

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 11/12/2020 13:56 (SGT)
Date of Accident 08/12/2020 20:45 (SGT)
Exact Location of Accident Kerbau Rd, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBE6239P

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner DEBBIE DECOR INTERIOR
Company Reg No 5XXXX362M
Email Address TZLJACKIE96@GMAIL.COM
Mobile Phone No (Phone) +65-97211763
Alternative Phone No +65-97211763

VEHICLE PARTICULARS

Manufacturer Mercedes
Model Citan
Variant -
Exact purpose for which vehicle was being used at time of accident Employment
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Commercial vehicle

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DMCVSNW00074492001
Cover Note Number -

DRIVER

Name of Driver TAN ZHI LONG JACKIE
NRIC No SXXXX763C
Date Of Birth 26/06/1996
Occupation Outdoor

Date Of Driving Pass	18/06/2019
Driving experience	1 YEAR AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97211763
Alt. Phone Number	-
Email Address	TZLJACKIE96@GMAIL.COM
Address	504A YISHUN ST 51 #10-86
Address complement	-
Postcode	761504
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Friend
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
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	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT T/20201209/7033

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	GBE325M
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	-
Contact Number	-

Address -
Address complement -
Postcode -
Insurance Company Name -
Nature Of Damage -
Details of property damaged in accident -
No. Of Passenger (Including Driver) -

INJURED PERSONS DETAILS

INJURED 1

Name of injured person TAN ZHI LONG JACKIE
Address -
Address Complement -
Post Code -
Approximate Age Years Old -
Injuries Sustained BODY
Injured person in which vehicle? GBE6239P
Were seat belts worn? Yes
Was this injured conveyed to hospital by ambulance? No

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.

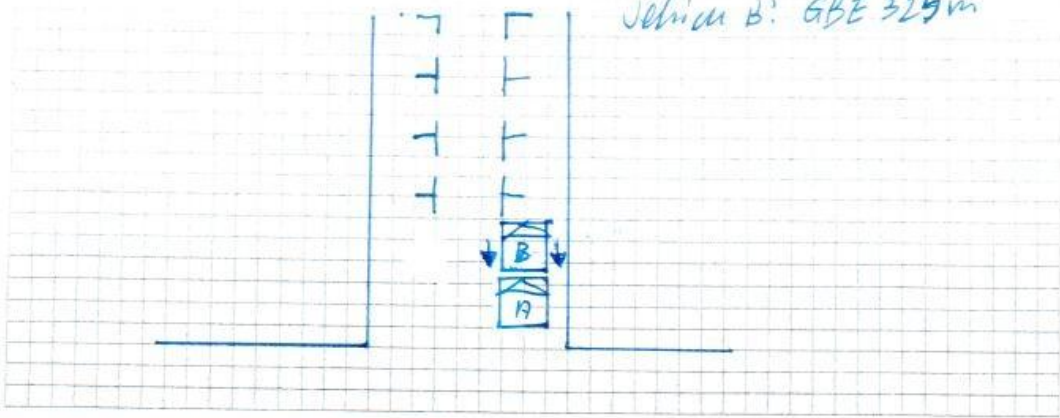
Debbie Decor Interior
 512 Sims Avenue
 Singapore 387572
 TEL: 67436656 FAX: 67486566
 Email: dennis6677@hotmail.com
 HDB Licence HB-08-2814B
 Co Reg. No.: 52823362M
 Policyholder's Signature
 Date & Time:

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

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

QUANGC-SKETCHPLAN-FB

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT


Refer to Police Report

DECLARATION

I/We, **Dennis Bloor Interior**, particulars are true in every respect.

512 Sims Avenue
Singapore 387572
TEL: 67436666 FAX: 67486566
Email: dennis6677@hotmail.com
HDB Licence HB-08-2814B
Car Reg No: 62823362M

Date & Time:


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


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

BSA/NIC, Serangoon, Page 1 of 2





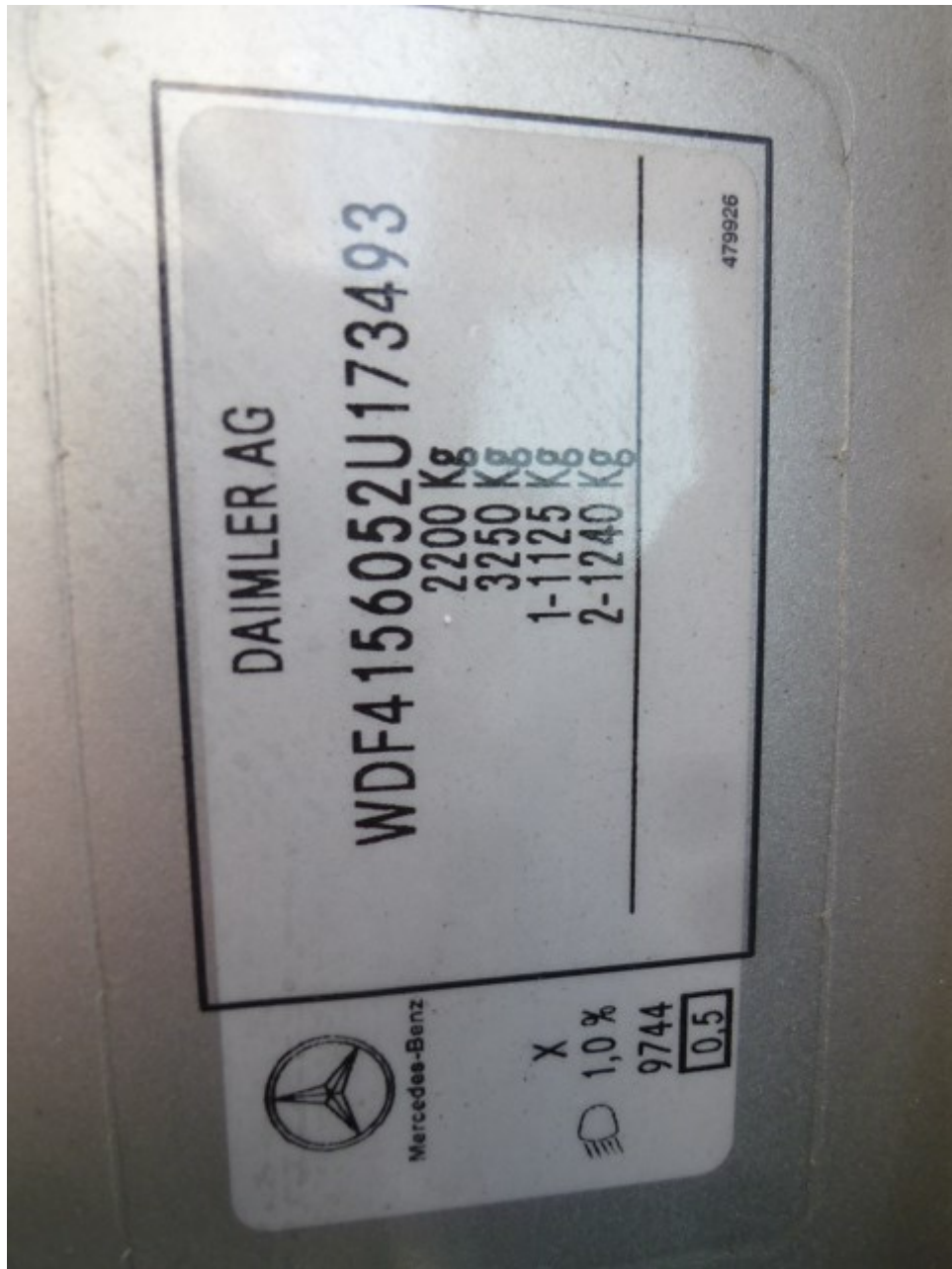














**SINGAPORE
POLICE FORCE**



T/20201209/7033

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No, T/20201209/7033

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 09/12/2020 18:37	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: TAN ZHI LONG, JACKIE			Address: 504A YISHUN STREET 51 #10-86 SINGAPORE 761504		
ID Type / ID No.: NRIC NO / S9621763C			Contact No.: Home/Office: Mobile: 97211763		
Nationality: SINGAPORE CITIZEN			Email: TZLJACKIE96@GMAIL.COM		
Sex: Male	Age: 24	Date of Birth: 26/06/1996	Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: CONSTRUCTION			Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 08/12/2020 20:45	Type of Location: Straight Road
Location: KERBAU ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		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	Conditio	No of
GBE325M	Lorry					0
GBE6239P	Van	MERCEDES BENZ	CITAN		Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



T/20201209/7033

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20201209/7033

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TAN ZHI LONG, JACKIE	ID No.	S9621763C
Related Vehicle	GBE6239P (Van)	Contact No.	97211763
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	09/12/2020	Date	09/12/2020
No. of Days granted Medical Leave	03	Degree of	Slight

Brief Details.

ON THE STATED DATE AND TIME. I , VEHICLE A (GBE6239P) WAS STATIONARY ON THE STATED VENUE. SUDDENLY VEHICLE B (GBE325M) REVERSE AND HIT ONTO MY STATIONARY VEHICLE FRONT PORTION.

I WISH TO STATE THAT THE IMPACT CAUSE MY NECK AND SHOULDER PAIN. I WENT TO SEE THE DOCTOR AND WAS GIVEN 3DAYS MC.

CLINIC : Intemedical 24 Hr Clinic



**SINGAPORE
POLICE FORCE**



T/20201209/7033

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20201209/7033

CONTINUATION OF REPORTSketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPHQ /
JUREMAH BINTE AHMAD
Contact No.: 65476219

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
09/12/2020 18:37

Classification Of Case: