

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	01/07/2019 10:48
Date Of Accident	30/06/2019 14:30
Exact Location Of Accident	PIE (CHANGI) BEFORE EUNOS LINK EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SME5104X
Insured/Policyholder	
Name Of Registered Owner	TAN CHUN SIONG (CHEN JUNXIONG)
NRIC No	S8414746Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93632452
Alternative Phone No	OFFICE-93632452

Vehicle Particulars

Manufacturer	HONDA
Model	CIVIC 1.6 VTI CVT
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	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MT107335
Cover Note Number	

Driver

Name of Driver	TAN CHUN SIONG (CHEN JUNXIONG)
NRIC No	S8414746Z
Date Of Birth	07/05/1984
Occupation	INDOOR
Date Of Driving Pass	30/12/2003
Driving Experience	15 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93632452
Fax Number	
Contact Number	OFFICE-93632452
EEmail Address	NOEMAIL

Address	BLK 219B BEDOK CENTRAL #15-22
Postcode	462219
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	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?	YES
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	TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY
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

REFER TO POLICE REPORT - T/20190630/7008.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	VIDEO FOOTAGE TOO LARGE
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLJ4550H
Vehicle Make/Model/Colour	SUBARU
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	NG CHEE MEN
NRIC/Passport Number	S2653436D
Contact Number	
Address	
Postcode	

Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SHD6076B
Vehicle Make/Model/Colour TOYOTA PRIUS
Details Of Properties
Vehicle Category TAXI
Name of Driver LIO YOON FATT
NRIC/Passport Number S1724177Z
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name TAN CHUN SIONG (CHEN JUNXIONG)
Approximate Age
Injuries Sustain BODY
Injured person in which vehicle? SME5104X
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

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.

70 JUNE 2019 4:30PM
Policyholder's Signature
Date & Time:

30 JUNE 2019 4:30PM
Driver's Signature
(if driver is not the policyholder)
Date & Time:

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

Police Report



**SINGAPORE
POLICE FORCE**



T/20190630/7008

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

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Report No. T/20190630/7008

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 30/06/2019 21:40	Vide Report No.:	Station Diary No.:
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Informant's Particulars			
Name of Informant: TAN CHUN SIONG		Address: APT BLK 219B BEDOK CENTRAL #15-22 SINGAPORE 462219	
ID Type / ID No.: NRIC NO / S8414746Z		Contact No.:	Mobile: 93632452
Nationality: SINGAPORE CITIZEN		Email: tanchunsiong@outlook.sg	
Sex: Male	Age: 35	Date of Birth: 07/05/1984	Type of Informant: Vehicle Owner
Race: Chinese		Language: English	Institution / School Name:
Occupation: IT service manager		Driving Licence Information: Class: 3	Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 30/06/2019 14:30	Type of Location: Flyover
Location: PAN ISLAND EXPRESSWAY				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 80 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	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
SHD6076B	Car	TOYOTA	Prius	Maroon	Slightly Damaged	4
SLJ4550H	Car	SUBARU	VX	Grey	Slightly Damaged	3

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

Police Report



**SINGAPORE
POLICE FORCE**



T/20190630/7008

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

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Report No. T/20190630/7008

CONTINUATION OF REPORT

Driver			
Name	LIO YOON FATT	ID No.	S1724177Z
Related Vehicle	SHD6076B (Car)	Contact No.	81869038
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
Driver			
Name	NG CHEE MEN	ID No.	S2653436D
Related Vehicle	SLJ4550H (Car)	Contact No.	98385693
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
Vehicle Owner			
Name	TAN CHUN SIONG	ID No.	S8414746Z
Related Vehicle	NIL	Contact No.	93632452
Hospital/Clinic	24 HOUR WALK-IN CLINIC	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	30/06/2019	Date Discharge	30/06/2019
No. of Days granted Medical Leave	NIL	Degree of Injury	Slight

Brief Details.

I was travelling along PIE towards Changi Airport before Eunos Exit 8 on Lane 1 at around 227pm on Sunday. My vehicle number is SME 5104X and I had to execute emergency brake on my vehicle as the Taxi (SHD6076B) before me came to a complete stop on the highway. At this point in time, there was no contact yet and both the Taxi and my vehicle were stationary. Approximately seconds later, the vehicle (SLJ 4550H) didn't manage to stop in time, and collided into my rear, which resulted in the collision of my stationary vehicle (SME5104X) into the Taxi (SHD6076B).

As far as I observed, the stoppage of the Taxi (SHD6076B) was caused by another vehicle(Marserati SKT109K) and more vehicle pileup, nonetheless further details in front are not visible from my point of view.

The airbags on my vehicle has been deployed, and I've proceeded to visit the hospital for an X-Ray and Ultrasound checkup due to pain from the impact.

Police Report



**SINGAPORE
POLICE FORCE**



T/20190630/7008

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

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Report No. T/20190630/7008

CONTINUATION OF REPORT

I have IVR video footage of the impact, capturing for both the front and rear of the vehicle before and after point of impact.

The videos are unlisted and are not made public. They can be viewed here with the URL below

Front Camera: <https://youtu.be/Ph0YNYigQcM>

Rear Camera: <https://youtu.be/lhfE6DAU1w0>

Police Report



**SINGAPORE
POLICE FORCE**

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



T/20190630/7008

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Report No. T/20190630/7008

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 30/06/2019 21:40
Officer In Charge Of Case: TP / TPIB / YAN MINGSHENG DANIEL Contact No.: 65476252	Classification Of Case:
Authentication Stamp NP168	

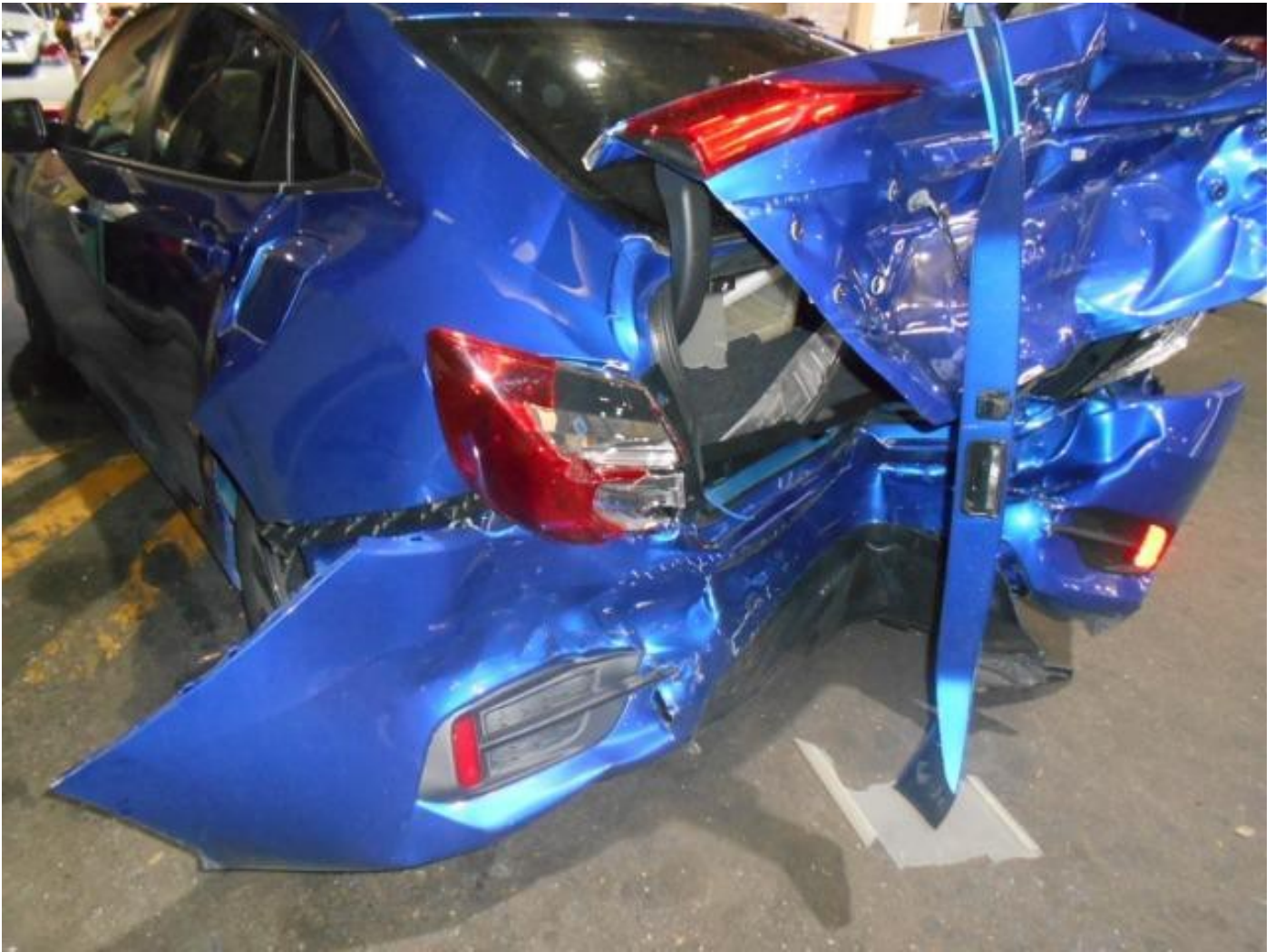
Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



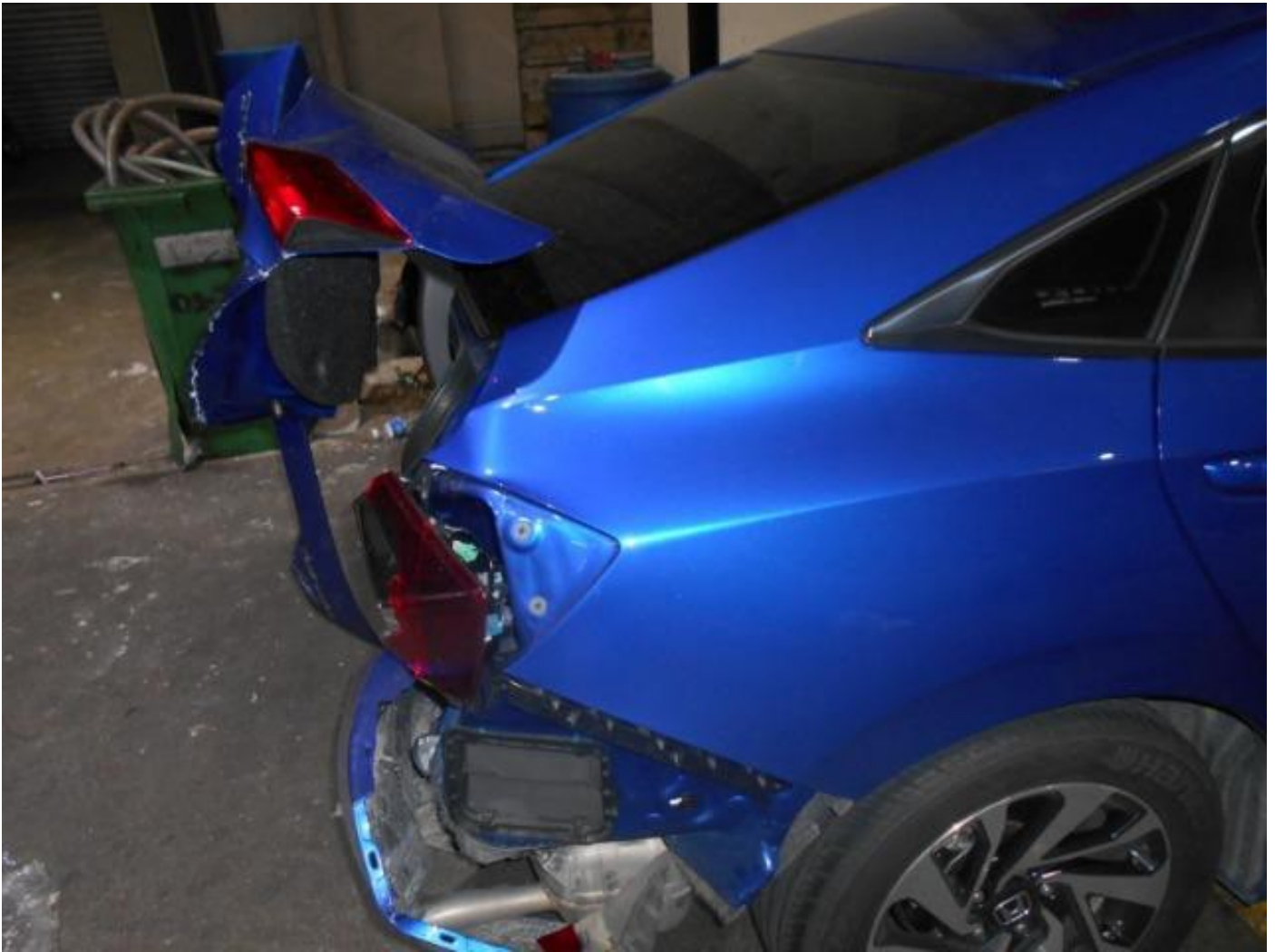
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