

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	19/11/2019 13:26
Date Of Accident	19/11/2019 10:55
Exact Location Of Accident	IRRAWADDY ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD14U
Insured/Policyholder	
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-62876666

Vehicle Particulars

Manufacturer	RENAULT
Model	LATITUDE-2.0 D DCI (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	LEE ZHI LI ALAN
NRIC No	S8008350E
Date Of Birth	20/03/1980
Occupation	OUTDOOR
Date Of Driving Pass	05/04/2012
Driving Experience	7 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-82222152
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 673C JURONG WEST STREET 65 #03-38
Postcode	643673
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 - HEAD TO REAR
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	ANG MO KIO NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 51 ANG MO KIO AVE 9 , POSTCODE: 569784 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4849999 - FAX NO: 62181399
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT T/20191119/2051

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBE2536H
Vehicle Make/Model/Colour	VAN
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
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 LEE ZHI LI ALAN

Approximate Age

Injuries Sustain

Injured person in which vehicle? SHD14U

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? NO

Address

Postcode

SKETCH PLAN

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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:

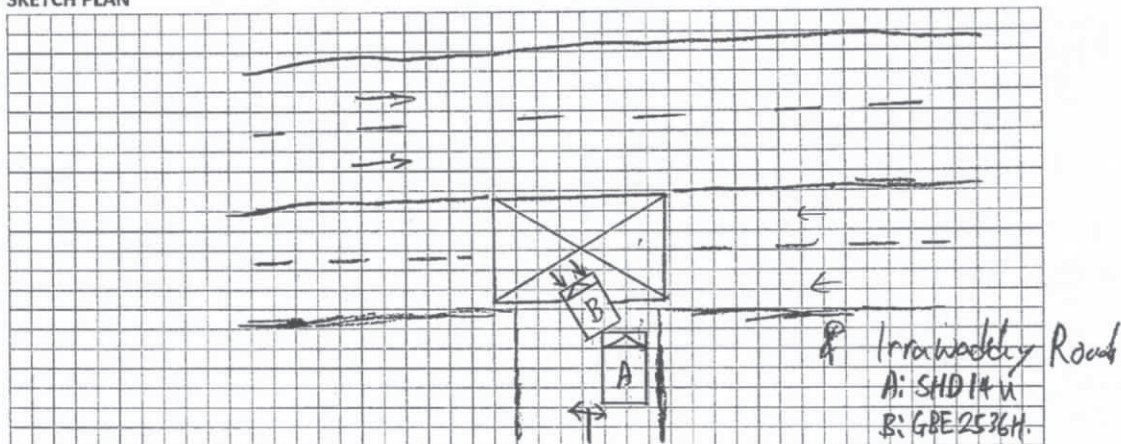


Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report T/20191119/2051

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.:



**SINGAPORE
POLICE FORCE**



T/20191119/2051

1 of 3

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

Report No. T/20191119/2051

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/11/2019 12:37	Vide Report No.:	Station Diary No.: 21
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Informant's Particulars			
Name of Informant: LEE ZHI LI, ALAN		Address: APT BLK 673C JURONG WEST STREET 65 #03-38 SINGAPORE 643673	
ID Type / ID No.: NRIC NO / S8008350E		Contact No.: Home/Office: Mobile: 82222152	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 39	Date of Birth: 20/03/1980	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: Taxi driver		Driving Licence Information: Class: 3,4,5 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 19/11/2019 10:55	Type of Location: T-Junction
Location: Along Road 1 IRRAWADDY ROAD				
EXIT FROM PARK SQUARE HOTEL TURNING TO IRRAWADDY ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Two 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
GBE2536H	Van	HYUNDAI	H1	Black		0
SHD14U	Car	RENAULT	LATITUDE 2.0L	Red	Slightly Damaged	0

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



**SINGAPORE
POLICE FORCE**



T/20191119/2051

2 of 3

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569784
Tel No: 1800-4849999

Report No. T/20191119/2051

CONTINUATION OF REPORT

Driver			
Name	LEE ZHI LI, ALAN	ID No.	S8008350E
Related Vehicle	SHD14U (Car)	Contact No.	82222152
Hospital/Clinic	A LIFE CLINIC PTE LTD	Class of Driving Licence & Expiry Date	Class: 3,4,5 Date of Expiry: NIL
Date Treatment	19/11/2019	Date Discharge	19/11/2019
No. of Days granted Medical Leave	04	Degree of Injury	NIL

Brief Details.

On 19/11/2019 at about 1055hrs, I was driving my taxi of vehicle registration number SHD14U coming out from Park Square Hotel wanting to turn right to Irrawaddy Road. There was van of vehicle registration number GBE2536H in front of me wanting to turn right to Irrawaddy Road as well. The van had manage to inch out and I was looking out for traffic from the right side. I then felt an impact on my car.

I thought it was my fault and I downloaded the video from my in car camera. I then realized that the van in front of me had reversed and hit onto my vehicle.

I then went down and spoke to the other driver. We then decided to do our own claim through insurance companies. I felt pain at my neck area and thus I went to see the doctor. I was given 4 days MC by the doctor.



**SINGAPORE
POLICE FORCE**



T/20191119/2051

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51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999

3 of 3

Report No. T/20191119/2051

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 /

Sgt 3 CHUA KAI LING

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

Sgt 2 SHARIFAH NOR FARIZAN BINTE SYED
MOHD SAID

Contact No.: 65476172

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

19/11/2019 12:37

Classification Of Case:

> Back to OneMotoring

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Company
Owner ID:	878K
Vehicle Details	
Vehicle No.:	SHD14U
Vehicle to be Exported:	Yes
Intended Deregistration Date:	19 Nov 2019
Vehicle Make:	RENAULT
Vehicle Model:	LATITUDE 2.0L DCI AUTO D/AB 4DR
Primary Colour:	Red
Manufacturing Year:	2015
Engine No.:	M9R8839C002507
Chassis No.:	VF1ABL15AUC281644
Maximum Power Output:	127.0 kW (170 bhp)
Open Market Value:	\$19,998.00
Original Registration Date:	26 Jun 2015
First Registration Date:	26 Jun 2015
Transfer Count:	0
Actual ARF Paid:	\$12,498.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	25 Jun 2023
PARF Rebate Amount:	\$9,373.00
Intended COE Rebate Details	
COE Expiry Date:	25 Jun 2023
COE Category:	A - Car up to 1600cc & 97kW (130bhp)
COE Period(Years):	8
PQP Paid:	\$52,886.00
COE Rebate Amount:	\$23,798.00
Total Rebate Amount:	\$33,171.00
Message	
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 19 Nov 2019

OK