MNA120080681 / National Assessment Centre Services - Ubi ENTRY DATE & TIME: 17/09/2020 10:29 SUBMITTED BY: Liew Shan Hui

SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Driving Experience

- 1. Please report <u>correctly</u> 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 witholding 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 conse	nt to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	17/09/2020 10:29
Date Of Accident	16/09/2020 08:00
Exact Location Of Accident	AYE
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SML9193A
Insured/Policyholder	
Name Of Registered Owner	TAY SOK HOON
NRIC No	S1363478E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98773776
Alternative Phone No	Office-98773776
Vehicle Particulars	
Manufacturer	TOYOTA
Model	COROLLA ALTIS
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
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 CAR
Insurance Company	
Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	
	NO
Policy Number	NO 1900104028-01
Policy Number Cover Note Number	
Cover Note Number	
Cover Note Number Driver	1900104028-01
Cover Note Number Driver Name of Driver	1900104028-01 TAY SOK HOON
Cover Note Number Driver Name of Driver NRIC No	1900104028-01 TAY SOK HOON S1363478E

34 YEARS AND 3 MONTHS

Gender **FEMALE**

Mobile Number (LOCAL) +65-98773776

Fax Number

Contact Number OFFICE-98773776

EMail Address NOEMAIL

Address BLK 14 JLN BT MERAH #14-5032

Postcode 150014 Was driver an employee of the Insured's Company NO **OWNER**

If No, Relationship of the Driver with the Insured

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 CLEAR DRY Road Surface

Other Information

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by

ambulance?

YES

6

Was any other material or property damaged? I have been approached by unknown person(s) soliciting/offering accident claims assistance.

NO

1 Number of Passengers (Including Driver)

Details of Police Action

Was the accident reported to the police? YES

If Yes, Please state which Police Station

Police Station Name TRAFFIC POLICE DIVISION HQ

Police Station Address ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY: SINGAPORE

Police Station Contact TEL NO: 65470000 - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

REFER TO POLICE REPORT T/20200916/7005

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 SLL9362R

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR Name of Driver JOHN

NRIC/Passport Number

Contact Number 98634030

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SMS4488X

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR
Name of Driver SHAWN

NRIC/Passport Number

Contact Number 97564507

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SLR9418H

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver CHAY

NRIC/Passport Number

Contact Number 90083813

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number SHA4332R

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category TAXI

Name of Driver

NRIC/Passport Number

Contact Number

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 5

Vehicle Registration Number FBQ8456C

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category MOTORCYCLE

Name of Driver RAHIM

NRIC/Passport Number

Contact Number 93397609

Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance
- 5. Any false reporting may be referred to the Police for investigation.
- 6. The 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
- 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
- (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

r(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)

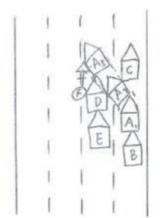
Date & Time:

Reporting Centre Personnel's Signature

Name

NRIC/FIN No.:

SKETCH PLAN



Vehicle A: SML 9132 R Vehicle B: SLL 9322 R Vehicle C: SMS 4488 X Vehicle D: SLR 9418 M Vehicle E: SHH 4352 R Vehicle F: FBQ 8456 C

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

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DECLARATION

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

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

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 1 of 3 Report No. T/20200916/7005

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/09/2020 11:35			Vide Report No.: D/20200916/0059	Station Diary No.		
Informan	t's Partic	ulars				
Name of Informant: TAY SOK HOON			Address: 14 JALAN BUKIT MERAH #14-5032 SINGAPORE 150014			
ID Type / ID No.: NRIC NO / S1363478E			Contact No.: Home/Office:	Mobile: 98773776		
Nationality: SINGAPORE CITIZEN		EN	Email: ANNAT708@GMAIL.COM			
Sex: Female	Age: 60	Date of Birth: 21/12/1959	Type of Informant: Driver			
Race: Chinese			Language: English	Institution / School Name:		
Occupation: General practitioner/physician			Driving Licence Information: Class: 3	Date of Expiry:		

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 16/09/2020 08:00	Type of Location Straight Road
AYER RAJAH	HEXPRESSWAY			
Weather:		Road Surface:		Road Speed Limit:
Weather: Clear Traffic Flow: One Way		Road Surface: Traffic Control: Not Controlled		Road Speed Limit: Traffic Volume: Moderate

Vehicle No.	Туре	Make	Model	Color	Conditio	No of
FBQ8456C	Motorcycle					0
SHA4332R	Car					0
SLL9362R	Car					0
SLR9418H	Car			_	_	0





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 2 of 3 Report No. T/20200916/7005

CONTINUATION OF REPORT

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SML9193A	Car	TOYOTA	ALTIS	Black	Seriously Damaged	0
SMS4488X	Car					0
	Car					0

Details of Perso	n Involved					
Any Pedestrian I	nvolved: No					
No. of Pedestrian	No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA		
Driver				7 M		
Name	TAY SOK HOON			ID No		S1363478E
Related Vehicle	SML9193A (Car)			Conta	ct No.	98773776
Hospital/Clinic	NIL			Class Drivin Licend Expiry	g ce &	Class: 3 Date of Expiry: NIL
Date	NIL		Date		NIL	
No. of Days gran	ted Medical Leave	Degree o	Degree of Slight		t	

Brief Details

I WAS TRAVELLING ALONG AYE TOWARDS TUAS ON LANE 1 OF 4 LANES. TRAFFICE WAS MODERATE. THE VEHICLE IN FRONT OF ME SLOWED DOWN AND STOPPED. NOTICING THAT I ALSO SLOWED DOWN MY VEHICLE. AFTER A FEW SECONDS, I FELT AN GREAT IMPACT FROM THE REAR. A VEHICLE(SLL9362R) BEHIND ME ON LANE 1 COULD NOT STOP IN TIME AND COLLIDED ONTO THE REAR OF MY VEHICLE. THE IMPACT WAS SO HUGE THAT IT PUSHED ME FORWARD TO THE LEFT. AFTER THE IMPACT FROM THE REAR, I COLLIDED WITH THE VEHCILE(SMS4488X) IN FRONT. THEN I WAS PUSHED TO LANE 2, AND THE VEHCILE(SLR9418H) BEHIND ME ON LANE 2 COULD NOT REACT ON TIME AND COLLIDED ONTO THE REAR OF MY VEHICLE. AFTER A FEW SECONDS, A MOTORCYCLE(FBQ8456C) ON LANE 2 ALSO COLLIDED ONTO THE LEFT SIDE OF MY VEHICLE. A TAXI (SHA4332R) COULD NOT STOP IN TIME AND COLLIDED ONTO THE REAR OF THE VEHICLE (SLR9418H) ON LANE 2. IN TOTAL, 5 CARS AND 1 MOTORCYCLE WERE INVOLVED IN THE CHAIN COLLISION.





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20200916/7005

CONTINUATION OF REPORT

Sketch Plan

Authentication Stamp

NP168

Informant is not able to provide sketch

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: 16/09/2020 11:35
Officer In Charge Of Case: TP / TPHQ / MOHAMMED FEROZ BIN HUSSIEN Contact No.: 65476206	Classification Of Case:





