

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 22/01/2021 15:09 (SGT)
Date of Accident 21/01/2021 17:00 (SGT)
Exact Location of Accident AYE, Singapore
Additional Location Information BEFORE CLEMENTI ROAD EXIT
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKQ2858J

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner JASON TAN TOO KIANG (CHEN TUQIANG)
NRIC No SXXXX646Z
Email Address jasonttk@ymail.com
Mobile Phone No (Phone) +65-91397113
Alternative Phone No +65-91397113

VEHICLE PARTICULARS

Manufacturer Volkswagen
Model Touran
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 - Reporting only
Vehicle Category Private car

INSURANCE COMPANY

Name of Insurance Company United Overseas Insurance
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DHOM120047981901
Cover Note Number -

DRIVER

Name of Driver JASON TAN TOO KIANG (CHEN TUQIANG)
NRIC No SXXXX646Z
Date Of Birth 18/12/1976
Occupation Indoor

Date Of Driving Pass	15/11/1995
Driving experience	25 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91397113
Alt. Phone Number	+65-91397113
Email Address	jasonntk@ymail.com
Address	BLK 184 DEPOT ROAD
Address complement	#17-10
Postcode	109686
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	Raining
Road Surface	Wet

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

I WAS DRIVING ALONG AYE NEAR CLEMENTI EXIT TOWARDS JURONG WHEN SUDDENLY THE CAR IN FRONT OF ME JAMMED BRAKE (SLJ2352B). I IMMEDIATELY STEPPED ON THE BRAKE AND MANAGE TO STOP MY CAR ON TIME AND DID NOT HIT THE CAR IN FRONT. I HAD ABOUT HALF A METRE SPACING. WITHIN A SPLIT SECOND , I SAW IN MY BACK VIEW A SILVER CAB COMING TOWARDS MY CAR AND I FELT A CRASH ON MY BACK AND MY CAR SURGED FORWARDS AND HIT THE CAR IN FRONT. THE SILVER CAB (SHB8659S) WAS VERY FAST AND FAILED TO STOP IN TIME AND CRASH INTO MY BACK, THE IMPACT SENT MY CAR FORWARD AND BUMPED THE CAR IN FRONT OF MY CAR. ALL 3 DRIVERS CAME OUT AND ACKNOWLEDGED THAT THE SILVER CAB (SHB8659S) WAS THE PARTY AT FAULT FOR CRASHING INTO MY CAR, THEREFORE CAUSING MY CAR TO SUBSEQUENTLY HIT THE CAR IN FRONT OF ME (SLJ2352B). DRIVER OF (SLJ2352B) ALSO CONFIRM THAT MY CAR DID NOT HIT HERS UNTIL THE SILVER CAB CRASHED INTO ME AND SENT MY CAR FORWARD INTO HERS.

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	SHB8659S
Vehicle Manufacturer	Kia
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	DAUD BIN BAHAROM
NRIC No	SXXXX243G
Contact Number	(Phone) +65-83997974
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-




DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLJ2352B
Vehicle Manufacturer	Mazda
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	LEE LAY KUAN
NRIC No	SXXXX772I
Contact Number	(Phone) +65-96633430
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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 willful 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. 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.
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.
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.

Policyholder's Signature / Date & Time  22/1/21 10:51 AM	Driver's Signature (if driver is not the policyholder) / Date & Time  22/01/2021	Witnessed by Reporting Centre Personnel  TO JARDON
<p>Sketch Plan</p> <p>W A) SKR 2858J →</p> <p>B) SHB 8859S →</p> <p>N C) SCS 2352B →</p> <p>PIC →</p> <p>B A C</p>		




Describe Circumstances of the Accident

I was driving along A18 near Clonsilla road exit towards Juvring when suddenly the car in front of me jammed break (SLT 23528). I immediately stepped on the break and managed to stop my car in time and did not hit the car in front. I had about half a metre spacing. Within a split second, I saw in my back view mirror a silver cab coming towards my car and I felt a ~~small~~ crash on my back and my car surged forward and hit the car in front. The ~~impact~~ silver cab (SHB 86595) was very fast and failed to stop in time and crashed into my back, ~~causing~~ the impact sent my car forward and bumped the car in front of my car.

All 3 drivers came out and acknowledged that the silver cab (SHB 86595) was the party at fault for crashing into my car, therefore causing my car to subsequently hit the car in front of me (SLT 23528). Driver of (SLT 23528) also confirm that ~~before~~ my car did not hit hers until the silver cab crashed into me and sent my car forward into hers.

Declaration

We declare the foregoing particulars are true in every respect.

 Policyholder's Signature / Date & Time 22/11/21 10:57 am	 Driver's Signature (if driver is not the policyholder) / Date & Time 22/11/2021	 Witnessed by Reporting Centre Personnel
--	--	---



























