

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	26/02/2020 14:52
Date Of Accident	25/02/2020 19:00
Exact Location Of Accident	ALONG UPPER CHANGI ROAD TOWARDS EUNOS L/P 82
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKK6915H
Insured/Policyholder	
Name Of Registered Owner	TAN CHAI HENG
NRIC No	SXXXX818F
Email Address	CHTAN7489@GMAIL.COM
Mobile Phone No	(LOCAL) +65-98283448
Alternative Phone No	OTHERS-98283448

Vehicle Particulars

Manufacturer	TOYOTA
Model	PRIUS C CVT-1.5 (A)
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5110393699
Cover Note Number	

Driver

Name of Driver	TAN CHAI HENG
NRIC No	SXXXX818F
Date Of Birth	01/01/1974
Occupation	OUTDOOR
Date Of Driving Pass	17/08/1996
Driving Experience	23 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98283448
Fax Number	
Contact Number	OTHERS-98283448
Email Address	CHTAN7489@GMAIL.COM

Address	BLK 211 ANG MO KIO AVENUE 3 #02-1428
Postcode	560211
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	SIDE SWIPE
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?	NO
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: : UNCLE GENDER: : MALE

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 SOUTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 81 ANG MO KIO AVE 3 , POSTCODE: 569929 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4519999 - FAX NO: 65535679
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20200225/2152

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBP6626Y
Vehicle Make/Model/Colour	YAMAHA SNIPER T150
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	
NRIC/Passport Number	

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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.


26/2/2020 2-30pm

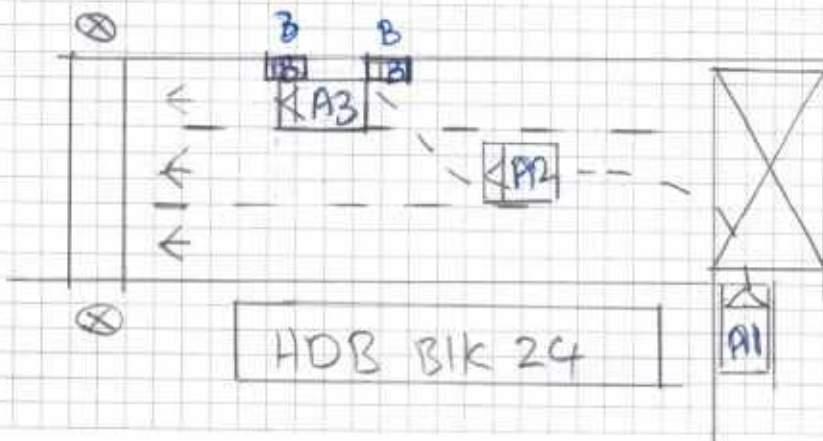
Policyholder's Signature
Date & Time:

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


26/02/2020
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:

SKETCH PLAN

ALONG NEW UPPER CHANNEL ROAD TOWARDS KUNOS
1/p 82



A) SKK 6915H
B) FBP 6626Y

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Ricksh to Pouch RUMOR 7/20200225/2152

DECLARATION

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

2-30pm
26/2/2020

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.:

ACCIDENT STATEMENT

ACCIDENT DATE: 25/02/2020 (DD/MM/YYYY), TIME: 19:00 (HH:MM)

LOCATION: High New Upper Changi Road

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SKK 6915H
 b) INSURANCE COMPANY: NTUC
 c) POLICY NUMBER: 5110393699
 d) POLICY TYPE: COMPREHENSIVE / THIRD PARTY / THIRD PARTY FIRE & THEFT
 e) MAKE & MODEL: TOYOTA PRIUS C CVT
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: PRIVATE / COMMERCIAL / MOTORCYCLE
 h) PURPOSE OF USING AT ACCIDENT TIME: PRIVATE USE
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- a) NAME: TAN CHAI HENG (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S7400818F CONTACT: 98283448
 c) ADDRESS: BLK 211 #02-1478 ANG MO KIO AVE 3
1556021

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: _____ (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: _____ CONTACT: _____
 c) ADDRESS: _____

* d) DATE OF BIRTH: 01/01/1974 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS: 17/8/1996

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES/NO)

IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED: own

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES/NO)

7. a) REPORTED TO POLICE (YES/NO)

IF YES, PLEASE STATE WHICH POLICE STATION: ANG MO KIO

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: FBP6626Y MODEL: YAMAHA
 b) DRIVER'S NAME: _____
 c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

9. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: _____ MODEL: _____
 b) DRIVER'S NAME: _____
 c) NRIC/FIN/PASSPORT: _____ CONTACT: _____

email: chtan7489@gmail.com

VIDEO



**SINGAPORE
POLICE FORCE**



T/20200225/2152

1 of 3

Police Station Of Origin:
Ang Mo Kio South N.P.C
81 Ang Mo Kio Avenue 3 SINGAPORE
569929
Tel No: 1800-4519999

Report No. T/20200225/2152

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/02/2020 23:03	Vide Report No.: G/20200225/0146	Station Diary No.: 105
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Informant's Particulars

