

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	17/09/2020 09:59
Date Of Accident	16/09/2020 21:50
Exact Location Of Accident	PASIR RIS DRIVE 1
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE	
Vehicle Registration Number	SMH292C
Insured/Policyholder	
Name Of Registered Owner	TAY JIN HWEE
NRIC No	S9122343J
Email Address	TAYHWEE@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-96891049
Alternative Phone No	Others-65823020

Vehicle Particulars	
Manufacturer	KIA
Model	CERATO-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	DRIVING HOME
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
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	1900001657
Cover Note Number	

Driver	
Name of Driver	TAY JIN HWEE
NRIC No	S9122343J
Date Of Birth	22/06/1991
Occupation	OUTDOOR
Date Of Driving Pass	16/12/2009
Driving Experience	10 YEARS AND 9 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-96891049
Fax Number	
Contact Number	OTHERS-65823020
EEmail Address	TAYHWEE@HOTMAIL.COM
Address	BLK 427 PASIR RIS DRIVE 6 #10-49
Postcode	510427
Was driver an employee of the Insured's Company	NO
If 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	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?	NO
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	PASIR RIS NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 1 PASIR RIS DRIVE 4 , POSTCODE: 519457 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5852999 - FAX NO: 65855261
Was notice of intended Prosecution given?	NO
If Yes,against whom?	

Circumstances of Accident

REFER TO ATTACHMENT

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	SKA783M
Vehicle Make/Model/Colour	MITSUBISHI LANCER/GREY
Details Of Properties	
Vehicle Category	PRIVATE CAR

Name of Driver	ONG YONG HAO
NRIC/Passport Number	S9418938A
Contact Number	98593351
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	REAR ENDED
No. Of Passenger (Including Driver)	

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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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 interested parties.
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.:

A: sm1t292C
B: skA 783m

Refer to Police Report.

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

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



T/20200916/2137

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

1 of 3
Report No. T/20200916/2137

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/09/2020 23:00		Video Report No.: T/20200916/2134		Station Diary No.: 132	
Informant's Particulars					
Name of Informant: TAY JIN HWEE			Address: APT BLK 427 PASIR RIS DRIVE 6 #10-49 SINGAPORE 510427		
ID Type / ID No.: NRIC NO / S9122343J			Contact No.: Home/Office: Mobile: 96891049		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 29	Date of Birth: 22/06/1991	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: SAF REGULAR			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 16/09/2020 21:50	Type of Location: X-Junction
Location: PASIR RIS DRIVE 1				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		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
SKA783M	Car	MITSUBISHI	LANCER		Slightly Damaged	1
SMH292C	Car	KIA	CERATO 1.6(A) EX	Red	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No	Insurance Company	Insurance No	Effective	Expiry Date
SMH292C	AIG ASIA PACIFIC INSURANCE PTE LTD.	1900001657	09/01/2019	08/01/2021

Police Report



**SINGAPORE
POLICE FORCE**



T/20200918/2137

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

2 of 3

Report No. T/20200918/2137

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Passenger			
Name	MUHAMMAD FADZLI BIN JANI	ID No.	S9330540Z
Related Vehicle	NIL	Contact No.	97971794
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	TAY JIN HWEE	ID No.	S9122343J
Related Vehicle	NIL	Contact No.	96891049
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
Driver			
Name	ONG YONG HAO	ID No.	S9418938A
Related Vehicle	NIL	Contact No.	98593351
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.

With reference to vide report no. T/20200918/2134, the Driver's NRIC number is S9418938A and he has a class 3 driving licence.

Police Report



**SINGAPORE
POLICE FORCE**



T202009162137

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

3 of 3

Report No. T202009162137

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 65474886 stating the report number as reference.

