

# 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 ..... 15/02/2021 15:59 (SGT)  
Date of Accident ..... 12/02/2021 17:00 (SGT)  
Exact Location of Accident ..... Mandai Rd & Upper Thomson Rd, Singapore  
Additional Location Information ..... -  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SKA287D

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... TAN BOO YONG  
NRIC No ..... S1274643A  
Email Address ..... ADWINTAY@YAHOO.COM.SG  
Mobile Phone No ..... (Phone) +65-91085146  
Alternative Phone No ..... (Home) +65-90110109

### VEHICLE PARTICULARS

Manufacturer ..... Ford  
Model ..... Focus  
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 ..... Private car

### INSURANCE COMPANY

Name of Insurance Company ..... Axa  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... VPA/P2393922  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... ADWIN TAY CHUNG YANG  
NRIC No ..... S7839721G  
Date Of Birth ..... 21/12/1978  
Occupation ..... Indoor

Date Of Driving Pass .....	01/10/2001
Driving experience .....	19 YEARS AND 4 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-90110109
Alt. Phone Number .....	-
Email Address .....	ADWINTAY@YAHOO.COM.SG
Address .....	91A TELOK BLANGAH STREET 31 #27-203
Address complement .....	-
Postcode .....	101091
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Child
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 .....	5
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) .....	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	Yes

#### PASSENGER 1

Name .....	TAN SI YING
Gender .....	Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Telok Blangah Neighbourhood Police Post
Police Station Phone No .....	(Phone) +65-18002729999
Alt. Police Station Phone No .....	(Fax) +65-63776526
Police Station Address .....	Blk 51 Telok Blangah Drive #01-116/ 118 Singapore 100051
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO ACCIDENT STATEMENT

#### 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 .....	SLE747K
Vehicle Manufacturer .....	Mercedes
Vehicle Model .....	Cla200
Vehicle Variant .....	-

Vehicle Colour .....	Red
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) .....	-

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number .....	SLG7108Z
Vehicle Manufacturer .....	Honda
Vehicle Model .....	Vezel
Vehicle Variant .....	-
Vehicle Colour .....	White
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) .....	-

#### DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number .....	SMX3364A
Vehicle Manufacturer .....	Volkswagen
Vehicle Model .....	Golf
Vehicle Variant .....	-
Vehicle Colour .....	White
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) .....	-

#### DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number .....	SLZ3212G
Vehicle Manufacturer .....	Toyota
Vehicle Model .....	Wish
Vehicle Variant .....	-
Vehicle Colour .....	White
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) .....	-

## Describe Circumstances of the Accident


I was travelling from Jurong West to Punggol on the 12<sup>th</sup> of February 2021 via BKE → SLE → TPE. At around 1700hrs, <sup>while travelling</sup> along SLE (between Mandai Road and <sup>exit</sup> Upper Thomson Road exit) on the extreme right lane, the vehicle in front of me (white Honda Vezel SL6 7108Z) suddenly jammed his brakes. I also applied emergency brake immediately to avoid collision. Suddenly the vehicle behind me (Light Grey Volkswagen Golf GTI SMX 3364A) could not stop in time and hit my rear. Shortly a second thud could be heard ~~and~~, presumably from the vehicle behind the Volkswagen hitting into him.

I alighted my vehicle and approached the vehicle in front of mine to check if him and his passengers were okay. The airbags of his vehicle was deployed and family in a state of shock, otherwise there were no injuries. I proceeded to exchange particulars with the driver of the vehicle in front and behind of me, take photos of the accident scene and vehicles involved. Shortly, SCDF arrived on the scene followed by Traffic Police and then EMAS.

## Declaration

We declare the foregoing particulars are true in every respect.

  
 15/02/21 1520hrs  
 Policyholder's Signature / Date & Time

  
 15<sup>th</sup> Feb 2021 1512hrs  
 Driver's Signature (If driver is not the policyholder) / Date & Time

  
 CHUA SYASYA  
 CUSTOMER SERVICE ADVISOR  
 ACCIDENT & BODYSHOP  
  
 Witnessed by Reporting Centre Personnel

**SKETCH PLAN****IMPORTANT NOTICE**

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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.

*Jan*  
15/02/21 1450h  
Policyholder's Signature / Date & Time

*A*  
15th Feb 2021 1447h  
Driver's Signature (if driver is not the policyholder) / Date & Time

*[Signature]*  
CHUA SYASYA  
CUSTOMER SERVICE ADVISOR  
ACCIDENT & BODYSHOP  
WITNESSED BY REPORTING CENTRE PERSONNEL

**Sketch Plan**

Sketch Plan		Lane 1	
		E	A: SKA287D
		D	B: SLZ3212G
		A	C: SMX3364A
		C	D: SLG7108Z
		B	E: SLE747K
SLE			





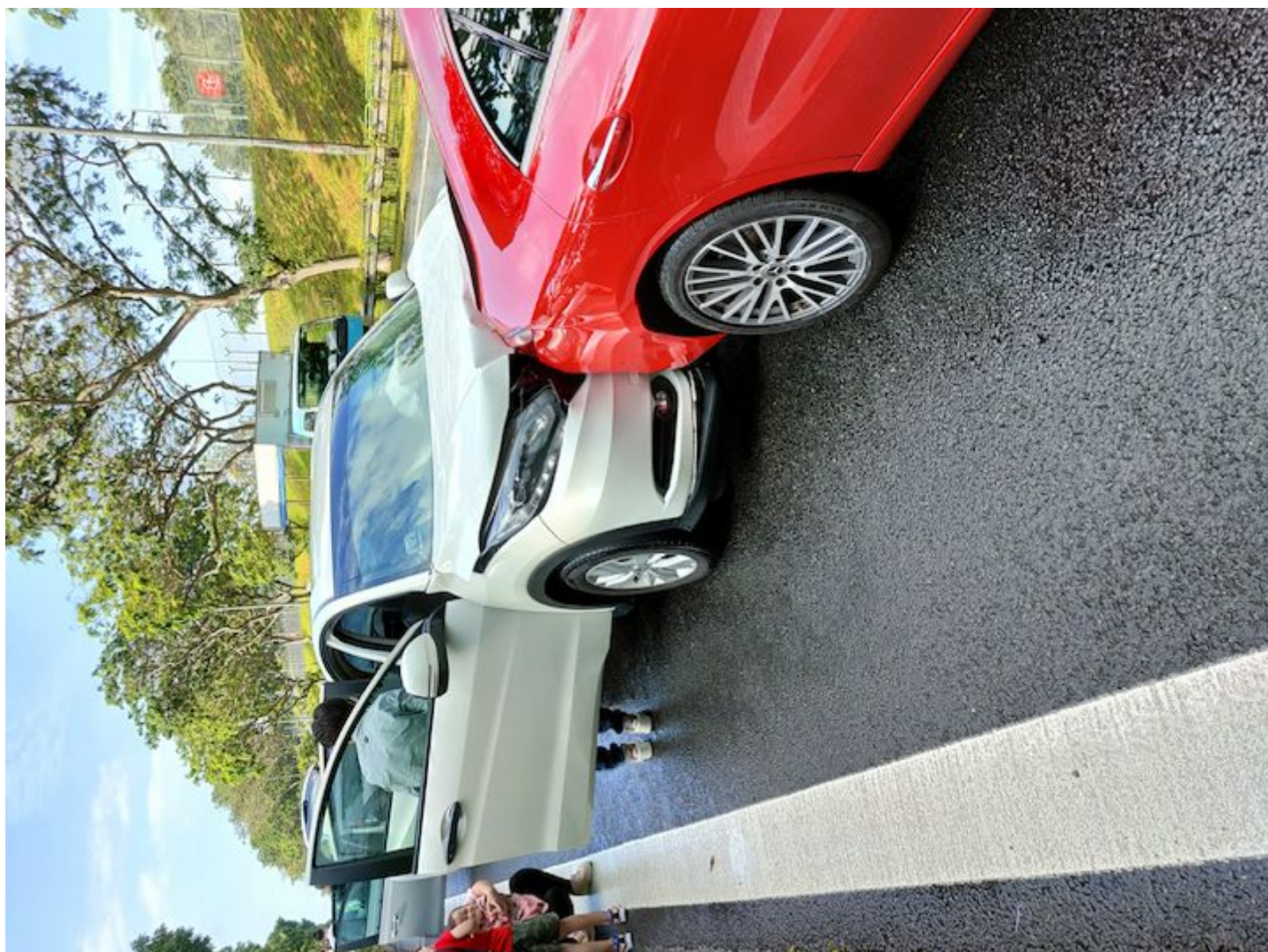




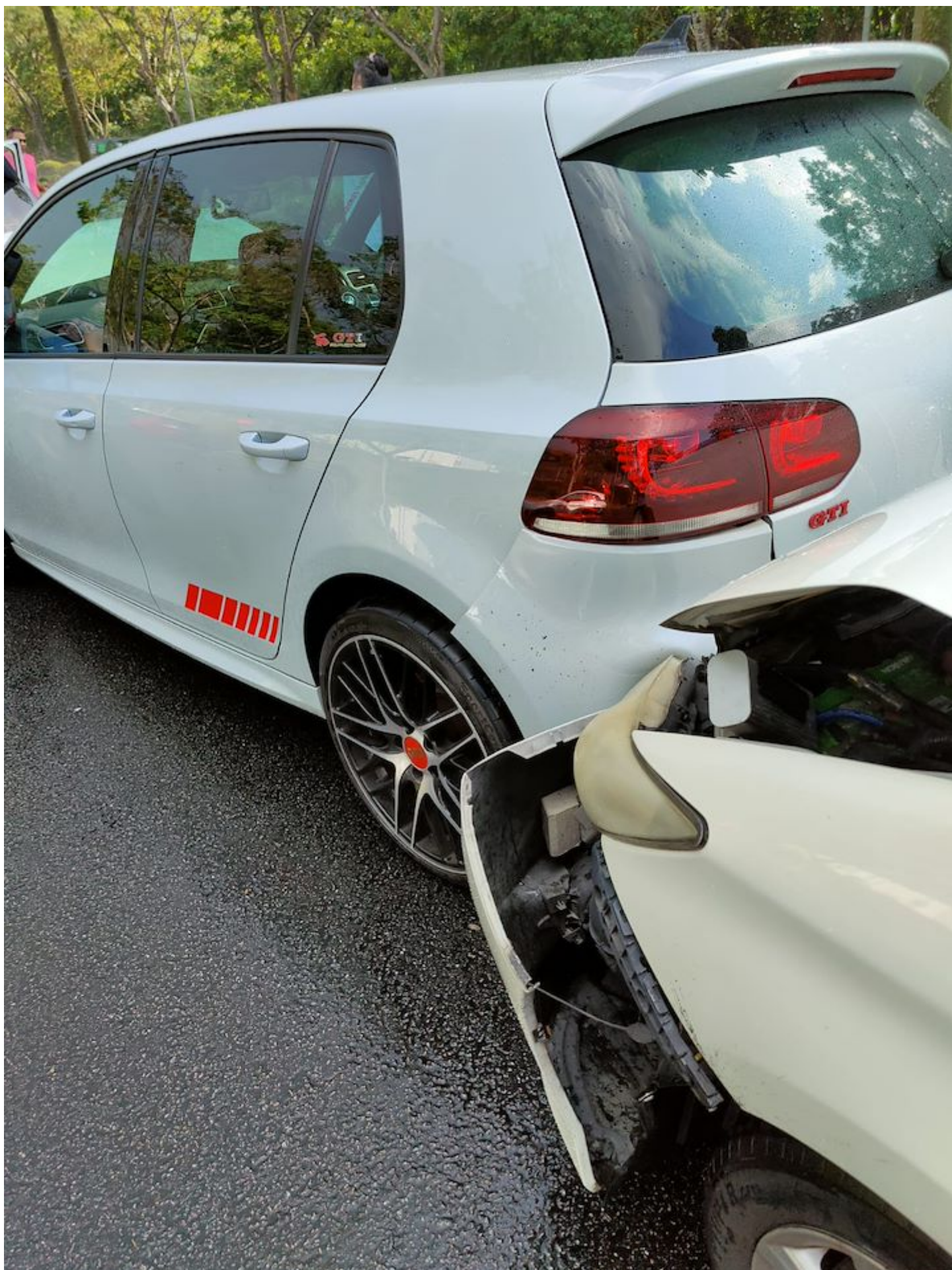








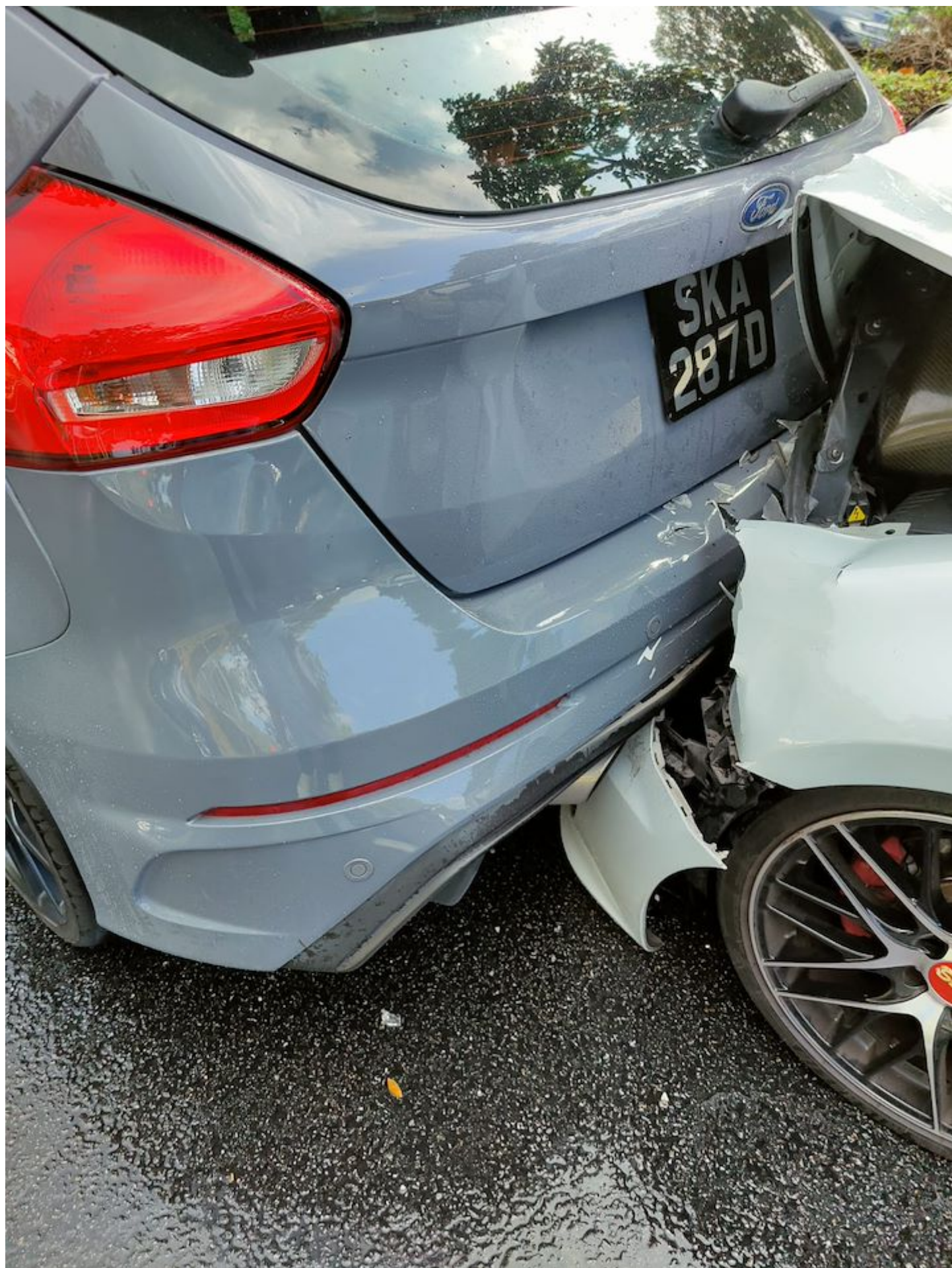












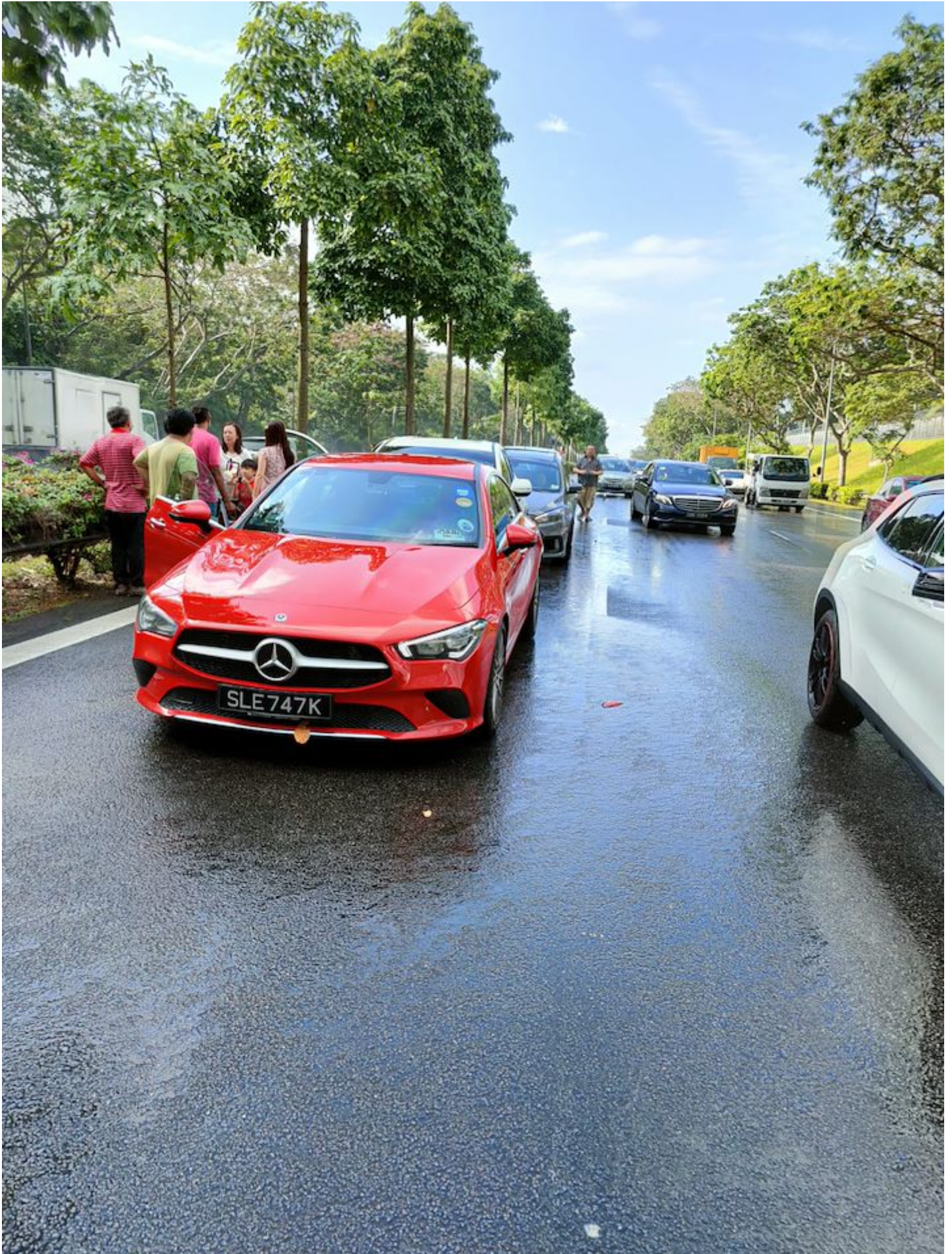












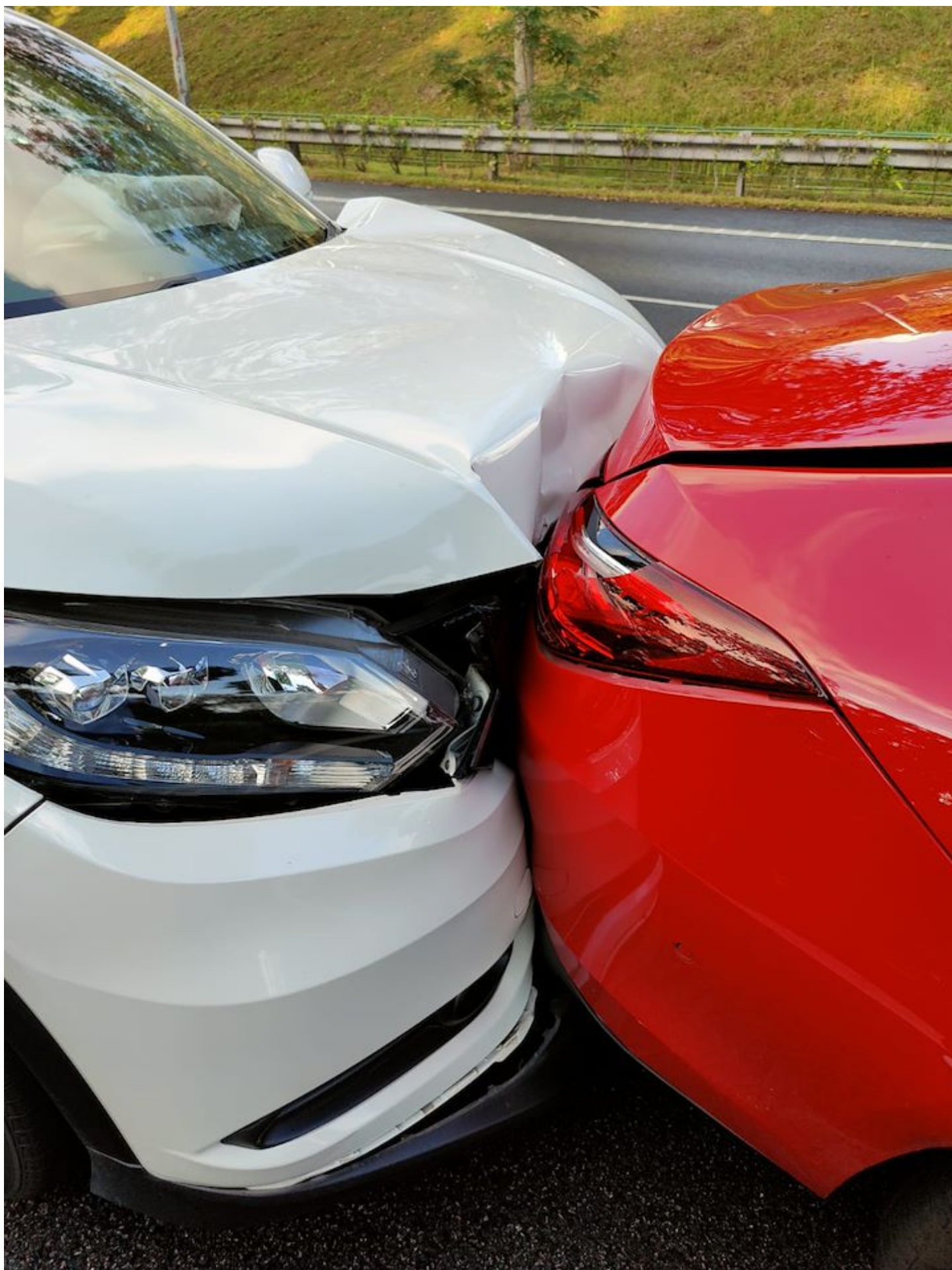








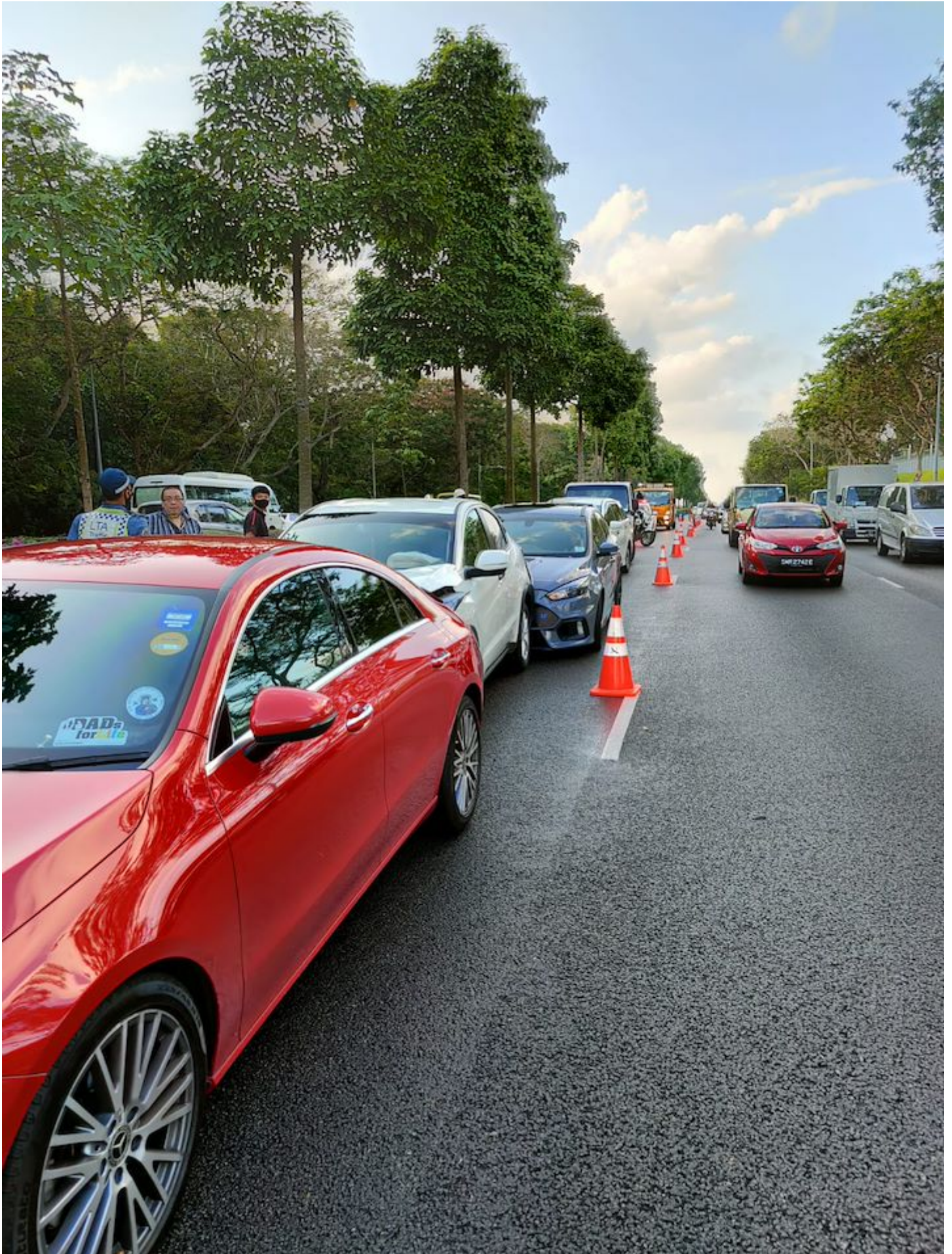




















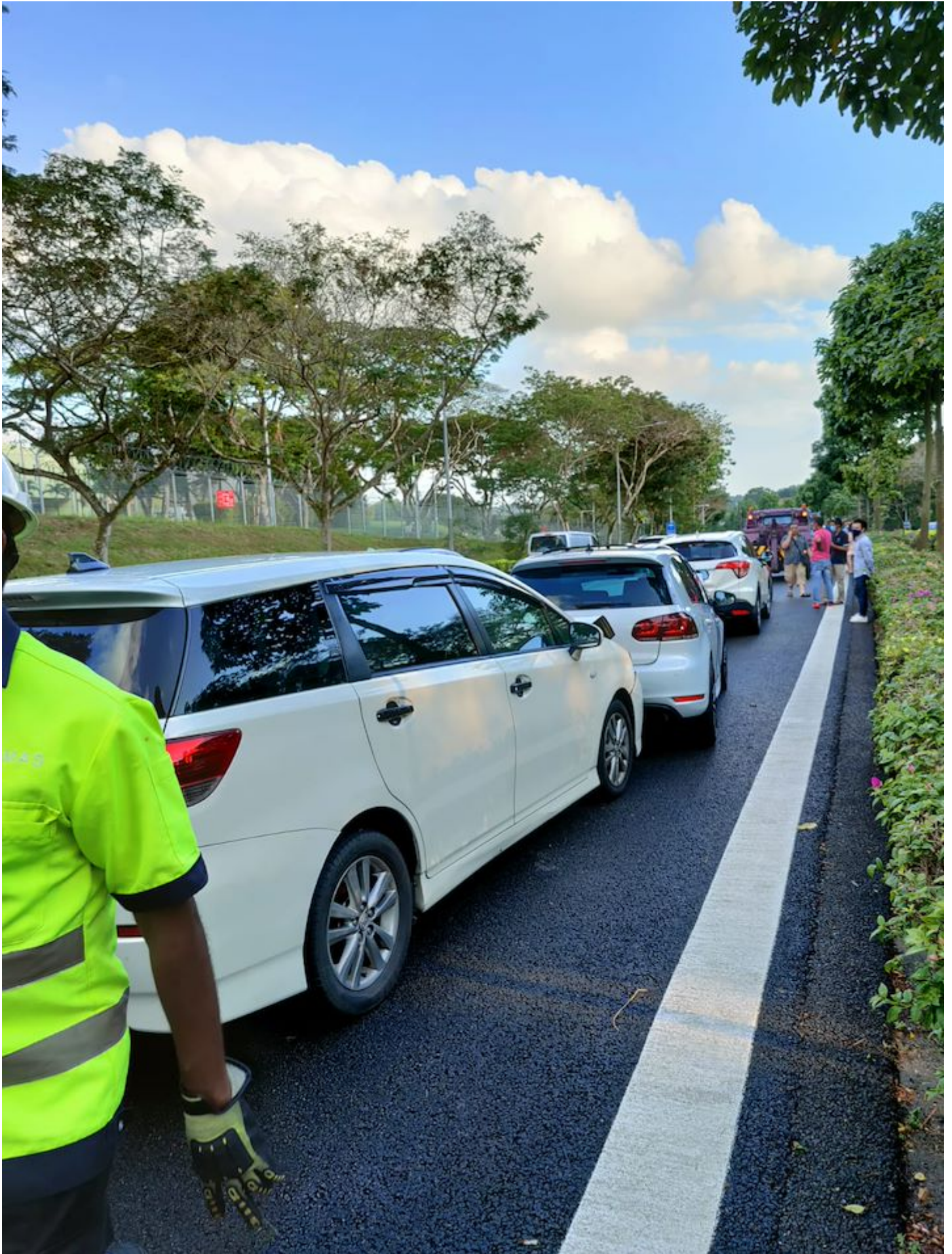




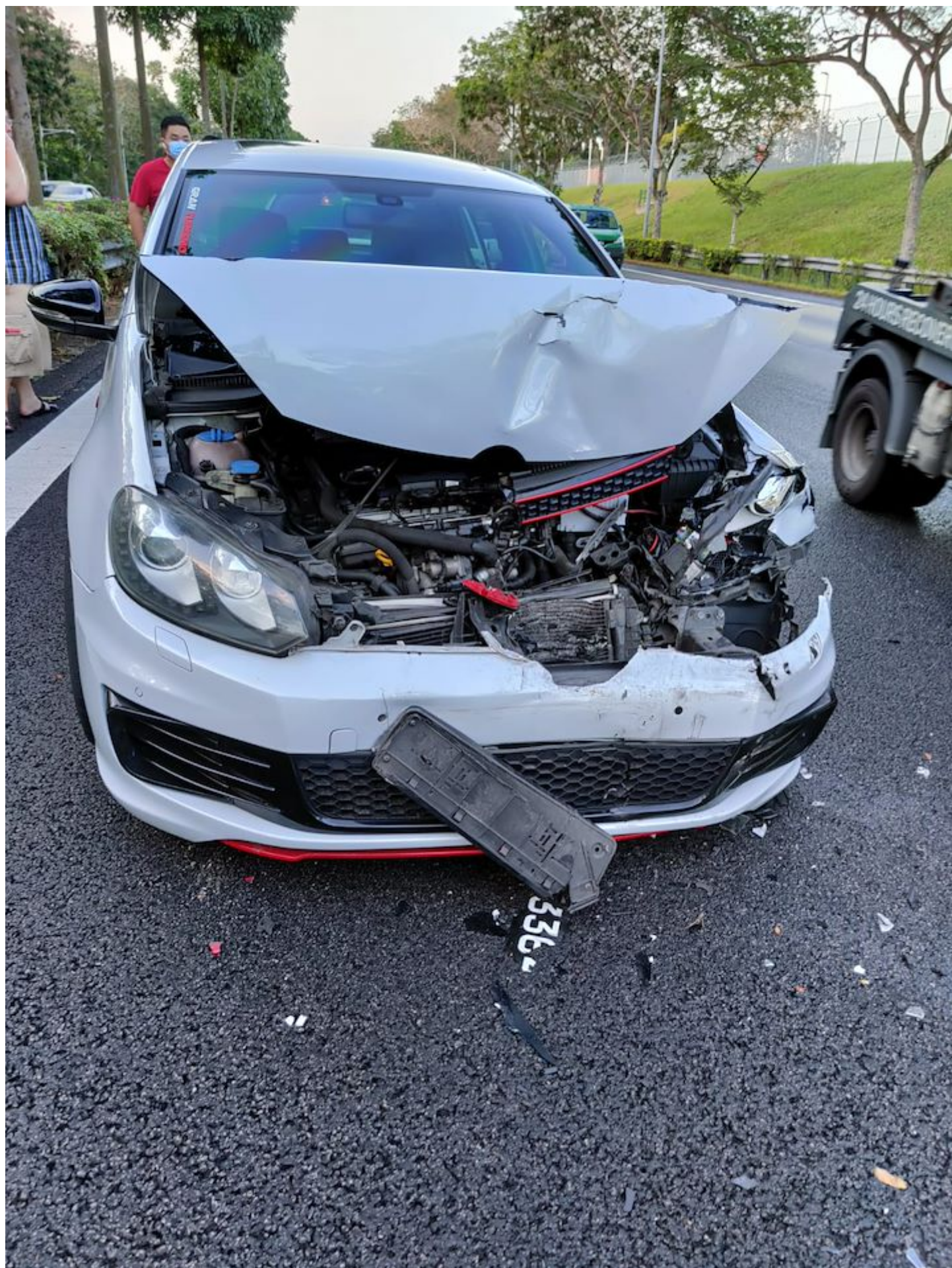




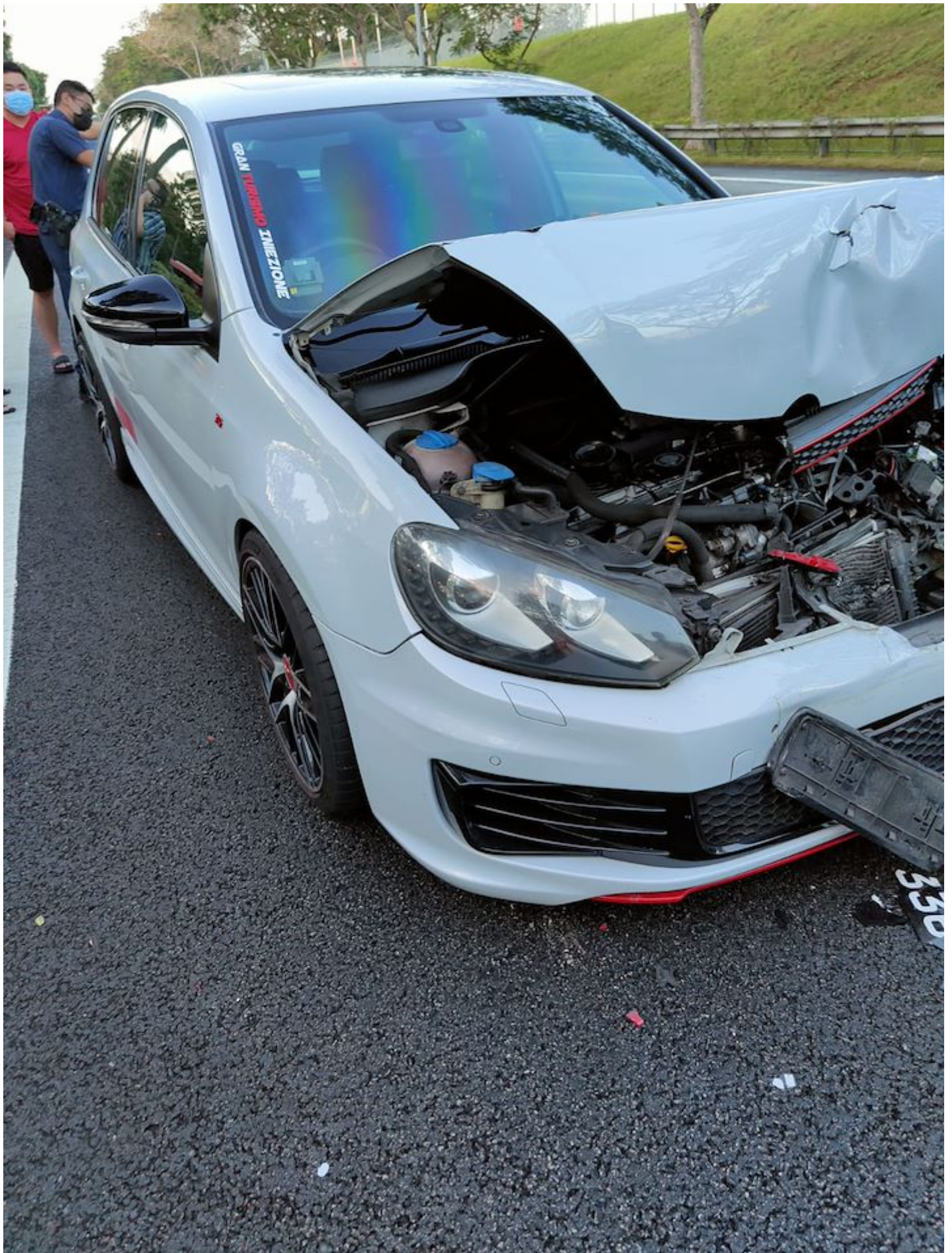




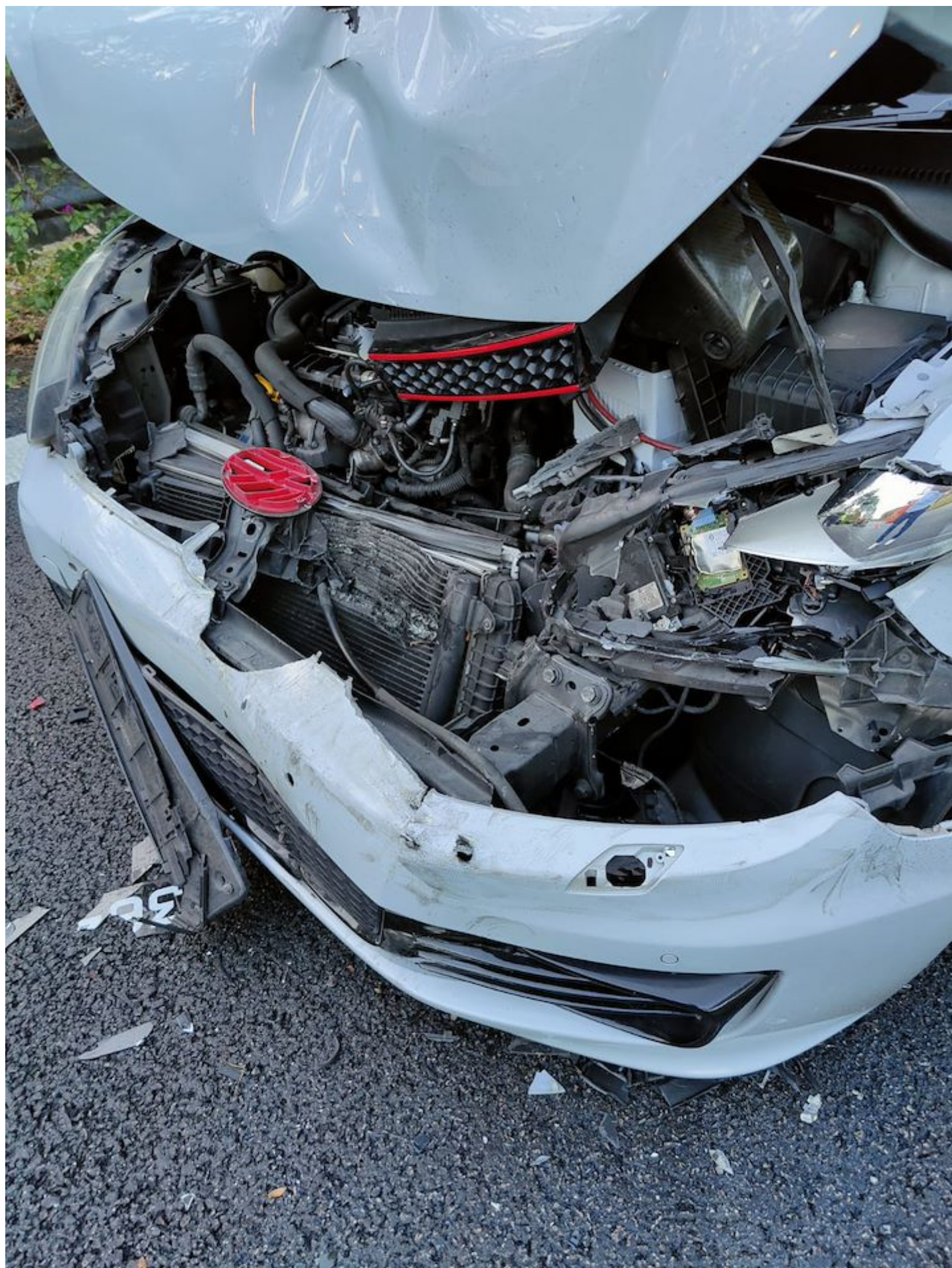
























**SINGAPORE  
POLICE FORCE**



T/20210213/2034

Police Station Of Origin:  
Telok Blangah NPP  
51 Telok Blangah Drive #01-116  
SINGAPORE 100055  
Tel No: 1800-2729999

3 of 3

Report No. T/20210213/2034

**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:  
D /  
Staff Sgt MUHAMMAD RASIDI BIN NGAH

Signature Of Informant:

Signature Of Interpreter:  
Not applicable

Date/Time:  
13/02/2021 14:02

Officer In Charge Of Case:  
TP / GIT /  
Sgt 3 MARIAH BINTE ZAKARIA  
Contact No.: 65476433

Classification Of Case:

Authentication Stamp  
NP168



Signature:

Singapore Police Force

SN 045