MNA120045763 / National Assessment Centre Services - Ubi ENTRY DATE & TIME: 11/05/2020 18:12 SUBMITTED BY: Liew Shan Hui

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Date Of Driving Pass

Driving Experience

Mobile Number

Fax Number
Contact Number
EMail Address

Gender

- 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 <u>truthful and accurate</u> 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 aforesaid.

atoresaid.	
	ACCIDENT STATEMENT
Date Of Report	11/05/2020 18:12
Date Of Accident	04/05/2020 11:30
Exact Location Of Accident	WATERWAY POINT CARPARK B2M
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SFK562R
Insured/Policyholder	
Name Of Registered Owner	PUNGGOL EAST CAR RENTAL
Co Reg No	-
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-86886381
Vehicle Particulars	
Manufacturer	HONDA
Model	STREAM
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 CAR
Insurance Company	
Name of Insurance Company	TOKIO MARINE INSURANCE SINGAPORE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	19-MJ001819-R01
Cover Note Number	
Driver	
Name of Driver	TAN MENG YOUNG, CHARLES (CHEN MINGYANG)
NRIC No	SXXXX151H
Date Of Birth	04/02/1988
Occupation	OUTDOOR
D + O(D:: D	0.4.10.7.10.0.0.0

31/07/2008

MALE

NOEMAIL

11 YEARS AND 9 MONTHS

(LOCAL) +65-86886381

Address BLK 105B EDGEFIELD PLAINS #14-11

Postcode 822105

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 - MAJOR/MINOR RD

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)

river)

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name TRAFFIC POLICE DIVISION HQ

Police Station Address ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY:

SINGAPORE

Police Station Contact TEL NO: 65470000 - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

REFER TO POLICE REPORT T/20200505/7010

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 SKX3322U

Vehicle Make/Model/Colour

Details Of Properties

PRIVATE CAR

Vehicle Category

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

DETAILS OF INJURED PERSON 1

Name TAN MENG YOUNG, CHARLES (CHEN MINGYANG)

Approximate Age

Injuries Sustain BODY
Injured person in which vehicle? SFK562R
Were seat belts worn? YES

Was this injured conveyed to hospital by

ambulance?

Address Postcode 1 LO

NO

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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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, ecknowledge, 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)
 - (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, involces, 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, icollectively the
- (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.
- 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.

PUNGGOL EAST CAR RENTAL

Policyholder's Signature Date & Time:

Driver's Signature

(If driver is not the policyholder)

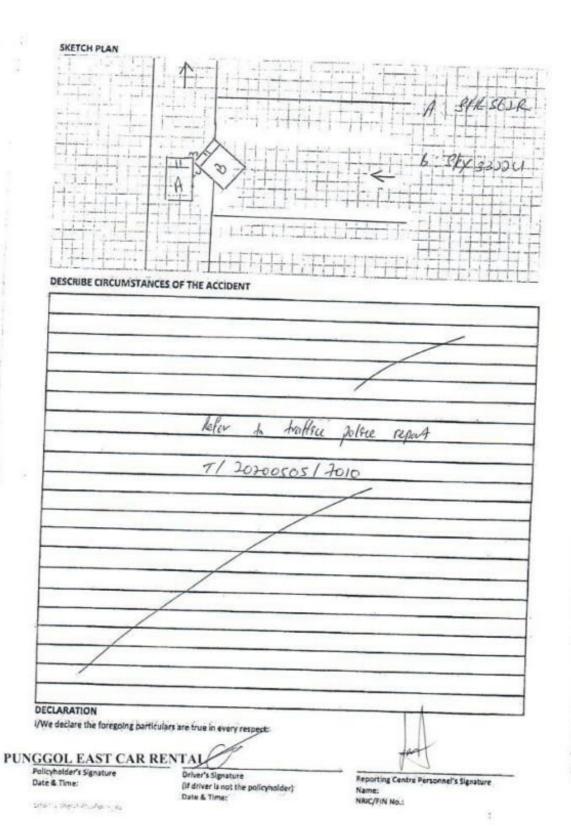
Date & Time:

Reporting Centre Personnel's Signature

NRIC/FIN No.1

party 495 ST agency.

Accident Sketch Plan



Police Report





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

1 of 3 Report No. T/20200505/7010

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/05/2020 15:47		Made:	Vide Report No.:	Station Diary No.:	
Informa	nt's Partic	ulars		THE REPORT OF THE PARTY.	
Name of Informant: TAN MENG YOUNG, CHARLES			Address: APT BLK 105B EDGEFIELD PLAINS #14-11 SINGAPORE 822105		
ID Type / ID No.: NRIC NO / S8804151H			Contact No.: Home/Office:	Mobile: 86886381	
National SINGAP	ity: ORE CITIZ	EN	Email: exoclesiates@gmail.com		
Sex: Male	Age: 32	Date of Birth: 04/02/1988	Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: OPERATION MANAGER		AGER	Driving Licence Information: Class: 2B,2A,2,3	Date of Expiry:	

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 04/05/2020 11:30	Type of Location Car Park
Location: PUNGGOL C Weather:	ENTRAL	Road Surface:	l p	load Speed Limit:
Clear Dry				oau opeeu Limit.
Clear		Dry		
Clear Traffic Flow: One Way		Traffic Control: Not Controlled		raffic Volume:

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SFK562R	Car	HONDA	Stream	Black	Seriously Damaged	1
SKX3322U	Car	TOYOTA	Estima Aeras	Black		0

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

Police Report





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20200505/7010

CONTINUATION OF REPORT

Driver				STORY.	=3 h	AND DESCRIPTION OF THE PERSON NAMED IN COLUMN TWO
Name	TAN MENG YOUNG, CHARLES			ID No		S8804151H
Related Vehicle	SFK562R (Car)			Conta	ct No.	86886381
Hospital/Clinic	24 HOUR WALK-IN CLINIC		Class Drivin Licens Expiry	g	Class: 2B,2A,2,3 Date of Expiry: NIL	
Date Treatment	04/05/2020 Date Dis		Date Disc	harge	NIL	
No. of Days granted Medical Leave 05			Degree of	Injury	Serio	us

Brief Details.

On the mentioned time and date I was leaving Waterway Point carpark Level B2M towards the way out. While travelling straight, I felt a huge impact coming from my right front and side portion of my vehicle. Once I got out of my vehicle I realize that a vehicle bearing car plate SKX3322U did not stop at the stop line and collided me from the right.

Police Report





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

3 of 3 Report No. T/20200505/7010

CONTINUATION OF REPORT

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NP168

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 05/05/2020 15:47
Officer In Charge Of Case: TP / TPIB / ANG YI TING, STEPHANIE Contact No.: 65476414	Classification Of Case:
Authentication Stamp	



