# **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 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 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 18/12/2020 13:07 (SGT) Date of Accident 17/12/2020 19:50 (SGT) Exact Location of Accident PIE, Singapore Additional Location Information PIE TWDS TUAS B4 BALESTIER RD EXIT Country/State of Loss Singapore

## **DETAILS OF OWN VEHICLE**

Toyota

Private car

Vehicle Registration Number SLU27X

#### INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner CHUA YEW CHUAN RICHARD NRIC No. SXXXX072J Email Address cvc.rich@yahoo.com.sq Mobile Phone No (Phone) +65-81811688 Alternative Phone No +65-81811688

### VEHICLE PARTICULARS

Manufacturer

Model Harrier Variant 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 - Claiming third party Vehicle Category

## INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance Type of Coverage Comprehensive Fleet Policy Policy Number DMPCSNW00156262000 Cover Note Number

### DRIVER

Name of Driver CHUA YEW CHUAN RICHARD NRIC No SXXXX072J Date Of Birth 06/11/1990 Occupation Indoor



Date Of Driving Pass 28/04/2009 Driving experience 11 YEARS AND 8 MONTHS Gender Mobile Number (Phone) +65-81811688 Alt. Phone Number +65-81811688 Email Address cyc.rich@yahoo.com.sg Address 9 JALAN JELITA Address complement Postcode 278334 Is the driver the policyholder? Yes If No, Relationship of the Driver with the Insured 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 Chain Collision Weather Conditions Clear Road Surface Wet OTHER INFORMATION Was any foreign vehicle involved in the accident? No Number of vehicles involved in the accident Was anybody injured in the Accident? Yes Was any injured conveyed to hospital by ambulance? Was any other material or property damaged? Yes Number of Passengers (Including Driver) 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 **Tanglin Division Headquaters** Police Station Phone No (Phone) +65-18003910000 Alt. Police Station Phone No (Fax) +65-63964900 Police Station Address 21 Kampong Java Road Singapore 228892 Was notice of intended Prosecution given? No If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLS REFER TO THE POLICE REPORT: E/20201218/7004 ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? Yes Was there any audio recorded? No

## **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number	SMC4549M
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	_
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	_



Address		 	 
Address complement			<del>-</del>
Postcode			 <u>-</u>
Insurance Company Name			<u>-</u>
Nature Of Damage			
Details of property damaged	in accident		 <u>-</u>
No. Of Passenger (Including			

# DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMN8760J
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
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 Address	CHUA YEW CHUAN RICHARD
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	MONITORING
Injured person in which vehicle?	SLU27X
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

## SKETCH PLAN

## IMPORTANT NOTICE

- 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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 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.
- 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 aforesald.
- 8. Consent under the Personal Data Protection Act (PDPA)

Lunderstand, 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)
  - 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:
  - 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: Oriver's Signature (If driver is not the policyholder) Date & Time: Reporting Centre Personnel's Signature

Ayan 18/12/20

NRIC/FIN No.:

.0007 1890 0		before Boleother Rush Exit.
Vehicle	A	
	Lu 27×	
Vehicle	2	
- 5	MC 4549M -	7
Vehicle	C	
- 5	MN87607	Pusheo Poshigo P
ESCRIBE CIRCUMSTAN	ICES OF THE ACCIDENT	FORMBRU
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impact an info	m my webside and realize	d it was a webside
impact an identicle info	on my vehicle and realize	d it was a wehicle  M) that collided to the
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## POLICE REPORT (NP299)

Police Station Of Origin Tanglin Division HQ 21 Kampong Java Road SINGAPORE 228892 Tel No:1800-3910000 Report No. E/20201218/7004

Date/Time Report Made 18/12/2020 11:27	Vide Re	port No.		Station Diary No.
Name Of Informant CHUA YEW CHUAN, RICHARD ID Type / ID No. NRIC NO / S9042072J	Address 9 JALAI Contact Home/C	N JELITA S No.	INGAPORE 2783;	34
Nationality SINGAPORE CITIZEN	Email A		81811688 O.COM.SG	
Occupation Electrical engineer (general)	Sex Male	Age 30	Date of Birth 06/11/1990	Race Chinese
Institution/School Name  Date/Time Of Incident	Language English Location Of Incident			
17/12/2020 19:30 - 17/12/2020 19:40 Brief details.	PAN ISL	AND EXPE	RESSWAY	

I was driving along PIE toward Tuas direction. I was on the extreme right lane.

When driving ahead, the vehicle in front brake to a complete stop. So I too applied brake to a complete stop. After that, I felt a great impact from the rear of my vehicle. This impact pushed my car forward and it hit the vehicle in front of me.

I alighted from my vehicle and realized it was a vehicle with license plate (SMC 4549M) that collided to the rear of my vehicle. The vehicle in front of me was with license plate (SMN8760J).

Signature Of Officer Recording The Report:	Signature Of Informant:
Not applicable	The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 18/12/2020 11:27
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	





































## POLICE REPORT (NP299)

Police Station Of Origin Tanglin Division HQ 21 Kampong Java Road SINGAPORE 228892 Tel No:1800-3910000 Report No. E/20201218/7004

Date/Time Report Made 18/12/2020 11:27	Vide Re	eport No.		Station Diary No.
Name Of Informant  CHUA YEW CHUAN, RICHARD  ID Type / ID No.  NRIC NO / S9042072J	Contact	N JELITA S t No.	INGAPORE 2783:	34
Nationality SINGAPORE CITIZEN	Home/C	ddress	Mobile: 81811688	
Occupation Occupation	CYC.RI Sex		O.COM.SG	
Electrical engineer (general)	Male	Age 30	Date of Birth 06/11/1990	Race Chinese
Institution/School Name	Language English			12
Date/Time Of Incident 17/12/2020 19:30 - 17/12/2020 19:40	Location Of Incident PAN ISLAND EXPRESSWAY			
Brief details.	1. 711101	- NIVE EXP	COOWAI	

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Signature Of Officer Recording The Report:	Signature Of Informant:
Not applicable	The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 18/12/2020 11:27
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	





2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. E/20201218/7004

Suspect			
Person Name	LU YI		
ID Type	NRIC NO	ID No	S7878833Z
Gender	Male		0.0.0000
Person Name	CHEN JIA HAO		
ID Type	NRIC NO	ID No	S9076283D
Gender	Male		000702000
Victim			
Person Name	CHUA YEW CHUAN, RICHAR	RD.	
ID Type	NRIC NO	ID No	S9042072J
Gender	Male	Age	30
Race	Chinese	Language	English
Occupation	Electrical engineer (general)	Address	9 JALAN JELITA SINGAPORE 278334
Mobile No	81811688	Is Informant A Victim?	Yes

Signature Of Officer Recording The Report:	Signature Of Informant:
Not applicable	The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 18/12/2020 11:27
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	