

## 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 14:23
Date Of Accident	26/08/2020 15:10
Exact Location Of Accident	ALONG PIE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLC4109L
<b>Insured/Policyholder</b>	
Name Of Registered Owner	CHUA CHI KIONG
NRIC No	SXXXX308G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96273717
Alternative Phone No	OFFICE-96273717

### Vehicle Particulars

Manufacturer	HYUNDAI
Model	ELANTRA-1.6 (A)
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	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	5115410686
Cover Note Number	

### Driver

Name of Driver	CHUA CHI KIONG
NRIC No	SXXXX308G
Date Of Birth	17/10/1965
Occupation	OUTDOOR
Date Of Driving Pass	30/09/1985
Driving Experience	34 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96273717
Fax Number	
Contact Number	
Email Address	NOEMAIL

BLK102 PUNGGOL DRIVE #12-28  
 828800  
 Is driver an employee of the Insured's Company NO  
 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 - HEAD TO REAR  
 Weather Conditions AFTER RAIN  
 Road Surface WET

#### 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) 2  
 Passenger 1 NAME: : PASSENGER  
 GENDER: : MALE

#### Details of Police Action

Was the accident reported to the police? YES  
 If Yes, Please state which Police Station  
 Police Station Name HOGANG N.P.C  
 Police Station Address ROAD: 60 HOUGANG AVE 9 SINGAPORE 538775 , POSTCODE: 538775 ,  
 COUNTRY: SINGAPORE  
 Police Station Contact TEL NO: - FAX NO:  
 Was notice of intended Prosecution given? NO  
 If Yes, against whom?

#### Circumstances of Accident

attach police report

#### Attachment(s)

Are accident photos available for attachment? YES  
 Was there any video captured by Car Camera? NO  
 Was there any audio recorded? NO

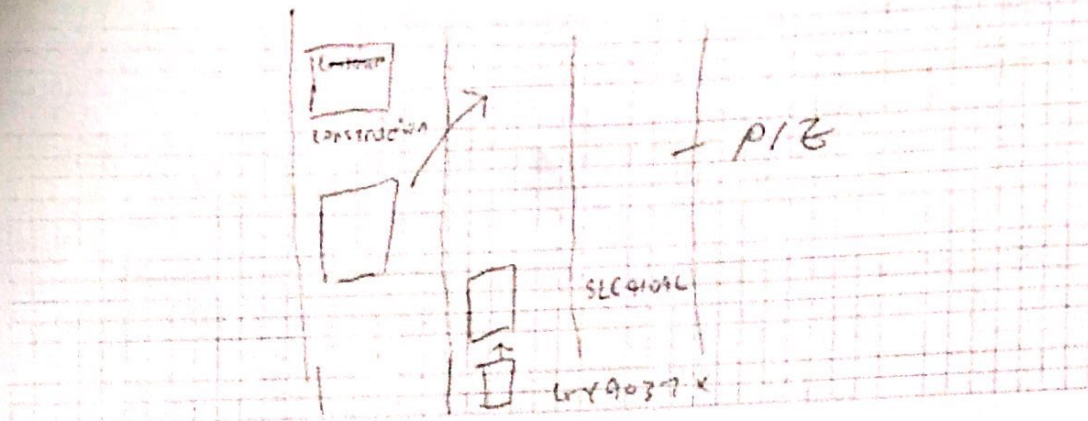
#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number GY9037X  
 Vehicle Make/Model/Colour  
 Details Of Properties  
 Vehicle Category COMMERCIAL VEHICLE  
 Name of Driver  
 NRIC/Passport Number  
 Contact Number  
 Address



### Accident Sketch Plan

### SKETCH PLAN



**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Police Report Attach

### DECLARATION

**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:

CITY AUTO PTE LTD

Bik 8 Sin Ming Road  
#01-5800/62 Sin Ming Ind Est  
Singapore 570643  
Tel: 6453 1235 Fax: 6453 7944  
(Claims Section)

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



police report



**SINGAPORE  
POLICE FORCE**



T/20200827/2041

2 of 3

Police Station Of Origin:  
Hougang N.P.C  
60 Hougang Avenue 9 SINGAPORE 538775  
Tel No: 1800-4890999

Report No. T/20200827/2041

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	CHUA CHI KIONG	ID No.	S1692308G
Related Vehicle	SLC4109L (Car)	Contact No.	95273717
Hospital/Clinic	PROHEALTH MEDICAL GROUP @ PUNGGOL DAMAI PTE LTD	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	27/08/2020	Date Discharge	27/08/2020
No. of Days granted Medical Leave	03	Degree of Injury	Slight

**Brief Details.**

On 26/08/2020 at about 1453hrs, I accepted a Grab job request to pick up a male passenger(Aung) from Lake Point Drive heading to Serangoon North Avenue 4 with my vehicle SLC4109L. Everything is intact and in order.

On same day between 1500hrs to 1510hrs, while driving along PIE heading towards Changi Airport direction on the middle lane, I noticed there was road work up ahead on the left lane and also a truck on my left with intention to swerve right into my lane hence I slowed down my vehicle to give way. Out of a sudden, I felt an impact from the rear of my vehicle, I then made a check with Aung and he informed that he is not hurt or injured. I got out of my vehicle and discovered a vehicle GY9037X had collided onto the rear portion of my vehicle and there were dents and scratches on the rear boot and rear bumper.

I then approached and exchanged particular with the driver of GY9037X namely Lim Chin Huat (S1152698E, HP: 93875495 / 83551526), Mr Lim wishes to settle the matter privately however I wish to seek insurance claim, hence we left thereafter without coming to a decision on the settlement.

After the accident, I went back home and I felt pain at neck and body thus I had went to the clinic to make a check. The doctor then gave me a total of 3 days of Medical Leave.

I called to inform Grab about the matter and was advised to lodge a police report.  
I am lodging this police report for Grab company record purpose and insurance claim.



police report



**SINGAPORE  
POLICE FORCE**



T/20200827/2041

1 of 3

Report No. T/20200827/2041

Police Station Of Origin:  
Hougang N.P.C  
60 Hougang Avenue 9 SINGAPORE 538775  
Tel No. 1800-4890999

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 27/08/2020 11:59	Vide Report No.:	Station Diary No : 51
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**Informant's Particulars**

Name of Informant: CHUA CHI KIONG			Address: 102 PUNGGOL DRIVE #12-28 SINGAPORE 828800		
ID Type / ID No.: NRIC NO / S1692308G			Contact No.: Home/Office:		Mobile: 96273717
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 54	Date of Birth: 17/10/1965	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Grab Driver			Driving Licence Information: Class:		Date of Expiry:

**General Information of the Accident**

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 26/08/2020 15:00	Type of Location: Expressway
Location:  PAN-ISLAND EXPRESSWAY				
Weather: Cloudy		Road Surface: Wet		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume: Moderate
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
GY9037X	Lorry				Slightly Damaged	2
SLC4109L	Car	HYUNDAI	ELANTRA AD 1.6 GLS AT	Silver	Slightly Damaged	1

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLC4109L	NTUC Income Insurance Co-Operative Limited	5115410686	16/01/2020	15/01/2021