

## 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	26/08/2019 10:04
Date Of Accident	24/08/2019 13:30
Exact Location Of Accident	SENTOSA GATEWAY
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC5062C
<b>Insured/Policyholder</b>	
Name Of Registered Owner	TRANS-CAB SERVICES PTE LTD
Co Reg No	200303878K
Email Address	CLAIMS@TRANSCAB.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-62866666

### Vehicle Particulars

Manufacturer	RENAULT
Model	LATITUDE-2.0 L (A)
Exact Purpose for which vehicle was being used at time of accident	HIRE AND REWARD
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	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	VFX/P1680520
Cover Note Number	

### Driver

Name of Driver	CHAN PENG KWAN RICHARD
NRIC No	S0592680G
Date Of Birth	12/07/1946
Occupation	OUTDOOR
Date Of Driving Pass	24/02/1965
Driving Experience	54 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81120554
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 643 PUNGGOL CENTRAL #06-328
Postcode	820643
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)	1

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TAMPINES CHANGKAT NPP
Police Station Address	<b>ROAD:</b> 109 TAMPINES STREET 11 , <b>POSTCODE:</b> 521109 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-7819999 - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE SEE ATTACH POLICE REPORT : T/20190824/2124

#### Attachment(s)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJP3785X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	PHUA PEY FEN
NRIC/Passport Number	
Contact Number	96195778
Address	
Postcode	

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name

CHAN PENG KWAN RICHARD

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SHC5062C

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

**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:

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

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



SKETCH PLAN

Handwritten text in the sketch plan area: *pls see attachment*

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Handwritten text in the description area: *pls see attach police report*

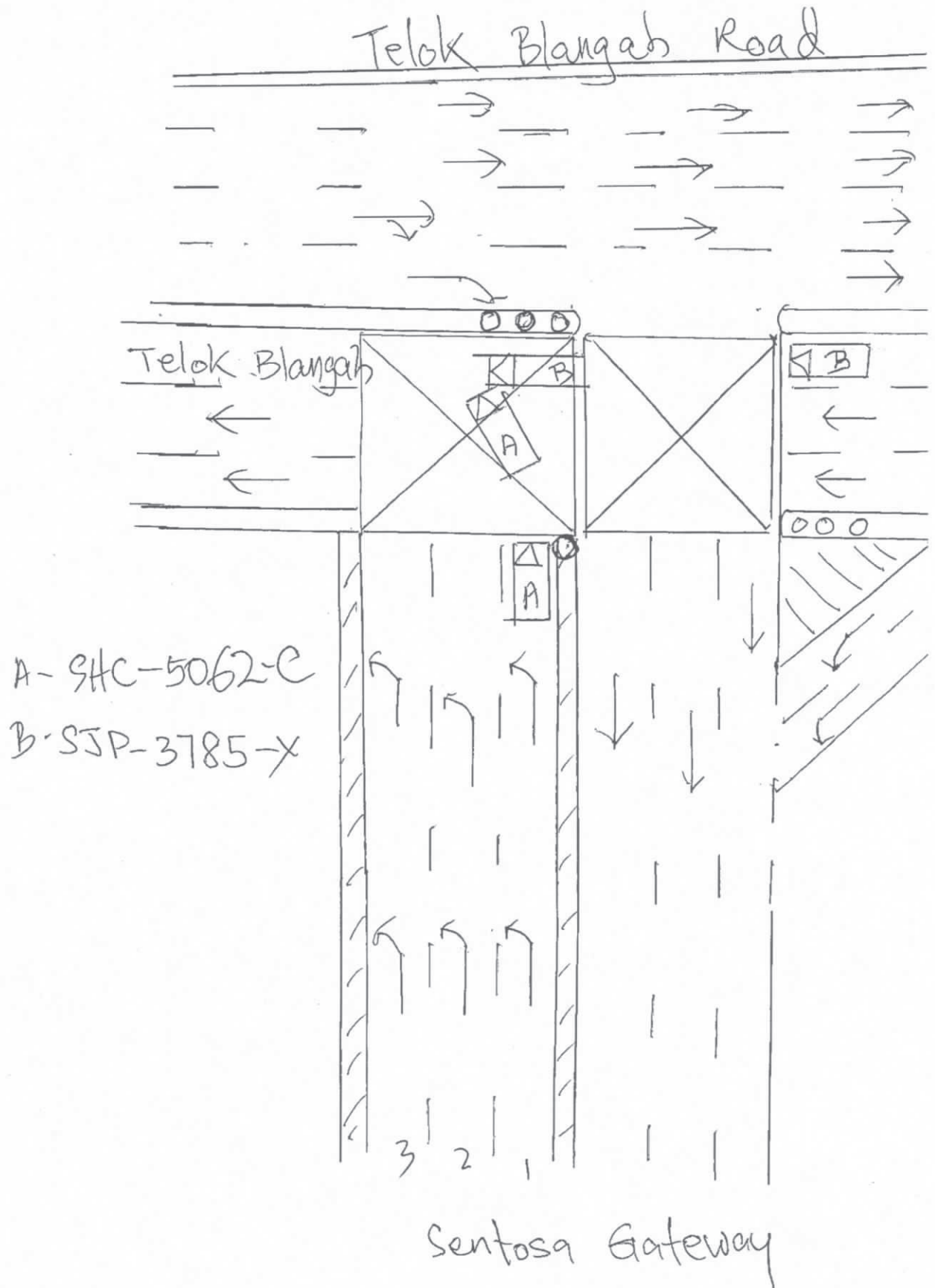
DECLARATION

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)  
Date & Time:

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



## POLICE REPORT Pg. 1



**SINGAPORE  
POLICE FORCE**



T/20190824/2124

1 of 3

Police Station Of Origin:  
Changkat NPP  
109 Tampines Street 11 #01-261  
SINGAPORE 521109  
Tel No: 1800-7819999

Report No. T/20190824/2124

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 24/08/2019 16:47	Vide Report No.:	Station Diary No.: 19
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**Informant's Particulars**

Name of Informant: CHAN PENG KWAN, RICHARD			Address: APT BLK 643 PUNGGOL CENTRAL #06-328 SINGAPORE 820643		
ID Type / ID No.: NRIC NO / S0592680G			Contact No.: Home/Office: Mobile: 81120554		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 73	Date of Birth: 12/07/1946	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Taxi driver			Driving Licence Information: Class: 3		
			Date of Expiry:		

**General Information of the Accident**

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 24/08/2019 13:30	Type of Location: T-Junction
Location: Along Road 1 SENTOSA GATEWAY				
Along Sentosa Gateway, traffic junction of Sentosa Gateway and Telok Blangah Road.				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
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
SHC5062C	Car				Seriously Damaged	0
SJP3785X	Car					0

**Details of Person Involved**

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



**SINGAPORE  
POLICE FORCE**



T/20190824/2124

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Report No. T/20190824/2124

Police Station Of Origin:  
Changkat NPP  
109 Tampines Street 11 #01-261  
SINGAPORE 521109  
Tel No: 1800-7819999

**CONTINUATION OF REPORT**

Driver			
Name	CHAN PENG KWAN, RICHARD	ID No.	S0592680G
Related Vehicle	SHC5062C (Car)	Contact No.	81120554
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	24/08/2019	Date Discharge	24/08/2019
No. of Days granted Medical Leave	04	Degree of Injury	NIL

**Brief Details.**

On 24/08/2019 at about 1330hrs, I was in my taxi (SHC 5062C) along Sentosa Gateway at the junction of Sentosa Gateway and Telok Blangah Road. I was turning left from Sentosa Gateway on the extreme right lane onto Telok Blangah Road. The traffic light was green on my side and I proceeded to go onto Telok Blangah Road. However, when I was turning onto the said road, another vehicle (SJP 3785X) suddenly came from my right and collided onto my taxi. The collision caused dents on the front right side of my vehicle and the bumper almost came out.

The other driver (Phua Pey Fen, H/P: 96195778) did not give much explanation and only told me to claim insurance against her. I then went to Mount Alvernia Hospital to see a doctor afterwards and was given 4days of MC dated from 24/08/2019 to 27/08/2019.





**SINGAPORE  
POLICE FORCE**



T/20190824/2124

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Report No. T/20190824/2124

Police Station Of Origin:  
Changkat NPP  
109 Tampines Street 11 #01-261  
SINGAPORE 521109  
Tel No: 1800-7819999

## 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 3 LIM TING RUI	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 24/08/2019 16:47
Officer In Charge Of Case: TP / AEIT / Sgt 2 SHARIFAH NOR FARIZAN BINTE SYED MOHD SAID Contact No.: 65476172	Classification Of Case:
Authentication Stamp NP168	

**SINGAPORE  
POLICE FORCE**  
  
 SIGNATURE

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

<b>Vehicle Owner Particulars</b>	
Owner ID Type:	Company
Owner ID:	878K
<b>Vehicle Details</b>	
Vehicle No.:	SHC5062C
Vehicle to be Exported:	Yes
Intended Deregistration Date:	26 Aug 2019
Vehicle Make:	RENAULT
Vehicle Model:	LATITUDE 2.0L DCI AUTO D/AB 4DR
Primary Colour:	Red
Manufacturing Year:	2013
Engine No.:	M9R8839C000705
Chassis No.:	VF1ABL15AUC276089
Maximum Power Output:	127.0 kW (170 bhp)
Open Market Value:	\$19,998.00
Original Registration Date:	02 Dec 2013
First Registration Date:	02 Dec 2013
Transfer Count:	0
Actual ARF Paid:	\$12,498.00
<b>Intended PARF Rebate Details</b>	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	01 Dec 2021
PARF Rebate Amount:	\$8,748.00
<b>Intended COE Rebate Details</b>	
COE Expiry Date:	01 Dec 2021
COE Category:	A - Car (1600cc & below)
COE Period(Years):	8
PQP Paid:	\$62,740.00
COE Rebate Amount:	\$17,753.00
<b>Total Rebate Amount:</b>	<b>\$26,501.00</b>
<b>Message</b>	
Please note that the 8-year COE for this vehicle cannot be further renewed. The vehicle must be de-registered upon COE expiry or when the vehicle reaches its statutory lifespan (if applicable), whichever is earlier.	

The information contained herein is correct as at 26 Aug 2019

OK