

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 21/09/2020 09:54
Date Of Accident 19/09/2020 14:00
Exact Location Of Accident ALONG MIDDLE ROAD BEFORE QUEEN'S ST
Country/State of Loss SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number SH8026G
Insured/Policyholder
Name Of Registered Owner COMFORT TRANSPORTATION PTE LTD
Co Reg No 1XXXXX821R
Email Address FLEETSAFETY@CDGETAXI.COM.SG
Mobile Phone No
Alternative Phone No OFFICE-65508768

Vehicle Particulars

Manufacturer TOYOTA
Model PRIUS

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 TAXI

Insurance Company

Name of Insurance Company MS FIRST CAPITAL INSURANCE LTD
Type Of Coverage THIRD PARTY FIRE AND/OR THEFT
Fleet Policy YES
Policy Number D-18088937MFSH
Cover Note Number

Driver

Name of Driver TAN CHEE HENG
NRIC No SXXXX734G
Date Of Birth 01/01/1952
Occupation OUTDOOR
Date Of Driving Pass 26/09/1975
Driving Experience 44 YEARS AND 11 MONTHS
Gender MALE
Mobile Number (LOCAL) +65-96276638
Fax Number
Contact Number
EMail Address CHEEHENG TAN@YAHOO.COM.SG

Address	BLK 184B RIVERVALE CRESCENT #11-185
Postcode	542184
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - TAXI DRIVER
Vehicle Registration Number of Driver's Own Vehicle	-
Insurance Company of Driver's Own Vehicle	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
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	TAMPINES N.P.C
Police Station Address	ROAD: TAMPINES N.P.C , POSTCODE: 529682 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER POLICE REPORT NO: T/20200920/2022

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	-
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY

Vehicle Registration Number	GBH2412R
Vehicle Make/Model/Colour	LORRY
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	YAP GUAN TEE
NRIC/Passport Number	
Contact Number	91765588
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

RH REAR

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1:

Name

TAN CHEE HENG

Approximate Age

Injuries Sustain

LEFT NECK, SHOULDER AND LOWER BACK

Injured person in which vehicle?

SH8026G

Were seat belts worn?

YES

Was this injured conveyed to hospital by ambulance?

NO

Address

Postcode

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3 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)
 - (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, investigation, 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.

COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199303821R

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.: **Olivia Wendy**

21 SEP 2020

SKETCH PLAN

As per attached

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Statement as per Police Report

② T | 20200920 | 2022

DECLARATION

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

COMFORT TRANSPORTATION PTE LTD
CO. REG. NO. 199303821R

Policyholder's Signature
Date & Time:

1/1
Driver's Signature
(if driver is not the policyholder)
Date & Time:

Reporting Centre Personnel's Signature
Name:
NRIC/Fin No. Olivia Wendy
21 SEP 2020



**SINGAPORE
POLICE FORCE**



T/20200920/2022

1 of 3

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

Report No. T/20200920/2022

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 20/09/2020 10:41	Vide Report No.:	Station Diary No.: 29
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Informant's Particulars

Name of Informant: TAN CHEE HENG			Address: APT BLK 184B RIVERVALE CRESCENT #11-185 SINGAPORE 542184	
ID Type / ID No.: NRIC NO / S0987734G			Contact No.: Home/Office: Mobile: 96276638	
Nationality: SINGAPORE CITIZEN			Email: cheeheng1952@gmail.com	
Sex: Male	Age: 68	Date of Birth: 01/01/1952	Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation: Taxi driver			Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 19/09/2020 14:00	Type of Location: Straight Road
Location: MIDDLE ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 60 Km/h	
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBH2412G	Lorry				No Damage	0
SH8026G	Car	TOYOTA	Prius		Slightly Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20200920/2022

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Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

Report No. T/20200920/2022

CONTINUATION OF REPORT

Driver			
Name	TAN CHEE HENG	ID No.	S0987734G
Related Vehicle	SH8026G (Car)	Contact No.	96276638
Hospital/Clinic	ANSAR CLINIC	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	20/09/2020	Date Discharge	20/09/2020
No. of Days granted Medical Leave	03	Degree of Injury	Slight

Brief Details.

On 19th September 2020 at about 2pm, while I was driving along Middle road in my taxi (SH8026G), a lorry (GBH2412G) had suddenly swerved into my lane and his rear had collided with the left side of my taxi. My taxi sustained a dent at the front left side above the wheel. After hitting my taxi, the driver just continued driving off. I gave chase and honked for the driver to stop but to no avail. I continued tailing him all the way and we ended up in a condominium in which I forgot the name. I confronted the driver but he told me that he was unaware of the collision and could not hear my honks.

Through the confrontation, I took a picture of his driver's license and told him that I would inform my company and lodge a police report on my end, and he acknowledged. His particulars are as follows: (Name: Yap Guan Tee, NRIC: S0188012H, DOB: 29/06/1954, Hp no: 91765588). Afterwards, I had left the area and did not pursue further.

When I woke up on 20th September at about 9am, I felt pain on my left neck, shoulder and lower back thus I went to a nearby clinic (Ansar Clinic) and was given 3 days MC. I wish to state that I have an in-car camera video recording the entire incident. I am lodging this report as a record when I inform my company (Comfort Delgro).



**SINGAPORE
POLICE FORCE**



T/20200920-2022

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

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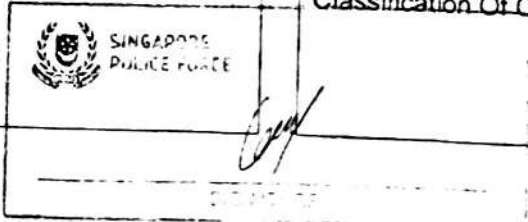
Report No. T/20200920/2022

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 GEOFF LEONG KENG YI 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 20/09/2020 10:41
Officer In Charge Of Case: TP / HRT / Sr Staff Sgt NEO ZHI YUAN Contact No.: 65476079	Classification Of Case:
Authentication Stamp NP168	

Sketch Plan Pg. 6

