

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 Submission	02/12/2020 10:29 (SGT)
Date of Accident	28/11/2020 22:10 (SGT)
Exact Location of Accident	Little India, Singapore
Additional Location Information	ALONG RANGOON ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLS7512B
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TEO TECK HIAN
NRIC No	SXXXX515E
Email Address	xride1204@gmail.com
Mobile Phone No	(Phone) +65-90235883
Alternative Phone No	+65-90235883

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Corolla
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Reporting only
Vehicle Category	Private car

INSURANCE COMPANY

Name of Insurance Company	NTUC
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	5096455547-02
Cover Note Number	-

DRIVER

Name of Driver	TEO TECK HIAN
NRIC No	SXXXX895D
Date Of Birth	12/04/1983
Occupation	Indoor

Date Of Driving Pass	04/03/2002
Driving experience	18 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-87005893
Alt. Phone Number	-
Email Address	xride1204@gmail.com
Address	BLK 143 #18-1138
Address complement	JALAN BUKIT MERAH
Postcode	160143
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Child
Does Driver Own Other Vehicles?	No
Vehicle Registration Number of Other Vehicle Owned by Driver	-
Insurance Company of Other Vehicle Owned by Driver	-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident	Side Swipe
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	2
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	1
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Bukit Merah East Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002369999
Alt. Police Station Phone No	(Fax) +65-62204360
Police Station Address	391 New Bridge Road Police Cantonment Complex Block A Singapore 088762
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT T/20201129/2022

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	FBP4230T
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Motorcycle
Name of Driver	SAMEER SINGH S/O MOHANDER SINGH

NRIC No	SXXXX476B
Contact Number	(Phone) +65-87492091
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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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: 30/11/20 12:29pm

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

GIA/ACC SketchPlanForm_V3

SKETCH PLAN

Hand.
Ranger

Vehicle A SLS 7512B
Vehicle B FRP 4230T

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

RAPIR 20 Medical REPORT T/20201129/2022

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: 30/11/20

Reporting Centre Personnel's Signature
Name:

NRIC/FI























**SINGAPORE
POLICE FORCE**



T/20201129/2022

1 of 3

Report No: T/20201129/2022

Police Station Of Origin:
Bukit Merah East N.P.C
A 391 New Bridge Road Police Cantonment
Complex SINGAPORE 088762
Tel No: 1800-2369999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/11/2020 09:53 Vide Report No.: Station Diary No.: 17

Informant's Particulars

Name of Informant: TEO JUN HAO Address: APT BLK 143 JALAN BUKIT MERAH #18-1138 SINGAPORE 160143
ID Type / ID No.: NRIC NO / S8311895D Contact No.: Home/Office: Mobile: 87005893
Nationality: SINGAPORE CITIZEN Email:
Sex: Male Age: 37 Date of Birth: 12/04/1983 Type of Informant: Driver
Race: Chinese Language: English Institution / School Name:
Occupation: ACCOUNTS EXECUTIVE Driving Licence Information: Class: Date of Expiry:

General Information of the Accident

Type of Accident: Non-Injury Attended by Police Drink Drive: No Date/Time of Accident: 28/11/2020 22:10 Type of Location: Straight Road
Location: RANGOON ROAD
Weather: Clear Road Surface: Dry Road Speed Limit:
Traffic Flow: One Way Traffic Control: Not Controlled Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Side Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBP4230T	Motorcycle				Slightly Damaged	0
SLS7512B	Car	TOYOTA	Toyota Corolla Altis	Silver	Slightly Damaged	0

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



17/20201129/2022

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A 391 New Bridge Road Police Cantonment
Complex SINGAPORE 088762
Tel No. 1800-2369999

Report No. T/20201129/2022

CONTINUATION OF REPORT

Rider			
Name	SAMEER SINGH S/O MOHANDER SINGH	ID No.	S9933476B
Related Vehicle	FBP4230T (Motorcycle)	Contact No.	87495091
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	Slight
Driver			
Name	TEO JUN HAO	ID No.	S8311895D
Related Vehicle	SLS7512B (Car)	Contact No.	87005893
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 the above mentioned date, time and location, I was driving my vehicle SLS7512B along Rangoon Rd. I had signaled and was turning right into Starlight Rd when the other party, a motorist riding FBP4230T came from my blind spot on the right and hit head-on into my right wheel chassis. My chassis suffered a dent and his motorbike also sustained some damage. The rider had no visible injuries but complained of leg pain. Traffic Police attended to us, and we agreed to privately settle the payments in their view. I am lodging this for record purposes.

**SINGAPORE
POLICE FORCE**

T/20201129/2022

3 of 3

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Bukit Merah East N.P.C
A 391 New Bridge Road Police Cantonment
Complex SINGAPORE 088762
Tel No: 1800-2369999

Report No. T/20201129/2022

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:

A /
Sgt 2 MICH KOH EN

Signature Of Informant:

Signature Of Interpreter:
Not applicableDate/Time:
29/11/2020 09:53

Officer In Charge Of Case:

TP / GIT /
Staff Sgt NUR ADELINA BINTE MOHAMMAD
FUAT
Contact No.: 65476066

Classification Of Case:

Authentication Stamp
NP168

Signature

Singapore Police Force