

## 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	07/09/2019 17:29
Date Of Accident	06/09/2019 16:30
Exact Location Of Accident	KPE B4 AIRPORT RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMH6462P
<b>Insured/Policyholder</b>	
Name Of Registered Owner	FOCUS RENTALS PTE. LTD.
Co Reg No	201836450G
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-96518877

### Vehicle Particulars

Manufacturer	HONDA
Model	FIT
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL 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 HIRE

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	5106629800
Cover Note Number	

### Driver

Name of Driver	TAN KANG YONG,GREGOR(CHEN KANGRONG,GREGOR)
NRIC No	S8100370Z
Date Of Birth	08/01/1981
Occupation	OUTDOOR
Date Of Driving Pass	29/02/2000
Driving Experience	19 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96739553
Fax Number	(LOCAL) +65-98317353
Contact Number	
EEmail Address	GREGTKY@HOTMAIL.COM

Address	BLK 111 TAMPINES ST 11 #09-229
Postcode	521111
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	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	4
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: : 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	TRAFFIC POLICE DIVISION HQ
Police Station Address	<b>ROAD:</b> 10 UBI AVENUE 3 , <b>POSTCODE:</b> 408865 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 65470000 - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLS REFER TO THE POLICE REPORT: T/20190907/7012

#### Attachment(s)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMD889C
Vehicle Make/Model/Colour	BMW
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)

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SLQ2806Y  
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)

#### DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SGT9009D  
Vehicle Make/Model/Colour MERCEDES  
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)

#### DETAILS OF INJURED PERSON 1

Name TAN KANG YONG,GREGOR(CHEN KANGRONG,GREGOR)  
Approximate Age  
Injuries Sustain SLIGHT  
Injured person in which vehicle? SMH6462P  
Were seat belts worn? YES  
Was this injured conveyed to hospital by ambulance? NO  
Address  
Postcode

## Accident Sketch Plan

### SKETCH PLAN

#### IMPORTANT NOTICE

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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 compliance 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:  
NIC/FIN No.:

## Accident Sketch Plan

SKETCH PLAN

KPE B4 AIRPORT RD

VEN A: SMH6962P  
VEN B: SMDB29C  
VEN C: SLC2806Y  
VEN D: SAT9009D

A  
B  
C  
D

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

- Refer to police Report -  
T/20190907/7012

**DECLARATION OF ACCURACY**  
 (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.:

## Individual Statement



**SINGAPORE  
POLICE FORCE**



T/20190907/7012

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

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Report No. T/20190907/7012

### CONTINUATION OF REPORT

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	TAN KANG YONG, GREGOR	ID No.	S8100370Z
Related Vehicle	SMH6462P (Car)	Contact No.	96739553
Hospital/Clinic	24 HOUR WALK-IN CLINIC	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	06/09/2019	Date Discharge	06/09/2019
No. of Days granted Medical Leave	05	Degree of Injury	Slight

**Brief Details.**

on 6/9/2019 i was driving my vehicle SMH6462P on lane 1 KPE before airport road . My car was hit by SMD889C black mercedes follow by bmw SLQ2806Y and last car white mercedes SGT9009D . Chain collision. I suffer back neck pain after the accident and when to see a doctor. we exchange particulars and agreed proceed accident claim.

Accident Photo





Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo

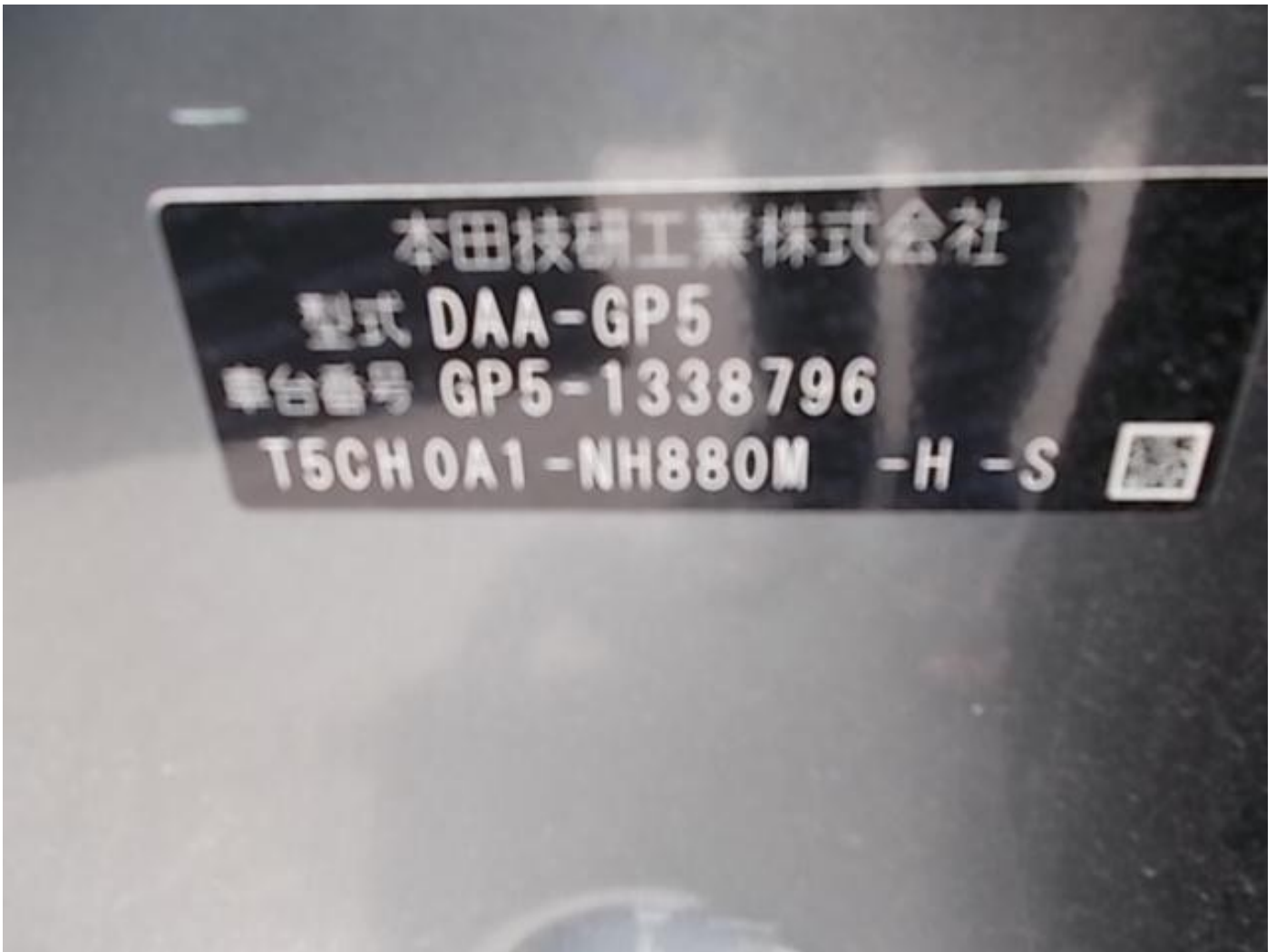


Accident Photo









Accident Photo



# Police Report



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408665  
Tel No. 65470000



Form 9001/13-12

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Report No. T951900070103

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made 07/09/2019 13:14		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: TAN KANG YONG, GREGOR		Address: APT BLK 111 TAMPAK STREET 11 409-225 SINGAPORE 521111			
ID Type / ID No. NRIC NO / S91303702		Contact No. Home/Office:		Mobile: 96739053	
Nationality: SINGAPORE CITIZEN		Email: gregky@hotmail.com			
Sex: Male	Age: 38	Date of Birth: 08/01/1981		Type of Informant: Driver	
Race: Chinese		Language: English		Institution / School Name:	
Occupation: SELF-EMPLOYED		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: 06/09/2019 18:30	Type of Location: Straight Road
Location: KALLANG PAYA LERAN EXPRESWAY				
Weather: Clear	Road Surface: Dry		Road Speed Limit: 80 Km/h	
Traffic Flow: One Way	Traffic Control: Not Controlled		Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

## Details of Vehicles Involved

Vehicle No.	Type	Make	Model	Body	Colour	No. of Passengers
SGT8008D	Car					0
BLG2808Y	Car					0
SMD889C	Car					0
SMH660P	Car				Slightly Damaged	1

# Police Report



**SINGAPORE  
POLICE FORCE**



132180077012

Police Station Of Origin  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 408665  
Tel No: 65470000

1 of 3

Report No: 132180077012

## CONTINUATION OF REPORT

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: Nil		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	TAN KANG YONG, GREGOR	ID No.	S81003102
Related Vehicle	SMH6462P (Car)	Contact No.	96730553
Hospital/Clinic	24 HOUR WALK-IN CLINIC	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	06/06/2019	Date Discharge	06/06/2019
No. of Days granted Medical Leave	05	Degree of Injury	Slight

### Brief Details

on 6/6/2019 I was driving my vehicle SMH6462P on lane 1 HPE before airport road. My car was hit by SMD666C black mercedes follow by tow SLC2800Y and last car white mercedes SGT100080. Chain collision. I suffer back neck pain after the accident and when to see a doctor, we exchange particulars and agreed proceed accident claim.

## Police Report



**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Traffic Police  
10 Ubi Avenue 3 SINGAPORE 400005  
Tel No: 65470000



10019000179142

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Report No: 10019000179142

### CONTRIBUTION OF REPORT

#### Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / TP142 /  
MOHAMMED FERDZ BIN HUSSEIN  
Contact No.: 65476206

Authentication Stamp  
UP18

Signature Of Informant:  
The identity of the person making this report has  
been authenticated by SingPass. No signature is  
required.

Date/Time:  
07/09/2019 13:14

Classification Of Case: