

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 willful 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. A 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	06/04/2020 15:42
Date Of Accident	06/04/2020 09:35
Exact Location Of Accident	HOLLAND ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR5430Y
Insured/Policyholder	
Name Of Registered Owner	YAP CHAI HUAT
NRIC No	SXXXX278A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96385322
Alternative Phone No	OFFICE-96385322

Vehicle Particulars

Manufacturer	OPEL
Model	ASTRA
Exact Purpose for which vehicle was being used at time of accident	WORK PURPOSE
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	5098898282-02 (DRIVO PREMIUM)
Cover Note Number	

Driver

Name of Driver	YAP CHAI HUAT
NRIC No	SXXXX278A
Date Of Birth	15/09/1953
Occupation	OUTDOOR
Date Of Driving Pass	01/04/1976
Driving Experience	44 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96385322
Fax Number	
Contact Number	OFFICE-96385322
Email Address	NOEMAIL

Address	BLK 468B #08-547 FERNVALE LINK
Postcode	792468
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	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
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)	3
Passenger 1	NAME: : UNKNOWN GENDER: : FEMALE
Passenger 2	NAME: : SERYUN HP: 86017365 GENDER: : FEMALE

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

REFER TO POLICE REPORT NO. T/20200406/2056 ATTACHED.

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	SBY5115P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	

NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name	SERYUN
Approximate Age	
Injuries Sustain	REFER TO POLICE REPORT
Injured person in which vehicle?	SLR5430Y
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Sketch Plan Pg. 1

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.

Policyholder's Signature
Date & Time:

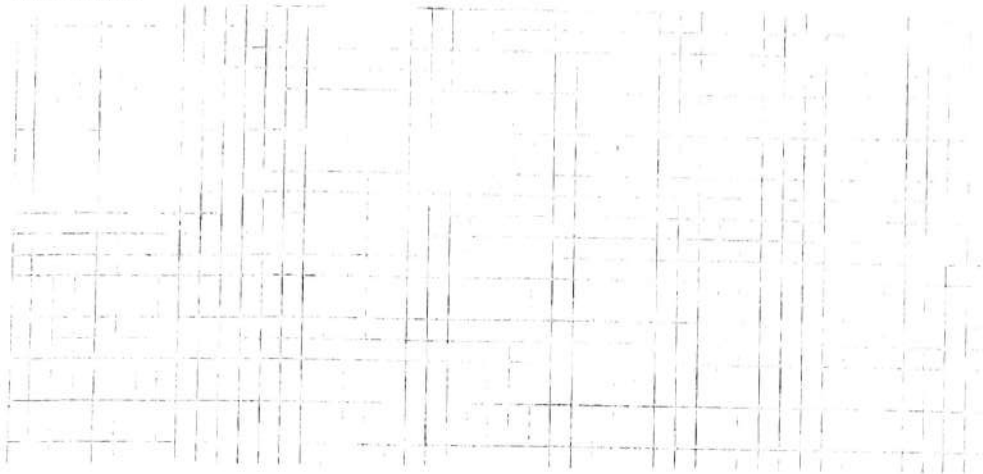
Driver's Signature
(If driver is not the policyholder)
Date & Time:

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

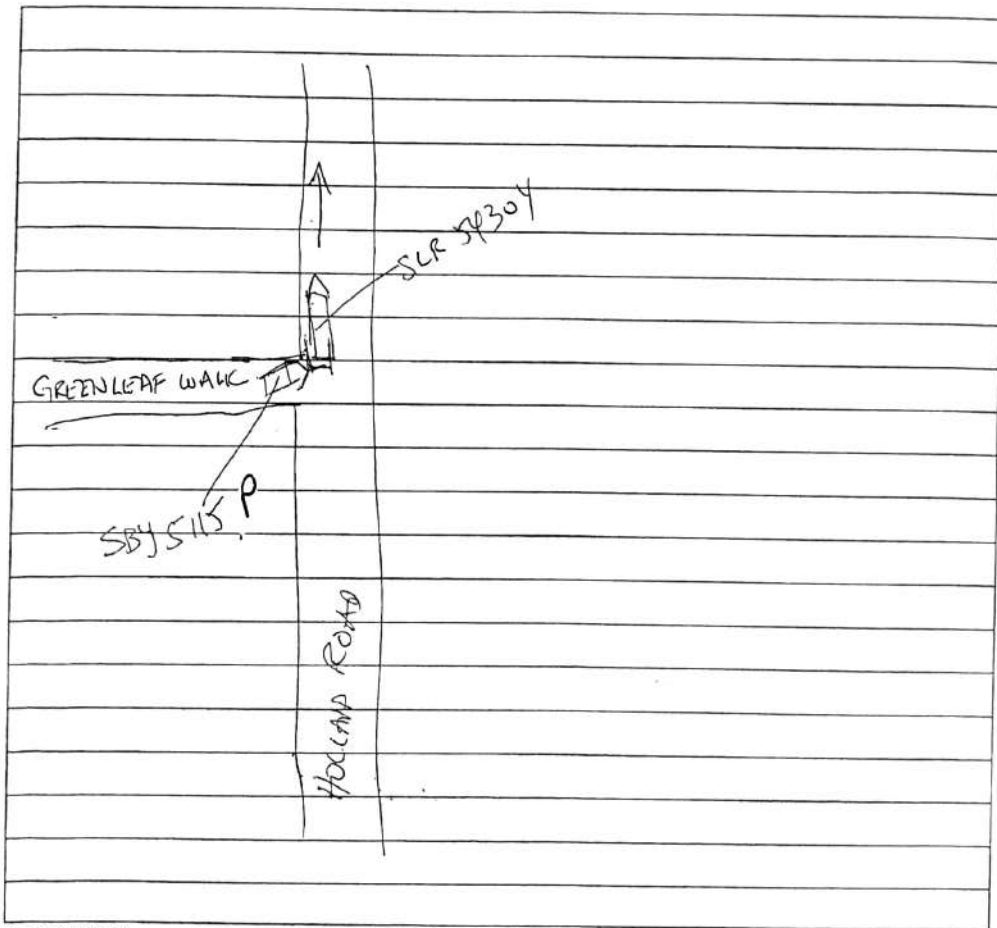


06 APR 2020

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT



DECLARATION

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

Policyholder's Signature
Date & Time:

06 APR 2020

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

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





**SINGAPORE
POLICE FORCE**



T/20200406/2056

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/20200406/2056

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 06/04/2020 15:12	Vide Report No.:	Station Diary No.: 123
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Informant's Particulars

Name of Informant: YAP CHAI HUAT			Address: APT BLK 468B FERNVALE LINK #08-547 SINGAPORE 792468	
ID Type / ID No.: NRIC NO / S0037278A			Contact No.: Home/Office: Mobile: 96385322	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 66	Date of Birth: 15/09/1953	Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation: PRIVATE HIRE			Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 06/04/2020 09:35	Type of Location: Straight Road
Location: HOLLAND ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SBY5115P	Car					0
SLR5430Y	Car	OPEL	ASTRA HB 1.0 AT	Black	Slightly Damaged	2

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLR5430Y	NTUC Income Insurance Co-Operative Limited	5098898282-02	18/02/2020	17/02/2021



**SINGAPORE
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T/20200406/2056

Police Station Of Origin:
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81 Ang Mo Kio Avenue 3 SINGAPORE
569929
Tel No: 1800-4519999

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Report No. T/20200406/2056

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	YAP CHAI HUAT	ID No.	S0037278A
Related Vehicle	SLR5430Y (Car)	Contact No.	96385322
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 06/04/2020 at about 0935hrs, I was driving my vehicle plated SLR5430Y along Holland Road, heading towards Suntec City together with 2 of my passengers whom I picked up from Holland Link.

I was travelling on the straight road of Holland Road when a car plated SBY5115P (white Mercedes) which came from a side road of Greenleaf Walk suddenly hit the left side of my rear bumper. I stopped my vehicle at the right hand side of the road and alight to make a check. However the other car sped off at a very fast speed. One of the passenger in my vehicle namely Seryun (Korean national, mobile: 86017365) informed that she was shocked that the car just sped off and advised me to lodge a police report. Subsequently, she called Grab and informed that she felt a light sprain on her neck.



**SINGAPORE
POLICE FORCE**



T/20200406/2056

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

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Report No. T/20200406/2056

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 2 TAY HUI KEE, JEANIE	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 06/04/2020 15:12
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt IRMAN BIN MOHAMAD SAID Contact No.: 65476145	Classification Of Case:
Authentication Stamp NP168	SN 086



**SINGAPORE
POLICE FORCE**

Traffic Police
10 Ubi Avenue 3
Singapore 408865
Tel +65 6547 0000
Fax +65 6547 4883
www.police.gov.sg

Our Ref : TP/IP/19919/2020
Date : 19 June 2020

Yap Chai Huat
Blk 468B Fernvale Link
#08-547
Singapore 792468

Dear Sir / Madam,

**TRAFFIC ACCIDENT INVOLVING SLR5430Y AND SBY5115P ALONG HOLLAND ROAD
ON 06/04/2020 AT ABOUT 0935 HRS**

I refer to the above accident.

1. Please be informed that we have completed our investigations which revealed that the driver of **SBY5115P** had committed the following offences:

- (i) Careless Driving under Sec 65(1)(b) of the RTA Cap 276 P/U Sec 65(5)(a) of the RTA;
- (ii) Failing to stop after an accident under Section 84(1) of the Road Traffic Act Chapter 276;
- (iii) Failing to report an accident within 24 Hours under Section 84(2) of the Road Traffic Act Chapter 276.
- (iv) Failing to render assistance under Section 84(3) of the Road Traffic Act Chapter 276.

Action has been initiated against the driver for the said offences.

2. If you have any clarification, you may contact the Investigation Officer, SSS Irman Bin Mohamad Said at office number: 6547 6145.

3. Thank you.

Yours faithfully,

**HEAD INVESTIGATION
TRAFFIC POLICE
SINGAPORE POLICE FORCE**

This is a computer-generated letter. No signature is required.