

## 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	10/07/2019 16:11
Date Of Accident	10/07/2019 03:25
Exact Location Of Accident	DUNLOP STREET // CLIVE STREET
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD1036A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	PREMIER TAXIS PTE LTD
Co Reg No	200304975H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-62148880

### Vehicle Particulars

Manufacturer	KIA
Model	OPTIMA-1.7 D (A)
Exact Purpose for which vehicle was being used at time of accident	HIRED & REWARDS
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	TAXI

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	5107202885
Cover Note Number	

### Driver

Name of Driver	TAUFIK BIN ANWAR
NRIC No	S72439131
Date Of Birth	29/11/1972
Occupation	OUTDOOR
Date Of Driving Pass	20/07/2005
Driving Experience	13 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-88147599
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 96 #04-469 ALJUNIED CRESCENT
Postcode	380096
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 - CROSS JUNCTION
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?	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)	2
Passenger 1	NAME: : SIVA - PAX IN THE FRONT SEAT GENDER: : MALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	SENGKANG NPC
Police Station Address	ROAD: 2 SENGKANG SQUARE #01-02 , POSTCODE: 545025 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

VEH. A - 1 PAX VEH. B - NO PAX \*REFER TO ATTACH 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 Witness 1

Name	MR SIVA - PAX IN VEH. A
Phone Number	
Email Address	

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHA7072X
Vehicle Make/Model/Colour	COMFORT TAXI
Details Of Properties	VEH. B

Vehicle Category	TAXI
Name of Driver	KEH HONG CHUAN
NRIC/Passport Number	S6907492H
Contact Number	97494430
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	DAMAGED ON THE FRONT LEFT
No. Of Passenger (Including Driver)	1

#### DETAILS OF INJURED PERSON 1

Name	TAUFIK BIN ANWAR - DRIVER OF VEH. A
Approximate Age	
Injuries Sustain	WENT TTSH FOR TREATMENT & HAD 5 DAYS MC
Injured person in which vehicle?	SHD1036A
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

#### DETAILS OF INJURED PERSON 2

Name	SIVA - PAX IN VEH. A
Approximate Age	
Injuries Sustain	WENT TTSH FOR TREATMENT & HAD 3 DAYS MC
Injured person in which vehicle?	SHD1036A
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

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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)

(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.



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

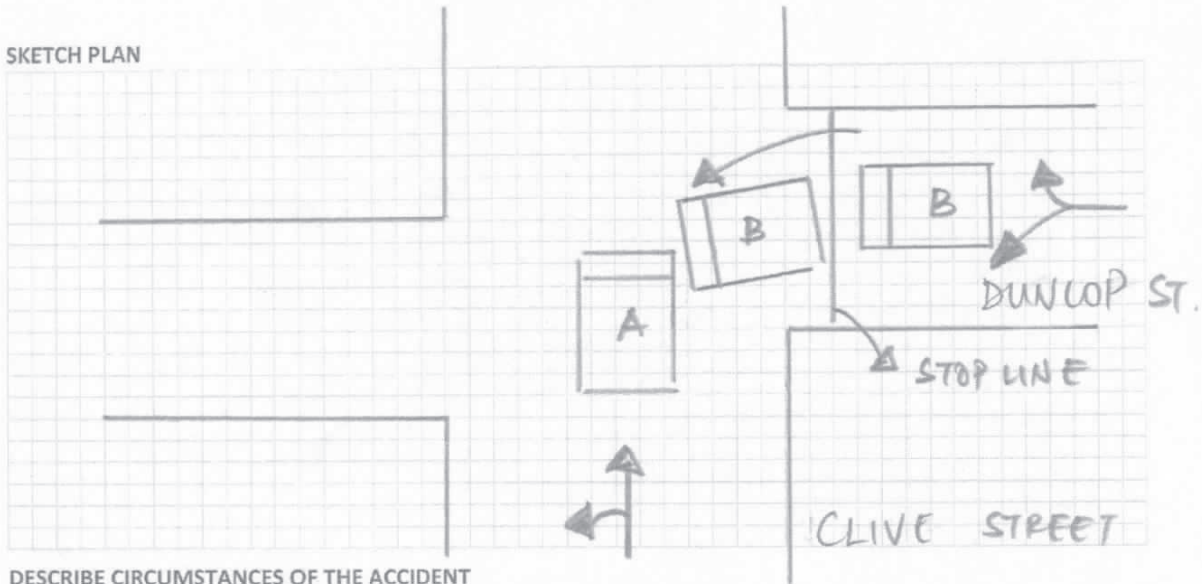
8 7243913 | I

10 JUL 2019



# Sketch Plan Pg. 2

## SKETCH PLAN



## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

A: SH 2 1036 A

B: SH 2 7072X

\* Refer to attach police report

\* Video footage captured.

## DECLARATION

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

10 JUL 2019

Premier Taxis  
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.:

SH 2 1036 A

~ S7243913 I



**SINGAPORE  
POLICE FORCE**



T/20190710/2023

1 of 3

Police Station Of Origin:  
Sengkang N.P.C  
2 Sengkang Square #01-02 SINGAPORE  
545025  
Tel No: 1800-343 8999

Report No. T/20190710/2023

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 10/07/2019 08:04		Vide Report No.:		Station Diary No.: 38	
<b>Informant's Particulars</b>					
Name of Informant: TAUFIK BIN ANWAR			Address: APT BLK 96 ALJUNIED CRESCENT #04-469 SINGAPORE 380096		
ID Type / ID No.: NRIC NO / S7243913I			Contact No.: Home/Office: Mobile: 88147599		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 46	Date of Birth: 29/11/1972	Type of Informant: Driver		
Race: Malay			Language: English		Institution / School Name:
Occupation: Taxi driver			Driving Licence Information: Class: 2B,3		Date of Expiry:

<b>General Information of the Accident</b>				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 10/07/2019 03:30	Type of Location: X-Junction
Location: Junction of Road 1 and Road 2 CLIVE STREET DUNLOP STREET Clive street towards Mustafa, junction with Dunlop Street				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head On				Anyone conveyed by ambulance: No

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHA7072X	taxi					0
SHD1036A	taxi					1



**SINGAPORE  
POLICE FORCE**



T/20190710/2023

2 of 3

Report No. T/20190710/2023

Police Station Of Origin:  
Sengkang N.P.C  
2 Sengkang Square #01-02 SINGAPORE  
545025  
Tel No: 1800-343 8999

CONTINUATION OF REPORT

**Brief Details.**

On 10/07/2019 at about 0325hrs, I was driving my taxi, SHD1036A and I picked up a passenger from Perak Road going back to Punggol area. While on the way when I was travelling on Clive Street, approaching junction with Dunlop Street, another taxi, SHA7072X came out from the right side abruptly and I couldn't stop in time and SHA7072X collided onto the front of my taxi. After which, we alighted and exchanged particulars, both me and my passenger felt unwell and we went to Tan Tock seng hospital to seek medical attention. Specifically, I felt back pains and I was given 5 days MC.

I wish to state that SHA7072X failed to lookout or stopped before the stopline before he dashed out which resulted in the accident.



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Sengkang N.P.C  
2 Sengkang Square #01-02 SINGAPORE  
545025  
Tel No: 1800-343 8999



T/20190710/2023

3 of 3

Report No. T/20190710/2023

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: F / Sr Staff Sgt PHOON PENG MUNG	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 10/07/2019 08:04
Officer In Charge Of Case: TP / AEIT / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:
Authentication Stamp NP168	SN 085
Signature:	
Singapore Police Force	



Text size + -

**Enquire Transaction History****Transaction History Details**

Log Date/Time:	21 Jan 2016 / 08:41:19	Receipt No.:	AACCK001-AX239-160121-000005
Asset Type:	Vehicle	Transaction Amount:	\$68,642.00
Asset ID:	SHD1036A	Channel:	AA Counterless - CYCLE & CARRIAGE KIA PTE LTD
Transaction Type:	01.02 Register New Vehicle (AA)		
Business Transaction Reference No.:	20160121084119528276		
Vehicle No.:	SHD1036A		
Vehicle Type:	H10 - Public Transport Taxi (Motor Car)		
Vehicle Attachment 1:	Air-Con (Taxi)		
Vehicle Attachment 2:	-		
Vehicle Attachment 3:	-		
Vehicle Scheme:	Taxi (Company)		
First Registration Date:	21 Jan 2016		
Original Registration Date:	21 Jan 2016		
Vehicle Make:	KIA		
Vehicle Model:	OPTIMA 1.7(A) DIESEL		
Chassis No.:	KNAGM414MF5658617		
Engine No.:	D4FDFH314377		
Motor No.:	-		
Trailer Chassis No.:	-		
Propellant:	Diesel		
Passenger Capacity:	4		
Engine Capacity:	1685		
Power Rating:	-		
Unladen Weight:	1584		
Maximum Laden Weight:	2050		
Primary Color:	Silver		
Secondary Color:	-		
Manufacturing Year:	2015		
Open Market Value:	\$22,282.00		
Minimum PARF Benefit:	\$13,917.00		
PARF Eligibility:	Y		
No. of Transfer:	0		
Effective Ownership Date/Time:	21 Jan 2016 08:41:19		
COE No.:	2016012101003553H		
COE Expiry Date:	20 Jan 2024		
COE Bid Category:	-		
Actual QP/PQP Paid Amount:	\$45,307.00		
Lifespan Expiry Date:	20 Jan 2024		



**Victory Recovery** (Business Reg No.: 53096358B)

65 Teban Gardens Rd #23-617, Singapore 600065.

Mobile: 9618 0311 Fax: 6267 8996

CASH /  
W.O. No. 101644

TOW JOB WORKS ORDER

M Premier Taxi Svc Date 10/7/19  
Car Make/Model \_\_\_\_\_ Vehicle No. 540 1036  
M'ship/NRIC No./Card No. \_\_\_\_\_ Contact No. 88147599  
Time - Rec'd 1020 Arrived 1040 Completed 1120  
Amount Charge S\$ \_\_\_\_\_ Tow Truck No GR 3375x  
Destination (from) 99 Aljunied rd (to) 23 Changi Li  
Remark (if any) \_\_\_\_\_

Tow Driver's Signature -2g Member's Signature \_\_\_\_\_

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Change Tyres & Towing    | <input type="checkbox"/> Using King Dolley          | <input type="checkbox"/> Use Car Carrier       |
| <input type="checkbox"/> Basement / Multi Carpark | <input type="checkbox"/> Low Spoiler / Low Oil Sump | <input type="checkbox"/> Release Brake / Shaft |
| <input type="checkbox"/> Causeway / 2nd Link      | <input type="checkbox"/> Accident / Over-turn       | <input type="checkbox"/> Loaded                |

**Note :** The owner or his representative is required to follow along to the towing destination, failing which the tow operator shall not be liable for any alleged damages to the car nor missing items from the same. Vehicle is towed at owner's risk. The tow operator accepts no responsibility for any damages to the owner's vehicle whilst being towed.