

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 ability.
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 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	07/01/2014 16:10
Date Of Accident	06/01/2014 19:45
Exact Location Of Accident	ALONG SLE TOWARDS BKE BEFORE WOODLANDS AVENUE 12
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHD9692C
Insured/Policyholder	
Name Of Registered Owner	TRANS-CAB SERVICES PTE LTD
Co Reg No	200303878K

Vehicle Particulars

Manufacturer	CHEVROLET
Model	EPICA-2.0 (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	First Capital Insurance Ltd
Type Of Coverage	Third Party
Fleet Policy	Yes
Policy Number	D-12047359MFSH/5
Cover Note Number	

Driver

Name of Driver	TAN CHWEE BENG
NRIC No	S1522330H
Date Of Birth	14/09/1962
Occupation	Outdoor
Date Of Driving Pass	03/11/1983
Driving Experience	30 Years And 2 Months
Gender	Male
Mobile Number	(Local) +65-96554725
Fax Number	
Contact Number	
EEmail Address	NOEMAIL
Address	APT BLK 681 RACE COURSE ROAD #07-321
Postcode	210681

Was driver an employee of the Insured's Company	No
If No, Relationship of the Driver with the Insured	Other - RELIEF
Vehicle Registration Number of Driver's Own Vehicle	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	Collision- Chain Collision
Weather Conditions	AFTER RAIN
Road Surface	Wet

Other Information

Was any foreign vehicle involved in this accident?	No
Was any body injured in the Accident?	Yes
Was any other material or property damaged?	Yes
Was there any video captured by Car Camera?	No

Details of Police Action

Was the accident reported to the police?	Yes
If Yes, Please state which Police Station	
Police Station Name	Rochor N.p.c. 11 Kampong Kapur Road, singapore 208678
Police Station Address	ROAD: 11 KAMPONG KAPUR ROAD , POSTCODE: 208678 , COUNTRY: Singapore
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	No
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO THE ATTACHED POLICE REPORT

Are accident photos available for attachment?	Yes
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DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YM2290B
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Details of Witness

Name	
Phone Number	
Email Address	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SGS89L
Vehicle Make/Model/Colour	
Details Of Properties	
Name of Driver	
NRIC/Passport Number	
Contact Number	

Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Details of Witness

Name
Phone Number
Email Address

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SHA9884G
Vehicle Make/Model/Colour
Details Of Properties
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

Details of Witness

Name
Phone Number
Email Address

Sketch Plan

SKETCH PLAN

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Sketch Plan

Please refer to the attached Sketch Plan
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Describe Circumstances of the Accident

Please refer to the Police Report.

Declaration

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



Policyholder's Signature / Date & Time

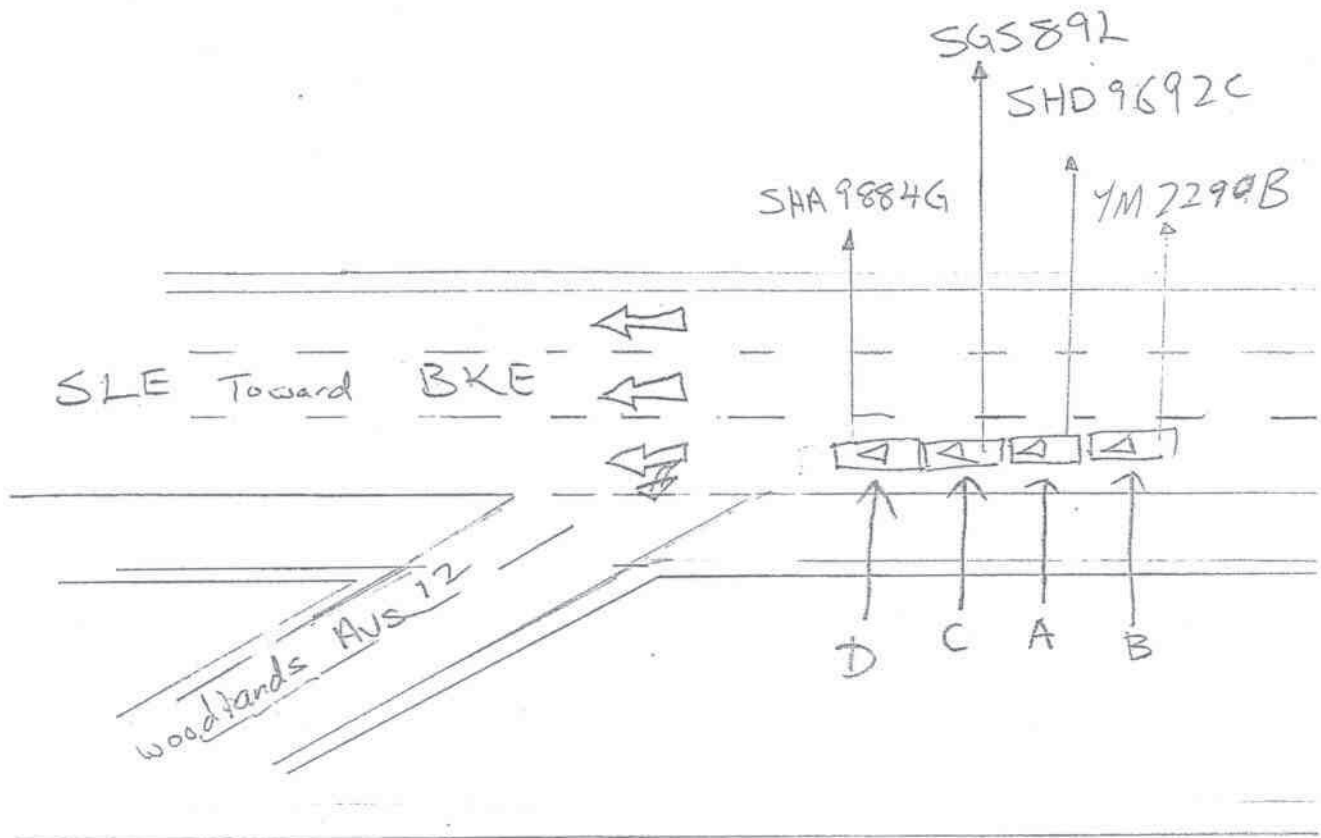


Driver's Signature (If driver is not the policyholder) / Date & Time



Witnessed by Reporting Centre Personnel

Sketch Plan



- ① SHA 9884G ② SGS 892 ③ SHD 9692C ④ YM 2290B
- 1/2 No: 58729346G
P/H No: 98177787
WONG QING LIN
BMW
- Liu Hing Jun
P/H 94472789
G2040043P

6/1/2014
1945 hrs.

POLICE REPORT Pg.1

Police Station Of Origin:

Rochor N.P.C

11 Kampong Kapur Road SINGAPORE 208678

Tel No: 1800-2949999



T/20140107/4067

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Report No. T/20140107/4067

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 07/01/2014 13:11	Vide Report No.:	Station Diary No.: 59
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Informant's Particulars

Name of Informant: TAN CHWEE BENG			Address: APT BLK 681 RACE COURSE ROAD #07-321 SINGAPORE 210681	
ID Type / ID No.: NRIC NO / S1522330H			Contact No.: Home/Office: Mobile: 96554725	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 51	Date of Birth: 14/09/1962	Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation: Taxi Driver			Driving Licence Information: Class: 2B,3,4 Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 06/01/2014 19:45	Type of Location:
Location: Along Road 1 Traveling Toward Road 2 SLE BKE Travelling along SLE towards BKE before Woodlands Ave 12				
Weather: Drizzling		Road Surface: Wet	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Color	Condition	No of Passenger	Insurance Company	Insurance No	Effective Date	Expiry Date
SGS89L	Car			Seriously Damaged	0				
SHA9884 G	Car			Seriously Damaged	0				
SHD9692 C	Car			Seriously Damaged	2				
YM2290B	Lorry			Seriously Damaged	0				

POLICE REPORT Pg.1

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE 208678
Tel No: 1800-2949999



T/20140107/4067

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Report No. T/20140107/4067

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	WONG QING LIN	ID No.	S8729346G
Related Vehicle	SGS89L (Car)	Contact No.	98177787
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave (MC)	NIL	Degree of Injury	NIL
Driver			
Name	TAN CHWEE BENG	ID No.	S1522330H
Related Vehicle	SHD9692C (Car)	Contact No.	96554725
Hospital/Clinic	T & T FAMILY HEALTH CLINIC & SURGERY	Class of Driving Licence & Expiry Date	Class: 2B,3,4 Date of Expiry: NIL
Date Treatment	07/01/2014	Date Discharge	07/01/2014
No. of Days granted Medical Leave (MC)	07	Degree of Injury	Slight
Driver			
Name	LIU HONG JUN	ID No.	G2040043P
Related Vehicle	YM2290B (Lorry)	Contact No.	94472789
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave (MC)	NIL	Degree of Injury	NIL

Brief Details.

On 06/01/2014 at about 1945hrs, I was travelling in my taxi SHD9692C together with 2 passengers along SLE towards BKE before Woodlands Ave 12. I was at the left most lane. Traffic was relatively heavy, and the road surface was wet. Then, a vehicle SGS89L which was in front of me slowed down. As such, I also applied the brakes to slow down. Suddenly, a lorry from behind YM2290B slammed me from the rear and as such, my vehicle collided with the vehicle in front of me. Due to the force of the impact, the vehicle that was in front of me also collided with a vehicle in front of it SHA9884G. As such, a total of 4 vehicles were involved in the accident.

Though the damages to all the vehicles were serious, no one was injured. Traffic police came, but there was no ambulance and no one was conveyed. On 07/01/2013 at about 0900hrs, I felt pain on my back. Hence, I went to T&T FAMILY HEALTH CLINIC AND SURGERY to get myself checked. The doctor then gave me 7 days due to the accident.

POLICE REPORT

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE 208678
Tel No: 1800-2949999



T/20140107/4067

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Report No. T/20140107/4067

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: A / MUHAMMAD HIDAYAT BIN HUSSAIN JAAFAR	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 07/01/2014 13:11
Officer In Charge Of Case: TP / AEIT / Goh Geok Lye Pamela Contact No.: 65476148	Classification Of Case:
Authentication Stamp NP168 Singapore Police Force	

Text size + -

Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type: Company
Owner ID: 200303878K

Vehicle Details

Vehicle No.: SHD9692C
Vehicle to be Exported: Yes
Intended De-registration Date: 08 Jan 2014
Vehicle Make: CHEVROLET
Vehicle Model: EPICA 2.0DSL AT ABS D/AB 2WD 4DR TURBO
Primary Colour: Red
Manufacturing Year: 2011
Engine No.: Z20S1458397K
Chassis No.: KL1LA69RJBB121769
Maximum Power Output: 110.0 kW (147 bhp)
Open Market Value: \$14,182.00
Original Registration Date: 04 Mar 2013
First Registration Date: 04 Mar 2013
Transfer Count: 0
Actual ARF Paid: \$14,182.00

Intended PARF Rebate Details

PARF Eligibility: Yes
PARF Eligibility Expiry Date: 03 Mar 2021
PARF Rebate Amount: \$10,636.00

Intended COE Rebate Details

COE Expiry Date: 03 Mar 2021
COE Category: A - Car (1600cc & below)
COE Period(Years): 8
PQP Paid: \$67,858.00
COE Rebate Amount: \$54,286.00

Total Rebate Amount: \$64,922.00

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 08 Jan 2014

OK

Land Transport Authority

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