SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

EMail Address

- 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 witholding 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

	ACCIDENT STATEMENT
Date Of Report	14/04/2020 13:23
Date Of Accident	13/04/2020 17:15
Exact Location Of Accident	YISHUN ST 61 BLK 605 CARPARK
Country/State of Loss	SINGAPORE
De la companya de la	ETAILS OF OWN VEHICLE
Vehicle Registration Number	SLH2383Y
Insured/Policyholder	
Name Of Registered Owner	BENEFIT AUTO
Co Reg No	- 53121670E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-92226368
Alternative Phone No	OFFICE-92226368
Vehicle Particulars	
Manufacturer	HONDA
Model	VEZEL 1.5X CVT
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	PRIVATE HIRE
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5110923222-000008
Cover Note Number	
Driver	
Name of Driver	YAP CHEE YONG RICHARD (YE ZHIYONG RICHARD)
NRIC No	SXXXX887D
Date Of Birth	22/05/1975
Occupation	OUTDOOR
Date Of Driving Pass	13/11/2014
Driving Experience	5 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92226368
Fax Number	
Contact Number	

NOEMAIL

Address BLK 360A ADMIRALTY DRIVE #08-72 SINGAPORE

Postcode 751360

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 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? YES

Was any injured conveyed to hospital by

ambulance?

NO

YES

Was any other material or property damaged?

I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

NO 1

Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police?

NO

If Yes, Please state which Police Station

Was notice of intended Prosecution given?

NO

If Yes, against whom?

Circumstances of Accident

REFER TO SKETCH PLAN.

Attachment(s)

Are accident photos available for attachment?

YES

Was there any video captured by Car Camera?

NO

Was there any audio recorded?

NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

SHC5308U

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category TAXI

Name of Driver THEN CHIU SEN
NRIC/Passport Number SXXXX744Z

Contact Number

88095721

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name YAP CHEE YONG RICHARD

Approximate Age Injuries Sustain

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address Postcode NECK & BACK

SLH2383Y

YES

NO

Accident Sketch Plan

- This reappropriate by the requires as the ideal for incomes highly are controlled an applicated by the General Interview Assertable of the report will for a fee out made substantial years applicable to or
- - all the names, the modulinous statement of meanurable knockstan of languages ("GLA") or extens permanent to assist, over provided by the or possessed by the interest (exclusively the "harboard tellorization") and district and branches as at Personal information to all interest if which have sharred vehicle(s) invened in this abilition (abilities), who have involved in the abilition (abilities), who have involved in the abilities (abilities).

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