

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	03/08/2020 09:22
Date Of Accident	31/07/2020 23:30
Exact Location Of Accident	PUNGGOL RD TOWARDS SENGKANG E WAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SH9490S
Insured/Policyholder	
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Co Reg No	199303821R
Email Address	FLEETSAFETY@CDGTAXI.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-65508768

Vehicle Particulars

Manufacturer	TOYOTA
Model	PRIUS
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	TAXI

Insurance Company

Name of Insurance Company	MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	YES
Policy Number	D-18088936MFSH
Cover Note Number	

Driver

Name of Driver	GOH MUI CHAY
NRIC No	S0012971B
Date Of Birth	24/02/1953
Occupation	OUTDOOR
Date Of Driving Pass	30/07/1973
Driving Experience	47 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91147916
Fax Number	
Contact Number	
Email Address	THELITTLEPRINZE@YAHOO.COM.SG

Address	BLK 3 TAMPINES STREET 86 #05-12
Postcode	520393
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - TAXI DRIVER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD ON COLLISION
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?	NO
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)	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	TAMPINES N.P.C
Police Station Address	ROAD: TAMPINES N.P.C , POSTCODE: 529682 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO ATTACHED / POLICE REPORT : T/20200801/2010 / Type Of Accident : HEAD TO SIDE

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	-
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGW2770T
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	SHARIFUDIN BIN AHMAD
NRIC/Passport Number	
Contact Number	
Address	

Postcode

Insurance Company Name

Nature Of Damage

FRT

No. Of Passenger (Including Driver)

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, 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.

COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199303821R

Policyholder's Signature
Date & Time:

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

Reporting Centre Personnel's Signature
Name: Olivia Weng
NRIC/FIN No.: 63 AUG 2020

SKETCH PLAN

A = SH94902

W

B = SGW2770T
(MANDA)



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Statement as per Police Report

① T120200801/2010

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199303321R

Policyholder's Signature

Date & Time:

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Olivia Wong

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

03 AUG 2020



SINGAPORE POLICE FORCE



T/20200801/2010

1 of 4

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

Report No. T/20200801/2010

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 01/08/2020 09:44		Vide Report No.:		Station Diary No.: 21	
Informant's Particulars					
Name of Informant: GOH MUI CHAY			Address: APT BLK 3 TAMPINES STREET 86 #05-12 SINGAPORE 528584		
ID Type / ID No.: NRIC NO / S0012971B			Contact No.: Home/Office: Mobile: 91147916		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 67	Date of Birth: 24/02/1953	Type of Informant: Driver		
Race: Chinese			Language: Chinese		Institution / School Name:
Occupation: Taxi Driver			Driving Licence Information: Class: 2B,2A,2,3,4		Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 31/07/2020 23:30	Type of Location: X-Junction
Location: Junction of Road 1 and Road 2 PUNGGOL ROAD SENGKANG EAST WAY				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGW2770T	Car	HONDA	AIRWAVE 1.5 A	Black	Seriously Damaged	4
SH9490S	Car	TOYOTA	PRIUS HYBRID 1.8 CVT	Blue	Seriously Damaged	1

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20200801/2010

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

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Report No. T/20200801/2010

CONTINUATION OF REPORT

Driver			
Name	GOH MUI CHAY	ID No.	S0012971B
Related Vehicle	NIL	Contact No.	91147916
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3,4 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	SHARIFUDIN BIN AHMAD	ID No.	S7213878C
Related Vehicle	NIL	Contact No.	NIL
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	NIL	Degree of Injury	NIL

Brief Details.

On 31/07/2020 at around 2330 hours I was driving my vehicle (SH9490S) travelling along Punggol Road and I reached a cross junction and wanting to turn right towards Sengkang East Way. I had the right of way as the traffic light had indicated the green arrow.

Half way through the turn another vehicle (SGW2770T) coming from opposite side from Punggol Road drove and hit the left of my vehicle. The driver at the point of time had about 4-5 passengers.

I then stopped at the right lane of the road along Sengkang East Way. However the said vehicle did not stop and drove off.

After waiting for about 15 mins later the same vehicle (SGW2770T) drove back to scene and I took photos of his NRIC. His particulars is as follows:

Name: Sharifudin Bin Ahmad

IC: S7213878C

Address: 372 Tampines Street 34 #10-26 Singapore 520372

I would like to highlight that I was ferrying one passenger during the accident occurred and she is without any injury. I was not injured as well.

The damage to my vehicle are front left bumper was dislodged, dents on the front left fender, dents to the front left passenger door, scratches and dents to the front left rim.



**SINGAPORE
POLICE FORCE**



T/20200801/2010

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

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Report No. T/20200801/2010

CONTINUATION OF REPORT

10-08-2020

2020

10-08-2020

2020



SINGAPORE
POLICE FORCE



T/20200801/2010

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Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

Report No. T/20200801/2010

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:

G /

Sgt 2 LAM XUE TING

Sgt 3 JONATHAN SON ZHENG YONG

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIA /

Staff Sgt WONG SIEU LUI

Contact No.: 65476151

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

01/08/2020 09:44

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



SCENE



SCENE



SCENE



SCENE

