

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	27/08/2020 15:23
Date Of Accident	26/08/2020 19:40
Exact Location Of Accident	BEACH RD TWDS BRAS BASAH
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SME1945L
Insured/Policyholder	
Name Of Registered Owner	ASIA EXPRESS CAR RENTAL PTE LTD
Co Reg No	2XXXXX882D
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-91998131

Vehicle Particulars

Manufacturer	TOYOTA
Model	PRIUS
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	DMHCSNA00001942000
Cover Note Number	

Driver

Name of Driver	JUAY CHONG HOCK
NRIC No	SXXXX084H
Date Of Birth	28/06/1966
Occupation	OUTDOOR
Date Of Driving Pass	13/09/1986
Driving Experience	33 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-84680084
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address	BLK 105C EDGEFIELD PLAINS #04-61
Postcode	823105
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 - CROSS JUNCTION
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BOON TECK NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 207 TOA PAYOH NORTH , POSTCODE: 310207 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2549999 - FAX NO: 63554310
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT T/20200827/2067

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	SMH3637Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ELYNN GOH SIOW YEN
NRIC/Passport Number	SXXXX156F
Contact Number	91834150
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1	
Name	JUAY CHONG HOCK
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SME1945L
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

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:

27/1/20

Driver's Signature
(If driver is not the policyholder)

Date & Time:

27/1/20

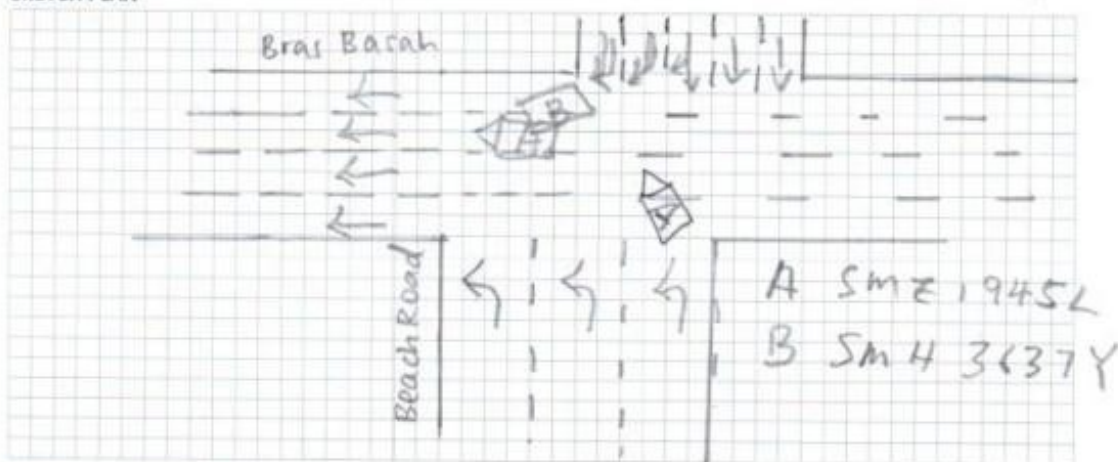
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report T/20200827/2067

DECLARATION

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



Policyholder's Signature

Date & Time:

07/8/20

GARDIAN Studio/San Jose, CA

Driver's Signature

(If driver is not the policyholder)

Date & Time:

07/8/20

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Police Report



**SINGAPORE
POLICE FORCE**



T/20200827/2067

Police Station Of Origin:
Boon Teck NPP
207 Toa Payoh North #01-1231 SINGAPORE
310207
Tel No: 1800-2549999

1 of 4

Report No. T/20200827/2067

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 27/08/2020 13:57	Vide Report No.:	Station Diary No.: 18
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Informant's Particulars			
Name of Informant: JUAY CHONG HOCK		Address: APT BLK 105C EDGEFIELD PLAINS #04-61 SINGAPORE 823105	
ID Type / ID No.: NRIC NO / S1750084H		Contact No.: Home/Office: Mobile: 84680084	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 54	Date of Birth: 28/06/1966	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: GRAB DRIVER		Driving Licence Information: Class: 3,4,5 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 26/08/2020 19:40	Type of Location:
Location: BRAS BASAH ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
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
SME1945L	Car	TOYOTA	PRIUS HYBRID 1.8S CVT	Grey	Slightly Damaged	0
SMH3637Y	Car	TOYOTA	PREVIA AERAS 2.4 CVT MR	Black	Slightly Damaged	1

Police Report



**SINGAPORE
POLICE FORCE**



T/20200827/2067

Police Station Of Origin:
Boon Teck NPP
207 Toa Payoh North #01-1231 SINGAPORE
310207
Tel No: 1800-2549999

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Report No. T/20200827/2067

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	JUAY CHONG HOCK	ID No.	S1750084H
Related Vehicle	SME1945L (Car)	Contact No.	84680084
Hospital/Clinic	Intemedical 24hr Clinic	Class of Driving Licence & Expiry Date	Class: 3,4,5 Date of Expiry: NIL
Date Treatment	27/08/2020	Date Discharge	27/08/2020
No. of Days granted Medical Leave	05	Degree of Injury	Slight
Driver			
Name	Elynn Goh Siow Yen	ID No.	S7908156F
Related Vehicle	SMH3637Y (Car)	Contact No.	91834150
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 26/8/20 at around 1940hrs, I was travelling along beach road towards bra basah road. I was at the third left turning lane about to turn left into bra basah road. Ahead was showing green light, hence I proceed to turn left.

Upon turning left into bra basah road, another vehicle on the opposite junction suddenly turned right into my lane too. I did not know why she did it.

It was supposed to be red light on her lane junction. But she still turned right and hit onto the side of my vehicle.

We pulled our vehicle to the side of the kerb and alighted. We exchanged particulars and took photos of the damaged vehicles. Next, we left the scene and proceeded home.

Today, I wish to mention I suffer some pain on my neck and lower back area. I went to visit the clinic and doctor gave me 5 days mc. Next, I proceed to the nearest police station to lodge a report.

I wish to mention my car have in-car camera installed at the front only.

Police Report



**SINGAPORE
POLICE FORCE**



T/20200827/2067

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Boon Teck NPP
207 Toa Payoh North #01-1231 SINGAPORE
310207
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Report No. T/20200827/2067

CONTINUATION OF REPORT

Police Report



**SINGAPORE
POLICE FORCE**



T/20200827/2067

Police Station Of Origin:
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207 Toa Payoh North #01-1231 SINGAPORE
310207
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Report No. T/20200827/2067

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:

E /

Sgt 3 KUAH JIA HAO

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

27/08/2020 13:57

Officer In Charge Of Case:

TP / AEIT /

Sr Staff Sgt ONG YONG HOCK

Contact No.: 65476436

Classification Of Case:

SN 52

Authentication Stamp
NP168



**SINGAPORE
POLICE FORCE**
SAFETY GUARDIAN EVERY DAY

SIGNATURE

Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Accident Photo



Accident Photo

