

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	24/06/2019 15:39
Date Of Accident	14/12/2018 23:30
Exact Location Of Accident	JUNC OF LOR 27A GEYLANG & GEYLANG RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKM3392A
Insured/Policyholder	
Name Of Registered Owner	TAN WEE HAN JOHN
NRIC No	S1704632B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96262108
Alternative Phone No	OFFICE-96262108

Vehicle Particulars

Manufacturer	HYUNDAI
Model	ELANTRA
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 CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5064208532-04
Cover Note Number	-

Driver

Name of Driver	TAN WEE HAN JOHN
NRIC No	S1704632B
Date Of Birth	07/08/1965
Occupation	INDOOR
Date Of Driving Pass	29/10/1999
Driving Experience	19 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-96262108
Fax Number	
Contact Number	OFFICE-96262108
EEmail Address	NOEMAIL

Address	7 LORONG 27A GEYLANG #08-05
Postcode	388133
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-

General Information of the Accident

Type Of Accident	COLLIDED INTO PEDESTRIAN
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	1
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
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	TRAFFIC POLICE DIVISION HQ
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
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	
Vehicle Make/Model/Colour	PEDESTRIAN
Details Of Properties	
Vehicle Category	NA/UNKNOWN
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 PEDESTRIAN

Approximate Age

Injuries Sustain SLIGHTLY

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance? YES

Address

Postcode

SKETCH PLAN

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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.:

SKETCH PLAN

Geylang Rd.

Off - Pedestrian:

A

A = SKM 3392A

Lor 27A Geylang

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please Refer to Police Report

DECLARATION

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

[Signature]

Policyholder's Signature
Date & Time:

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

[Signature]

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



**SINGAPORE
POLICE FORCE**



T/20181215/2004

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20181215/2004

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 15/12/2018 02:01	Vide Report No.:	Station Diary No.:
--------------------------------------------	------------------	--------------------

Informant's Particulars

Name of Informant: TAN WEE HAN JOHN			Address: APT BLK 7 LORONG 27A GEYLANG #08-05 SIMS GREEN SINGAPORE 388133		
ID Type / ID No.: NRIC NO / S1704632B			Contact No.: Home/Office: Mobile: 96262108		
Nationality: SINGAPORE CITIZEN			Email: *		
Sex: Male	Age: 53	Date of Birth: 07/08/1965	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: SELF EMPLOYED			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 14/12/2018 23:30	Type of Location:
Location: Junction of Road 1 and Road 2 LORONG 27A GEYLANG GEYLANG ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision:				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKM3392A	Car	HYUNDAI	ELANTRA 1.6 AT ABS D/AB 2WD 4DR	Blue	No Damage	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKM3392A	NTUC Income Insurance Co-Operative Limited	5064208532-04	21/02/2018	20/02/2019



**SINGAPORE
POLICE FORCE**



T/20181215/2004

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 3

Report No. T/20181215/2004

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: Yes			
No. of Pedestrians Injured: 1		Use of Pedestrian Crossing: Not Available	
Driver			
Name	TAN WEE HAN JOHN	ID No.	S1704632B
Related Vehicle	NIL	Contact No.	96262108
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 THE ABOVE MENTIONED DATE & LOCATION ,

I WAS DRIVING MY CAR ALONG LOR 27A. I WANT TO MAKE MY RIGHT TURN INTO GEYLANG ROAD.I STOPPED AND CHECKED OUT FOR TRAFFIC BEFORE MAKING MY TURN.IT WAS SAFE AND CLEAR TO TURN.

AS I PROCEED AND MOVED FORWARD,I KNOCKED DOWN A MALE PEDESTRIAN.

I AM NOT VERY SURE WHERE THE PEDESTRAIN CAME FROM.I APPROACHED THE GUY AFTER THE HIT AND HE SUSTAINED INJURIES .

AMBULANCE WAS CALLED AND HE WAS BROUGHT OVER TO THE HOSPITAL.MY CAR HAS NO DAMAGES AND NO OTHER GOVERNMENT PROPERTY INVOLVED.

I WAS TOLD BY THE POLICE TO MAKE AN ACCIDENT REPORT @ TP.

THATS ALL



**SINGAPORE
POLICE FORCE**



T/20181215/2004

3 of 3

Report No. T/20181215/2004

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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:
TP /
YOGENDRAN S/O RAJASAKARAN

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /

Contact No.:

Authentication Stamp
NP168

Signature Of Informant:

Date/Time:
15/12/2018 02:01

Classification Of Case:



**SINGAPORE
POLICE**

Signature:

19

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number **S1704632B**

Name
TAN WEE HAN JOHN

Birth Date **07 Aug 1965**

Issue Date **07 Jul 2010**




001871712A

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S1704632B



Name
TAN WEE HAN JOHN

陳 約 · 翰

Race
CHINESE

Date of birth
07-08-1965

Sex
M

Country of birth
SINGAPORE

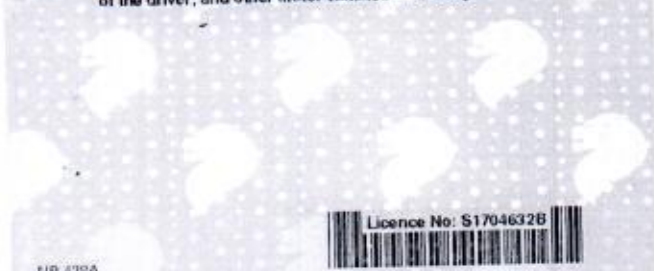



S1704632B


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

EFFECTIVE DATE

Class 3 **Motor Cars=< 9000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg** **29 Oct 1999**



Licence No: **S1704632B**



NP-426A

4607542



NRIC No. **S1704632B**



Date of issue
07-07-2010

Address
**7 LORONG 27A GEYLANG
#08-05
SINGAPORE 388133**

Hello, NAC_PAYA_UBI_800601

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

Policy Query

Policy No.	<input type="text"/>	Date of Accident	<input type="text" value="14/12/2018 15:33"/>							
Vehicle No.(For Motor)	<input type="text" value="SKM3392A"/>	Certificate Number	<input type="text"/>							
<input type="button" value="Search"/>										
Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="radio"/>	5064208532-04		TAN WEE HAN JOHN	S1704632B	GPC	drivo PREMIUM	SKM3392A	SKM3392A	21/02/2018	20/02/2019
<input type="button" value="Continue"/>										

Claim Handling

Accident MT/1049060

Policy No.	5064208532-04	Vehicle No.	SKM3392A	GST Registration No.	
Certificate No.					
Policyholder Name	TAN WEE HAN JOHN			Policyholder NRIC	S1704H
Product Code	PRIVATE CAR INSURANCE	Cover Type	drive PREMIUM	Loading	0
Contact No.(Mobile)	NA	Contact No.(Office)		Contact No.(Home)	
Email Address		Special Remark		eCode	No
KFK	<input checked="" type="radio"/> No <input type="radio"/> Yes	TCA	<input checked="" type="radio"/> No <input type="radio"/> Yes	eCode Reason	
NCD Protection	Yes	NCD Entitlement(%)	50	Private Hire	Not av
Accident Details					
Report Date	14/06/2019 15:55	Accident Report Within 24 hrs	Yes	Accident Type	Collision
Date of Accident	14/12/2018	Time of Accident hh:mm	00:00	Country of Accident	Singap
Reporting Centre		Orange Force		ICM No.	
Accident Location	ALONG LORONG 27 GEYLANG JUNCTION OF GEYLANG ROAD				
Excess					
Own damage Excess	600.00	Additional Excess	0	Windscreen Excess	100.00
Unnamed Driver Excess	0.00	Outside Singapore OD Excess	600.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		
Benefits					
GST Registered Information					
GST Registered	No	GST Registration Date			
GST Registration No.		GST Status Verified	Yes		
Modification History					
Policyholder Mailing Address					
Address 1	7 LORONG 27A GEYLANG	Address 2	#08-05 SIMS GREEN	Address 3	SINGA
Address 4		Address Type	Singapore address	Post Code	30613
Unit No.		Related Policy Number	5064208532-04		
OI Driver Info					
Driver Name		Driver Type		Driver DOB	
Unnamed driver Name		Driver NRIC		Driving Experience	
Register Date of Driver License		Driver Age		Contact No.(Home)	
Contact No.(Mobile)		Contact No.(Office)		Address 3	
Address 1		Address 2		Post Code	
Address 4		Address Type	Foreign address		
Unit No.					
Does he own a Singapore Registered car?	<input checked="" type="radio"/> Yes <input type="radio"/> No	Driver Vehicle No.		Driver Insurer Company	

Modification History

Claim 002 **New**

Claim Type *	OD-MX	Insured Name	TAN WEE HAN JOHN
Contact No.(Mobile)	96262108	Contact No.(Home)	67496959
Email Address	tanjsss@singnet.com.sg	OI Vehicle Number	SKM3392A
Claim Description	SKM3392A / PEDESTRIAN ON 14 Dec 2018		
Preferred Workshop	0	Insured Liability	Partially at Fault
Repair Option	Preferred	Preferred Workshop, Name unknown	GIA report
Finalisation	Yes	Received	
Date Registered		Claim Close Date	24/06/2019 17:59
Report Taken By	LIEW SHAN HUI		
<input checked="" type="checkbox"/> Print AK letter			

Save Submit

Attachment

Accident No.	MT/1049060	Claim No.	002
Last Doc. Received	<input checked="" type="radio"/> Yes <input type="radio"/> No	Upload Date	24/06/2019 18:00
Path *		Category *	Please Select
Choose File	No file chosen	Confidential	NO
		Urgency *	Normal

6/24/2019

Claim Handling(Claim Task)

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Choose File No file chosen

Message Read

Clear	Please Select	NO	Normal
Clear	Please Select	NO	Normal
Clear	Please Select	NO	Normal
Clear	Please Select	NO	Normal
Clear	Please Select	NO	Normal

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 24 Jun 2019 18:00	NRIC/ Driving License	Normal	NRIC/ Driving License 2019-6-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 24 Jun 2019 18:00	SAS	Normal	SAS 2019-6-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 24 Jun 2019 18:00	Photos	Normal	Photos 2019-6-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 24 Jun 2019 18:00	Photos	Normal	Photos 2019-6-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 24 Jun 2019 17:59	Photos	Normal	Photos 2019-6-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 24 Jun 2019 17:59	Photos	Normal	Photos 2019-6-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 24 Jun 2019 17:59	Photos	Normal	Photos 2019-6-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 24 Jun 2019 17:59	Photos	Normal	Photos 2019-6-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 24 Jun 2019 17:59	Photos	Normal	Photos 2019-6-24
	NAC_PAYA_UBI_800601(NATIONAL ASSESSMENT CENTRE SERVICES) o 24 Jun 2019 17:59	Photos	Normal	Photos 2019-6-24

Video List

Uploaded By/Date	Folder Date	File Name	Source
		Display in New Window	Scan and uploading