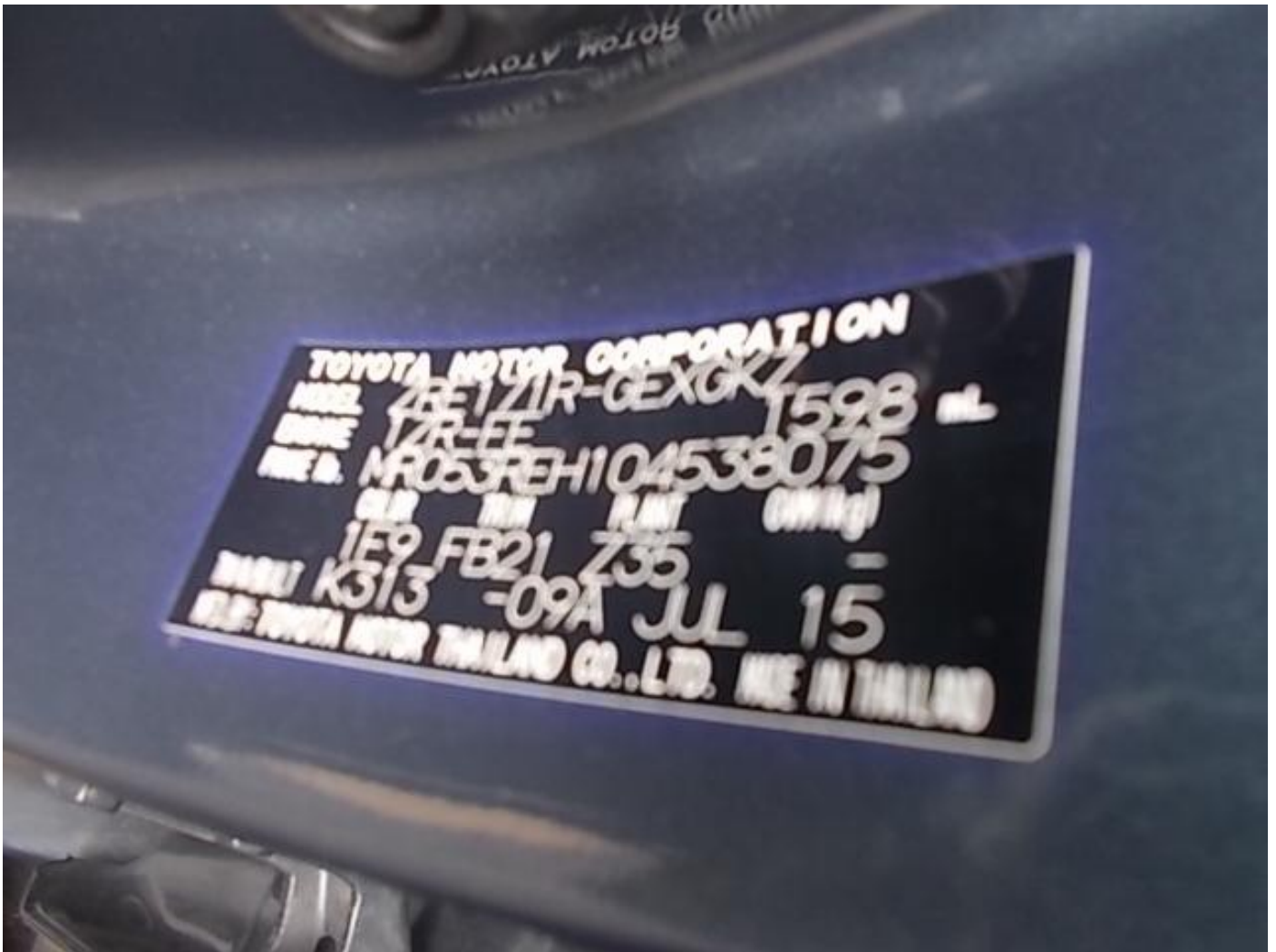
NP 425A

This card is not transferable and is the property of the Land Transport  
Authority (LTA). It must be surrendered to LTA on request. If found, please  
return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
12	TAXI VL	07/02/2019



Accident Photo





Accident Photo



Accident Photo





**Accident Photo**



**Accident Photo**



Accident Photo



**Accident Photo**





**Accident Photo**

