

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	05/05/2020 10:40
Date Of Accident	04/05/2020 09:50
Exact Location Of Accident	PIE TWDS CHANGI
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SKL4158J
Insured/Policyholder	
Name Of Registered Owner	TAY SOON HENG
NRIC No	SXXXX504C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96652423
Alternative Phone No	OFFICE-96652423
Vehicle Particulars	
Manufacturer	HYUNDAI
Model	I45 2.0 AT ABS AIRBAG 2WD 4DR
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?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5114023974
Cover Note Number	
Driver	
Name of Driver	TAY SOON HENG (DAI SHUNXING)
NRIC No	SXXXX504C
Date Of Birth	01/07/1973
Occupation	INDOOR
Date Of Driving Pass	14/02/1995
Driving Experience	25 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96652423
Fax Number	
Contact Number	OFFICE-96652423
EEmail Address	NOEMAIL

Address	BLK 303 YISHUN CENTRAL #08-129
Postcode	760303
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	COLLIDED INTO PROPERTY
Weather Conditions	CLEAR
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	1
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	
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: : - GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	YISHUN NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 31 YISHUN CENTRAL , POSTCODE: 768827 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-8529999 - FAX NO: 68522299
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20200504/2073.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

Accident Sketch Plan

SKETCH PLAN

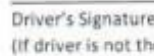
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8. **Consent under the Personal Data Protection Act (PDPA)**

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.:

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

- Traveling towards Changi Airport along PIE
- ~~A1~~ After Steven road entrance, car skidded and ^{rear portion of my vehicle} hit onto railing
- Car came to a stop underneath Steven Flyover

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.:

Police Report



**SINGAPORE
POLICE FORCE**



T/20200504/2073

1 of 3

Report No. T/20200504/2073

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/05/2020 20:33	Video Report No.:	Station Diary No.: 85
Informant's Particulars		
Name of Informant: TAY SOON HENG		Address: APT BLK 167 JALAN JURONG KECHIL #06-01 SINGAPORE 598671
ID Type / ID No.: NRIC NO / S7322504C	Contact No.: Home/Office:	Mobile: 96652423
Nationality: SINGAPORE CITIZEN		Email: shtay@straitscargo.com
Sex: Male	Age: 46	Date of Birth: 01/07/1973
Type of Informant: Driver		Institution / School Name:
Race: Chinese	Language: English	
Occupation: SELF EMPLOYED	Driving Licence Information: Class: 3,4	Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Government Property	Drink Drive: No	Date/Time of Accident: 04/05/2020 09:45	Type of Location: Bend
Location: Along Road 1 PAN ISLAND EXPRESSWAY				
Along PIE located at Mount Pleasant Flyover before Lamp Post No: 932A Lamp Post Number: 932				
Weather: Drizzling	Road Surface: Wet	Road Speed Limit:		
Traffic Flow: One Way	Traffic Control: Not Controlled	Traffic Volume: Light		
Type of Collision: Moving Vehicle Against - Road Divider/Kerb/Railings				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKL4158J	Car	HYUNDAI	I45 2.0 AT ABS AIRBAG 2WD 4DR	White	Slightly Damaged	1

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date

Police Report



**SINGAPORE
POLICE FORCE**



T/20200504/2073

2 of 3

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

Report No: T/20200504/2073

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKL4158J	NTUC Income Insurance Co-Operative Limited	5114023974	16/11/2019	26/11/2020

Brief Details.

1. On 04/05/2020 at about 0945hrs, I was driving my vehicle registration No: SKL4158J along PIE towards Changi Airport. This is three lane road and I am unable to recall which lane I was driving at due to the sudden shock. My colleague (Ms Samantha/ 86663328) was seated at the front passenger seat.
2. As I approached the bend area located along PIE at Mount Pleasant Flyover before Lamp Post No: 932A, my vehicle suddenly skidded towards the left and I lost control and collided onto the silver metal railing of the road. Both me and my passenger was not injured due to the collision and also other vehicle road users.
3. I alighted to make a check and there was no damage to the railing, but my vehicle right rear bumper was damage. I took a picture of the railing to show proof that it was not damage on my mobile phone and I have the pictures.
4. Separate from this accident, I would like to state that I am no longer residing at my previous residential address which I had sold off which is located at Block 167 Jalan Jurong Kechil #06-01 and have shifted to Block 303 Yishun Central #08-129. I will be emailing ICA to have my address changed soon.

Police Report



SINGAPORE
POLICE FORCE



T/20200504/2073

3 of 3

Report No. T/20200504/2073

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No. 1800-8529999

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

L/
SSI ANDY LUCAS

Signature Of Informant

Signature Of Interpreter:
Not applicable

Date/Time:
04/05/2020 20:33

Officer In Charge Of Case:
TP / AEIT /
SIANG YI TING, STEPHANIE
Contact No.: 65476414



Signature

Classification Of Case:

Authentication Stamp
NP168

Singapore Police Force

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