Signature Of Officer Recording The Report:

G /
Sgt 2 TOH SHIMIN, KIMBERLY

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:

TP / GIA /
Staff Sgt WONG SIEU LUI
Contact No.: 65478151



Authentication Stamp
NP158

Signature Of Informant:

Date/Time:

16/09/2020 23:00

Classification Of Case:

Police Report



**SINGAPORE
POLICE FORCE**



T/20200916/2134

Police Station Of Origin:
Pasir Ris N.P.C
1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

1 of 4
Report No. T/20200916/2134

REPORT OF A TRAFFIC ACCIDENT

Data/Time Report Made: 16/09/2020 22:40		Vide Report No.:		Station Diary No.: 116	
Informant's Particulars					
Name of Informant: TAY JIN HWEE		Address: APT BLK 427 PASIR RIS DRIVE 6 #10-49 SINGAPORE 510427			
ID Type / ID No.: NRIC NO / S9122343J		Contact No.: Home/Office:		Mobile: 96891049	
Nationality: SINGAPORE CITIZEN		Email:			
Sex: Male	Age: 29	Date of Birth: 22/08/1991	Type of Informant: Driver		
Race: Chinese		Language:		Institution / School Name:	
Occupation: SAF REGULAR		Driving Licence Information: Class: 3		Date of Expiry:	

General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 16/09/2020 21:50	Type of Location: X-Junction
Location: PASIR RIS DRIVE 1				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		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
SKA783M	Car	MITSUBISHI	LANCER	Silver	Slightly Damaged	1
SMH292C	Car	KIA	CERATO 1.8(A) EX	Red	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMH292C	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1900001657	09/01/2019	08/01/2021

Police Report



**SINGAPORE
POLICE FORCE**



T/20200918/2134

Police Station Of Origin:
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1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

2 of 4
Report No. T/20200918/2134

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Passenger			
Name	MUHAMMAD FADZLI BIN JANI	ID No.	S9330540Z
Related Vehicle	NIL	Contact No.	97971794
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	TAY JIN HWEE	ID No.	S9122343J
Related Vehicle	NIL	Contact No.	96891049
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
Driver			
Name	ONG YONG HAO	ID No.	S941838A
Related Vehicle	NIL	Contact No.	96593351
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 18/09/2020 at about 9.50pm, I was at the traffic light along Pasir Ris Dr 8 turning right to Pasir Ris Dr 1. It was a 4 lanes road and I was at the 2nd lane and there was a silver color car, bearing number, SKA783M was in front of me. When the traffic light turns green, I accelerated my car and wanted to turn right to Pasir Ris Dr 1, however the car that was in front of me did not move and I could not brake in time which caused the front of my car to knock onto the rear of the said car. Both myself and the driver came down from the vehicle and we exchanged our particulars. I noticed that there was a passenger seated at the left rear passenger seat. I asked both the driver and the passenger if they need any medical attention, they told me that they are fine. The driver of the said car informed that he is a Grab driver and he will

Police Report



**SINGAPORE
POLICE FORCE**



T/20200916/2134

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1 Pasir Ris Drive 4 #01-01 SINGAPORE
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Tel No: 1800-5852999

3 of 4

Report No. T/20200916/2134

CONTINUATION OF REPORT

inform Grab pertaining to this incident and will get back to me on the follow-up action. We then left the location subsequently.

I noticed that my front car plate was dented and there was a slight crack on the rear left bumper of the said car. I am not injured as well and there was no visible injury seen on both the passenger and the driver.

Police Report



**SINGAPORE
POLICE FORCE**



T/20200916/2134

Police Station Of Origin:
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1 Pasir Ris Drive 4 #01-01 SINGAPORE
519457
Tel No: 1800-5852999

4 of 4

Report No. T/20200916/2134

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: G / Sgt 2 TOH SHIMIN, KIMBERLY <i>[Signature]</i>	Signature Of Informant: <i>[Signature]</i>
Signature Of Interpreter: Not applicable	Date/Time: 16/09/2020 22:40
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:
Authentication Stamp NP158 <i>[Stamp]</i>	

Identification Card

