MTCS20066745 / Trans-Cab Services Pte Ltd - HQ
ENTRY DATE & TIME: 07/08/2020 14:29
SUBMITTED BY: Kek ZheWei

Your NCD will be affected due to late reporting
Actual e-Filling Submission Date & Time: 11/08/2020 15:00

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. **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	07/08/2020 14:29
Date Of Accident	04/08/2020 11:10
Exact Location Of Accident	SERANGOON NORTH AVENUE 3
Country/State of Loss	SINGAPORE
DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SHD62E
Insured/Policyholder	
Name Of Registered Owner	TRANS-CAB SERVICES PTE LTD
Co Reg No	2XXXXX878K
Email Address	CLAIMS@TRANSCAB.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-62876666
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	MB E 220 BLUE TEC
Exact Purpose for which vehicle was being used at time of accident	HIRE AND REWARD
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	TAXI
Insurance Company	
Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	VFX/P2348706
Cover Note Number	
Driver	
Name of Driver	WONG SHI XIAN
NRIC No	SXXXX523C
Date Of Birth	06/09/1985
Occupation	OUTDOOR
Date Of Driving Pass	15/01/2004
Driving Experience	16 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91018798
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 524 SERANGOON NORTH AVENUE 4 #10-50
Postcode	550524
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?	YES
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes,Please state which Police Station	
Police Station Name	SERANGOON NORTH NEIGHBOURHOOD POLICE POST
Police Station Address	**ROAD**: BLK 108 SERANGOON NORTH AVENUE 1 #01-709 , **POSTCODE:** 550108 , **COUNTRY**: SINGAPORE
Police Station Contact	**TEL NO**: 1800-2849999 - **FAX NO**: 63431742
Was notice of intended Prosecution given?	NO
If Yes,against whom?	

Circumstances of Accident

REFER TO POLICE REPORT T/20200806/2071

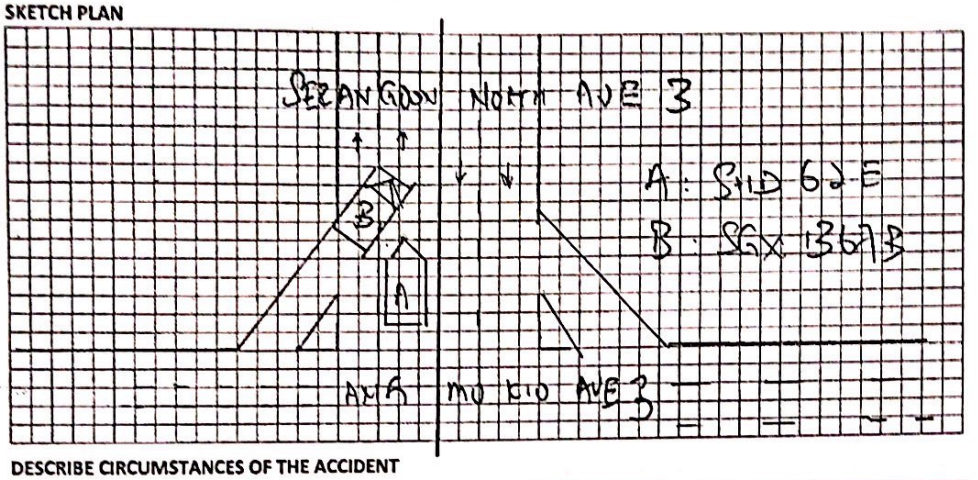
Attachment(s)

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	SGX1367B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report T/20200806/2071.

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

SINGAPORE POLICE FORCE

T/20200806/2071

Report No. T/20200806/2071

Police Station Of Origin:
Serangoon North NPP
108 Serangoon North Ave 1 #01-709
SINGAPORE 550108
Tel No: 1800-2849999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:	Vide Report No.:	Station Diary No.:
06/08/2020 16:15	F/20200804/0087	11

Informant's Particulars

Name of Informant: WONG SHI XIAN			Address: APT BLK 524 SERANGOON NORTH AVENUE 4 #10-50 SINGAPORE 550524	
ID Type / ID No.: NRIC NO / S8529523C			Contact No.: Home/Office: Mobile: 91018798	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 34	Date of Birth: 06/09/1985	Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation: Taxi driver			Driving Licence Information: Class: 3,4,5	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 04/08/2020 11:10	Type of Location: Straight Road

Location:
Along Road 1
SERANGOON NORTH AVENUE 3

After the junction of Ang Mo Kio Ave 3 and Serangoon North Ave 1. Entering into Serangoon North Ave 3

Weather: Clear	Road Surface: Dry	Road Speed Limit: 50 Km/h
Traffic Flow: One Way	Traffic Control:	Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Side		Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGX1367B	Car				Seriously Damaged	1
SHD62E	Car				Seriously Damaged	0

Details of Person Involved

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

SINGAPORE
POLICE FORCE

T/20200806/2071

Report No. T/20200806/2071

Police Station Of Origin:
Serangoon North NPP
108 Serangoon North Ave 1 #01-709
SINGAPORE 550108
Tel No: 1800-2849999

CONTINUATION OF REPORT

Driver			
Name	WONG SHI XIAN	ID No.	S8529523C
Related Vehicle	SHD62E (Car)	Contact No.	91018798
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3,4,5 Date of Expiry: NIL
Date Treatment	04/08/2020	Date Discharge	06/08/2020
No. of Days granted Medical Leave	07	Degree of Injury	NIL

Brief Details.

On 4/8/2020 at about 1100hrs, I was driving my vehicle (SHD62E) along Serangoon North Ave 1 going towards Serangoon North Ave 3 on lane 2. While at the traffic light junction, the traffic light was green therefore I proceeded to carry on driving straight into Serangoon North Ave 3.

When I entered Serangoon North Ave 3, another vehicle (SGX1367B) suddenly cut into Serangoon North Ave 3 coming from Ang Mo Kio Ave 3 coming straight into lane 2 without stopping at the give way line at the slip road or sticking to lane 1 after his turn. His abrupt action caused me to collide into him.

Due to the collision, my airbag was deployed and I was in a daze. I then contacted my wife to ask her to come down to the area to assist me as we stayed nearby. Shortly after, Traffic police and ambulance came and subsequently I was conveyed to Tan Tock Seng Hospital (TTSH) as such I did not manage to exchange contact details with the other party. Traffic police then liaised with my wife after that.

I was admitted into TTSH for 2 days as I was told that I sustained injuries on my back, neck and my left rib. I was then given 7 days of MC due to the accident.

I was also instructed by Traffic police to lodge a report once I am fit to do so.

My IO in charge of my case is IO Roizman his contact number is 65476131.

I am lodging this report for police assistance.