

# 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	25/01/2021 16:15 (SGT)
Date of Accident	23/01/2021 11:40 (SGT)
Exact Location of Accident	Yuan Ching Rd, Singapore
Additional Location Information	YUAN CHING ROAD
Country/State of Loss	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHA4914L
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### INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Company Reg No	1XXXXX821R
Email Address	fleetsafety@cdgtaxi.com.sg
Mobile Phone No	(Phone) +65-65508768
Alternative Phone No	(Office) +65-65508768

### VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	I40
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 - Claiming third party
Vehicle Category	Taxi

### INSURANCE COMPANY

Name of Insurance Company	Axa
Type of Coverage	ThirdPartyFireTheft
Fleet Policy	Yes
Policy Number	VFX/P2419138
Cover Note Number	-

### DRIVER

Name of Driver	TAN HOCK KEE
NRIC No	SXXXX105E
Date Of Birth	10/06/1951
Occupation	Outdoor

Date Of Driving Pass	19/06/1970
Driving experience	50 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91770669
Alt. Phone Number	-
Email Address	fleetsafety@cdgtaxi.com.sg
Address	210 #08-1616 ANG MO KIO AVENUE 3
Address complement	-
Postcode	560210
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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 - Major/Minor Rd
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)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

#### PASSENGER 1

Name	-
Gender	Male

#### PASSENGER 2

Name	-
Gender	Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Ang Mo Kio South Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004519999
Alt. Police Station Phone No	(Fax) +65-65535679
Police Station Address	81 Ang Mo Kio Ave 3 Singapore 569929
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

see attach

#### 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	SLZ4192Z
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	CHAI MENG FEI
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	moderate
Details of property damaged in accident	frt
No. Of Passenger (Including Driver)	-

#### INJURED PERSONS DETAILS

##### INJURED 1

Name of injured person	TAN HOCK KEE
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	neck
Injured person in which vehicle?	SHA4914L
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No



# SINGAPORE POLICE FORCE



T/20210124/2028

Police Station Of Origin:  
Ang Mo Kio South N.P.C  
81 Ang Mo Kio Avenue 3 SINGAPORE  
569929  
Tel No: 1800-4519999

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Report No. T/20210124/2028

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 24/01/2021 13:29		Vide Report No.:		Station Diary No.: 63	
<b>Informant's Particulars</b>					
Name of Informant: TAN HOCK KEE			Address: APT BLK 210 ANG MO KIO AVENUE 3 #08-1616 SINGAPORE 560210		
ID Type / ID No.: NRIC NO / S0200105E			Contact No.: Home/Office: Mobile: 91770669		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 69	Date of Birth: 10/06/1951	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Taxi driver			Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 23/01/2021 11:40	Type of Location: drop off point
Location:  YUAN CHING ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHA4914L	Car	HYUNDAI		Blue	Slightly Damaged	1
SLZ4192Z	Car	MITSUBISHI		Blue	Slightly Damaged	0

<b>Details of Person Involved</b>	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE  
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Report No. T/20210124/2028

**CONTINUATION OF REPORT**

<b>Passenger</b>			
Name	Low Him Seng	ID No.	NIL
Related Vehicle	SHA4914L (Car)	Contact No.	87510458
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
<b>Driver</b>			
Name	TAN HOCK KEE	ID No.	S0200105E
Related Vehicle	SHA4914L (Car)	Contact No.	91770669
Hospital/Clinic	Clarion Medical	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	24/01/2021	Date Discharge	24/01/2021
No. of Days granted Medical Leave	03	Degree of Injury	Slight
<b>Driver</b>			
Name	Chai Meng Fei	ID No.	S7871169H
Related Vehicle	SLZ4192Z (Car)	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.**

I am the driver of Comfort SHA4914L.

On 23/11/2021, at about 1140hrs, I was fetching a passenger to Jurong Lake Garden, information counter.

I then travelled on Chinese Garden Road, and enter the round-about that was in front of the drop-off point at the information counter. As I was driving pass the exit of the carpark, a car (SLZ4192Z) just drove out of the car and hit onto my taxi. The right front bumper of the car had hit onto the left front bumper of my taxi.

I then exited the taxi and made a check. The car driver said there was a big tree that was blocking his



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T/20210124/2028

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Report No. T/20210124/2028

**CONTINUATION OF REPORT**

view when he was exiting the carpark, and did not saw my taxi approaching.

As there is no one injured at scene, we then exchanged particulars, took photo of the vehicles damage and drove off.

I later went to see a doctor for pain at my neck area and was given 3 days MC.

I have in-car camera but did not capture how the accident happened.



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T/20210124/2028

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Report No. T/20210124/2028

**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:

F /

Sr Staff Sgt CHNG LI QUAN

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

24/01/2021 13:29

Officer In Charge Of Case:

TP / AEIT /

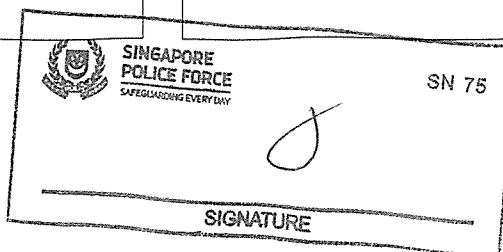
Staff Sgt WONG SIEU LUI

Contact No.: 65476151

Classification Of Case:

Authentication Stamp

NP168



## SKETCH PLAN

### IMPORTANT NOTICE


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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 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 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.
- (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.

COMFORT TRANSPORTATION PTE LTD  
CO. REG. NO. 199303821R

Policyholder's Signature  
Date & Time:

  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time: 25.01.2021  
@ 13:45 hrs

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

Regina



A - SHA 4914L  
B - SLZ 4192Z

Along Yuan Ching Road

Along Yuan Ching Road

[illegible]

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

## Regina