

## 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	28/08/2020 10:54
Date Of Accident	25/08/2020 17:10
Exact Location Of Accident	BUKIT BATOK WEST AVENUE 5 TOWARDS BUKIT GOMBAK MRT
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJY9352A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	PARADIGM AUTO PTE LTD
Co Reg No	201943139H
Email Address	JEN.GENCAPITAL@GMAIL.COM
Mobile Phone No	
Alternative Phone No	OFFICE-90938998

### Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	JETTA
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	THIRD PARTY
Fleet Policy	NO
Policy Number	5115302429
Cover Note Number	

### Driver

Name of Driver	CHAN YING WAI, JOSHUA (CHEN YINGWEI)
NRIC No	S8503136H
Date Of Birth	09/02/1985
Occupation	OUTDOOR
Date Of Driving Pass	14/11/2003
Driving Experience	16 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98192373
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLOCK 897A JURONG WEST CENTRAL 3 #03-09 SINGAPORE
Postcode	641697
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 - CHANGE/CROSS LANE
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	JURONG DIVISION HQ
Police Station Address	<b>ROAD:</b> 2 JURONG WEST AVENUE 5 , <b>POSTCODE:</b> 649482 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 18007910000 - <b>FAX NO:</b>
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO ATTACHED AND POLICE REPORT ; REMARKS: TYPE OF ACCIDENT PLEASE REFER TO POLICE REPORT AND ATTACHED STATEMENT

#### 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	XE2740Z
Vehicle Make/Model/Colour	
Details Of Properties	REFER TO POLICE REPORT AND ATTACHED
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	TEH CHAR LAY
NRIC/Passport Number	S1300468D
Contact Number	93228861
Address	
Postcode	

Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1	
Name	CHAN YING WAI, JOSHUA (CHEN YINGWEI)
Approximate Age	35
Injuries Sustain	REFER TO POLICE REPORT AND ATTACHED
Injured person in which vehicle?	SJY9352A
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	BLOCK 897A JURONG WEST CENTRAL 3 #03-09 SINGAPORE
Postcode	641697


**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:

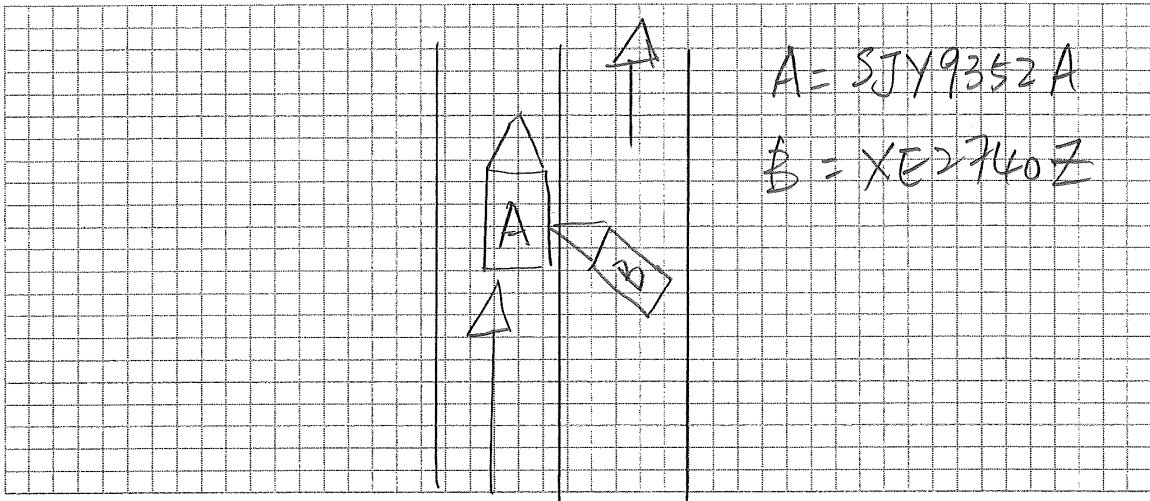
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

As per police report

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:

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



**SINGAPORE  
POLICE FORCE**



J/20200826/7026

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**POLICE REPORT (NP299)**

Report No. J/20200826/7026

Police Station Of Origin  
Jurong Division HQ  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No:1800-7910000

Date/Time Report Made 26/08/2020 15:28	Vide Report No.	Station Diary No.
Name Of Informant CHAN YING WAI, JOSHUA	Address 697A JURONG WEST CENTRAL 3 #03-09 SINGAPORE 641697	
ID Type / ID No. NRIC NO / S8503136H	Contact No. Home/Office: Mobile: 98192373	
Nationality SINGAPORE CITIZEN	Email Address joshua.chanyw@gmail.com	
Occupation GRAB DRIVER	Sex Male	Age 35
	Date of Birth 09/02/1985	Race Chinese
Institution/School Name	Language English	
Date/Time Of Incident 25/08/2020 17:10 - 25/08/2020 17:30	Location Of Incident 697A JURONG WEST CENTRAL 3 #03-09 SINGAPORE 641697	

**Brief details.**

On 25/08/2020 at around 1710hrs, I was driving my vehicle bearing car plate SJY9352A along Bukit Batok West Avenue 5 towards Bukit Gombak MRT Station. I was driving straight and keeping in my lane. Upon reaching the junction of Bukit Batok St 31, one lorry bearing plate number XE2740Z collided into my car. The accident caused severe damages to my vehicle and I have consulted my doctor and was given 3 days MC with strong medications. The third party has acknowledged and agreed to take full responsibility.

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: 26/08/2020 15:28
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp



**SINGAPORE  
POLICE FORCE**



J/20200826/7026

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POLICE REPORT (NP299)

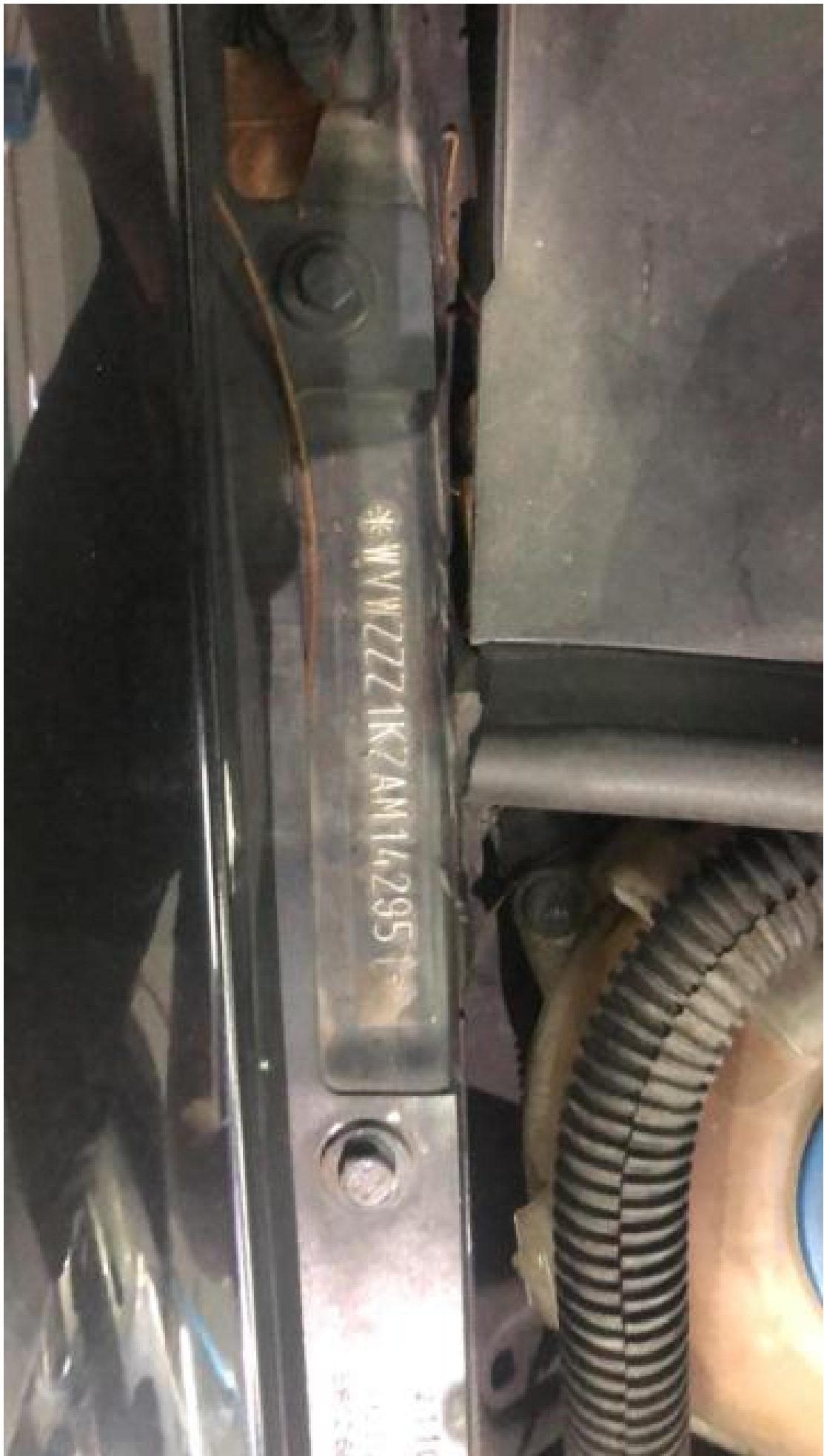
CONTINUATION OF REPORT

Report No. J/20200826/7026

Subjects Involved			
Victim			
Person Name	CHAN YING WAI, JOSHUA		
ID Type	NRIC NO	ID No	S8503136H
Gender	Male	Age	35
Race	Chinese	Language	English
Occupation	GRAB DRIVER	Address	697A JURONG WEST CENTRAL 3 #03-09 SINGAPORE 641697
Mobile No	98192373	Is Informant A Victim?	Yes
Person Name	CHAN YING WAI, JOSHUA (Informant)		

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: 26/08/2020 15:28
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



**Accident Photo**



**Accident Photo**



Accident Photo



Accident Photo