Name of Informant: TAN CHAI HENG			Address: APT BLK 211 ANG MO KIO AVENUE 3 #02-1428 SINGAPORE 560211		
ID Type / ID No.: NRIC NO / S7400818F			Contact No.: Home/Office: Mobile: 98283448		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 46	Date of Birth: 01/01/1974	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: GRAB DRIVER			Driving Licence Information: Class: 2B,2A,3,4,5 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 25/02/2020 19:00	Type of Location: Straight Road
Location: Along Road 1 NEW UPPER CHANGI ROAD New Upper Changi road towards Eunus L/P 82				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBP6626Y	Motorcycle	YAMAHA	SNIPER T150	Green	Slightly Damaged	0
SKK6915H	Car	TOYOTA	PRIUS C CVT	Red	Slightly Damaged	1

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKK6915H	NTUC Income Insurance Co-Operative Limited	5110393699	14/06/2019	21/08/2020



**SINGAPORE
POLICE FORCE**



T/20200225/2152

2 of 3

Police Station Of Origin:
Ang Mo Kio South N.P.C
81 Ang Mo Kio Avenue 3 SINGAPORE
569929
Tel No: 1800-4519999

Report No. T/20200225/2152

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TAN CHAI HENG	ID No.	S7400818F
Related Vehicle	SKK6915H (Car)	Contact No.	98283448
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,3,4,5 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 25/02/20 at about 1900hrs, I was driving my vehicle bearing plate no. SKK6915H out of Blk 24 Upper Changi Road Carpark towards the main road. I then turned my car onto the 2nd lane and when I checked that the first lane was clear, I slowly turn my lane to lane 1. Suddenly, a motorbike bearing plate no. FBP6626Y hit onto my right side mirror and fender and he fell on his right. I quickly stopped my car and check on the rider. He then said his right hand and legs are pain. A passing motorcyclist then called for ambulance. Shortly after, ambulance came and the rider was conveyed to hospital. I then waited for TP to arrive and they took 1 SD from my car. I was given a case card ref G/20200225/0146 under TP IO Zayid, 65476394 and advised to lodge a traffic accident report.



**SINGAPORE
POLICE FORCE**



T/20200225/2152

3 of 3

Report No. T/20200225/2152

Police Station Of Origin:
Ang Mo Kio South N.P.C
81 Ang Mo Kio Avenue 3 SINGAPORE
569929
Tel No: 1800-4519999

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 1 MA DERON

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /
Sgt 3 MUHAMMAD RIZWAN BIN KAMALUDIN
Contact No.: 65476185

Authentication Stamp
NP168

Signature Of Informant:

Date/Time:
25/02/2020 23:03

Classification Of Case:

Claim Handling

Accident NT/1088913

Policy No.	SL0345894	Vehicle No.	SKK6515H	GST Registration No.	
Certificate No.					
Policyholder Name	TAN CHAI HENG	Driver Type	DRIVE CLASSIC	Policyholder MOC	ST40818P
Product Code	PRIVATE CAR INSURANCE	Contact No.(Office)		Leading	0
Contact No.(Mobile)	96783448	Special Remark		Contact No.(Home)	
Email Address		TCA		eCode	No
AFR	No Yes	NCD Entitlement(%)	0	eCode Reason	
NCD Protection	By			Private Hire	No

Accident Details

Report Date	26/02/2020 15:21	Accident Report Within 24 hrs	Yes	Accident Type	Side Swipe
Date of Accident	26/02/2020	Time of Accident (hh:mm)	14:50	Location of Accident	Singapore
Reporting Centre		Orange Force		ICM No.	
Accident Location	ALONG UPPER CHONGE ROAD TOWARDS EUPHON L/F 82				

Total Excess Applicable

Excess Type	Per Accident	Windscreen Excess	150.00	Driver is Covered?	Covered
DU Standard Excess	2,000.00	TP Standard Excess	1,500.00		
VISD CD Excess	0.00	VISD TP Excess	0.00		
Additional Excess	0				
Total CD Excess Applicable	2000.00	Total TP Excess Applicable	1,500.00		

Benefits

GST Registered Information

GST Registered	No	GST Registration Date	
GST Registration No.		GST Status Verified	Yes
Modification History			

Policyholder Mailing Address

Address 1	BLK 211 #01-142B	Address 2	ANG MO KIO AVENUE 3	Address 3	SINGAPORE 360211
Address 4		Address Type	Singapore address	Post Code	360211
Unit No.	02-142B	Related Policy Number	S110593699		

01 Driver Info

Driver Name	TAN CHAI HENG	Driver Type	Main Driver	Driver DOB	01/01/1979
Uninsured driver Name		Driver MOC	ST40818P	Driving Experience	23
Register Date of Driver License	17/09/1996	Driver Age	40	Contact No.(Office)	
Contact No.(Mobile)	96783448	Contact No.(Office)		Address 1	SINGAPORE 360211
Address 1	BLK 211 #01-142B	Address 2	ANG MO KIO AVENUE 3	Address 3	SINGAPORE 360211
Address 4		Address Type	Singapore address	Post Code	360211
Unit No.	02-142B	Driver Vehicle No.	SKK6515H	Driver Insured Company	NTUC
Does he own a Singapore Registered car?	Yes - No				

Declaration

Screenchecker or Blood Test Reading?	0 mg	Any injury?	Yes - No
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Modification History

Claim 901 **None**

Claim Type *	OD-MR	Insured Name	TAN CHAI HENG	Insured MOC	ST40818P
Contact No.(Mobile)	96783448	Contact No.(Office)	96783448	Contact No.(Office)	
Email Address	tan_chaiheng@gmail.com	Vehicle Number	SKK6515H	Vehicle Number	PSP06207
Claim Description	SKK6515H / PSP06207 ON 26 Feb 2020			Name of Preferred Workshop	
Preferred Workshop		Insured Liability	Not at Fault		
Insured No.	96783448	Insured Option	Preferred Workshop, Name unknown	CCA Report	Received
Date Reported	26/02/2020 15:24	Claim Close Date		Date Received	26/02/2020 08:00
Report Taken By	90013 WAMB				

Print As letter

Save Submit

Attachment

Accident No.	NT/1088913	Claim No.	001
Left Out Received	Yes No	Upload Date	26/02/2020 15:25
Page *		Category *	Confidential
Choose File - No file chosen		Urgency *	Normal
Choose File - No file chosen		Description *	
Choose File - No file chosen			
Choose File - No file chosen			
Choose File - No file chosen			
Choose File - No file chosen			
Choose File - No file chosen			
Choose File - No file chosen			
Message Read		Send Message	Upload

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent (CO)	Action
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Feb 2020 15:25	Photo	Normal	Photo 2020-2-26		edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Feb 2020 15:25	Photo	Normal	Photo 2020-2-26		edit
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 26 Feb 2020 15:25	Photo	Normal	Photo 2020-2-26		edit

	NAC_BUKIT_MERAH_800676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 26 Feb 2020 15:25	Photos	Normal	Photos 2020-2-26	Edit
	NAC_BUKIT_MERAH_800676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 26 Feb 2020 15:25	Photos	Normal	Photos 2020-2-26	Edit
	NAC_BUKIT_MERAH_800676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 26 Feb 2020 15:25	Photos	Normal	Photos 2020-2-26	Edit
	NAC_BUKIT_MERAH_800676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 26 Feb 2020 15:25	Photos	Normal	Photos 2020-2-26	Edit
	NAC_BUKIT_MERAH_800676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 26 Feb 2020 15:25	Photos	Normal	Photos 2020-2-26	Edit
	NAC_BUKIT_MERAH_800676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 26 Feb 2020 15:25	Photos	Normal	Photos 2020-2-26	Edit
	NAC_BUKIT_MERAH_800676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 26 Feb 2020 15:25	Photos	Normal	Photos 2020-2-26	Edit
	NAC_BUKIT_MERAH_800676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 26 Feb 2020 15:24	Photos	Normal	Photos 2020-2-26	Edit
	NAC_BUKIT_MERAH_800676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 26 Feb 2020 15:24	Photos	Normal	Photos 2020-2-26	Edit
	NAC_BUKIT_MERAH_800676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 26 Feb 2020 15:24	Photos	Normal	Photos 2020-2-26	Edit
	NAC_BUKIT_MERAH_800676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 26 Feb 2020 15:24	Photos	Normal	Photos 2020-2-26	Edit
	NAC_BUKIT_MERAH_800676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 26 Feb 2020 15:24	NRIC Driving License	Y	Normal	NRIC/ Driving License 2020-2-26
	NAC_BUKIT_MERAH_800676 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 26 Feb 2020 15:24	SAG	Normal	SAG 2020-2-26	Edit

Video List

Uploaded By/Date	Folder Date	File Name	Source	Action
		Display in New Window	Scan and uploading	

Hello, NAC_BUKIT_MERAH_800676

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

Policy Query

Policy No. Date of Accident
Vehicle No. (For Motor) Certificate Number

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input type="checkbox"/>	5110393699		TAN CHAI HENG	57400818F	GPC	drive CLASSIC	SKK6915H	SKK6915H	14/06/2019	21/08/2020

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No.: MAH 420075390 Vehicle Registration No.: SKE 6915 H
Name (as shown in NRIC): Tan Chai Heng NRIC/FIN/Passport No.: XXXX8181
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address: _____ Singapore()
Contact (Tel): _____ Mobile No.: 98283448
Email Address: _____
Date of Accident: 25/07/2020 Time of Accident: 19:00
Place of Accident: Along UPP Changi Rd Towards Eunos 2/P 82
Insurance Company: NIC

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

To change to Third Party Claims

Tan Chai Heng
Policyholder / Driver's Signature
Date: 28/2/2020

28/02/2020
Reporting Centre Personnel's Signature
Name: Alan Wong
NRIC/FIN No.:
Date: