

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 18/12/2020 16:21 (SGT)
Date of Accident 17/12/2020 09:20 (SGT)
Exact Location of Accident Hougang Ave 3, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number GBD3464E

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner BESMAR ENERGY PTE LTD
Company Reg No 2XXXXX293W
Email Address chongkokchoychoy@gmail.com
Mobile Phone No (Phone) +65-68423752
Alternative Phone No (Office) +65-68423752

VEHICLE PARTICULARS

Manufacturer Nissan
Model Cabstar
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 DMCVSNW00070522002
Cover Note Number -

DRIVER

Name of Driver CHONG KOK CHOY
NRIC No SXXXX024J
Date Of Birth 13/09/1969
Occupation Outdoor

Date Of Driving Pass	23/10/2002
Driving experience	18 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-83492202
Alt. Phone Number	-
Email Address	chongkokchoychoy@gmail.com
Address	BLK 16 TELOK BLANGAH CRESCENT
Address complement	#03-326
Postcode	090016
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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	Collision - Head to Rear
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?	Yes
Was any other material or property damaged?	Yes
Number of Passengers (Including Driver)	4
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	ISLAM MD RASEDUL
Gender	Male

PASSENGER 2

Name	-
Gender	Male

PASSENGER 3

Name	-
Gender	Male

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/20201217/2056.

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	GN5321J
Vehicle Manufacturer	Toyota
Vehicle Model	Dyna
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	ANG BOON PENG
NRIC No	SXXXX672A
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	ISLAM MD RASEDUL
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	BODY
Injured person in which vehicle?	GBD3464E
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	Yes

Refer to police report

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



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

Witnessed by Reporting Centre
Personnel





















**SINGAPORE
POLICE FORCE**



T/20201217/2056

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

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Report No. T/20201217/2056

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 17/12/2020 13:38	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: CHANG KOK CHOY	Address: APT BLK 16 TELOK BLANGAH CRESCENT #03-326 MOUNT FABER VIEW SINGAPORE 090016		
ID Type / ID No.: NRIC NO / S6968024J	Contact No.:	Mobile: 834922002	
Nationality: MALAYSIAN	Home/Office:	Email:	
Sex: Male	Age: 51	Date of Birth: 13/09/1969	Type of Informant: Driver
Race: Chinese	Language: English	Institution / School Name:	
Occupation: CONSTRUCTION WORKER	Driving Licence Information: Class:	Date of Expiry:	

General Information of the Accident

General Information of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 17/12/2020 09:20	Type of Location: Straight Road
Location: HOUGANG AVENUE 3				
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 On			Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBD3464E	Lorry	NISSAN	CABSTAR 3.0 5M/T ABS 2DR 2WD EURO 5	Silver		0
GN5321J	Lorry	TOYOTA	DYNA 150 5MT	Silver		0



**SINGAPORE
POLICE FORCE**



T/20201217/2056

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

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Report No. T/20201217/2056

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	CHANG KOK CHOY	ID No.	S6968024J
Related Vehicle	GBD3464E (Lorry)	Contact No.	83492200
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	Unknown Driver	ID No.	NIL
Related Vehicle	GN5321J (Lorry)	Contact No.	NIL
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 STATED DATE TIME AND LOCATION

ON 17/12/2020 AT ABOUT. 9:20 AM . I WAS BEARING A VEHICLE PLATE NUMBER (GBD3464E) AND THE OTHER PARTY WAS BEARING A VEHICLE PLATE NUMBER (GN5321J). I WAS TRAVELLING ALONG HOUGANG AVE 3 GOING TOWARDS AVE 2 AFTER BARTELY ROAD. AS I WAS IN THE SECOND LANE AFTER WHICH OUT OF THE SUDDEN A VEHICLE HIT ON TO MY REAR OF MY VEHICLE. TOTAL PASSANGER I HAVE WAS 2, ONE WAS INJURED AND WAS CONVEY BY THE AMBULANCE AND WAS SENT TO THE HOSPITAL.THEREFORE I AM MAKING A POLICE REPORT.



SINGAPORE
POLICE FORCE



T/20201217/2056

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Police Station Of Origin:
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Tel No: 65470000

Report No. T/20201217/2056

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:
TP /
SC MUHAMMAD SHAFFIY BIN ROSLAN

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
17/12/2020 13:38

Officer In Charge Of Case:
TP / GIT /
Staff Sgt TAN JUN YAN
Contact No.: 65476311

Classification Of Case:



SINGAPORE
POLICE FORCE

Authentication Stamp
NP168

Signature: