

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 02/03/2021 18:03 (SGT)
Date of Accident 01/03/2021 09:30 (SGT)
Exact Location of Accident Moulmein Rd, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJS3911H

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner K&T CARS
Company Reg No 5XXXX965X
Email Address KNTCARS@GMAIL.COM
Mobile Phone No (Phone) +65-97616348
Alternative Phone No +65-97616348

VEHICLE PARTICULARS

Manufacturer Toyota
Model Corolla
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 - Reporting only
Vehicle Category Private hire

INSURANCE COMPANY

Name of Insurance Company NTUC
Type of Coverage ThirdParty
Fleet Policy No
Policy Number 5115334752-01
Cover Note Number -

DRIVER

Name of Driver TAN CHOO LYE
NRIC No SXXXX230I
Date Of Birth 14/06/1959
Occupation Outdoor

Date Of Driving Pass	13/11/1979
Driving experience	41 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97616348
Alt. Phone Number	-
Email Address	KNTCARS@GMAIL.COM
Address	BLK 540 HOUGANG AVE 8 #06-1233
Address complement	-
Postcode	530540
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 - Change/cross lane
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?	No
Was any injured conveyed to hospital by ambulance?	-
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	TAN LEK SHENG
Gender	Male

PASSENGER 2

Name	LIM SUAT KENG
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Geylang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18008486999
Alt. Police Station Phone No	(Fax) +65-68486799
Police Station Address	1 Cassia Link Singapore 397618
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

refer to police report T/20210301/2152

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	SHA7875X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	SOH MENG CHYE
NRIC No	SXXXX059H
Contact Number	(Phone) +65-97979917
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

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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.

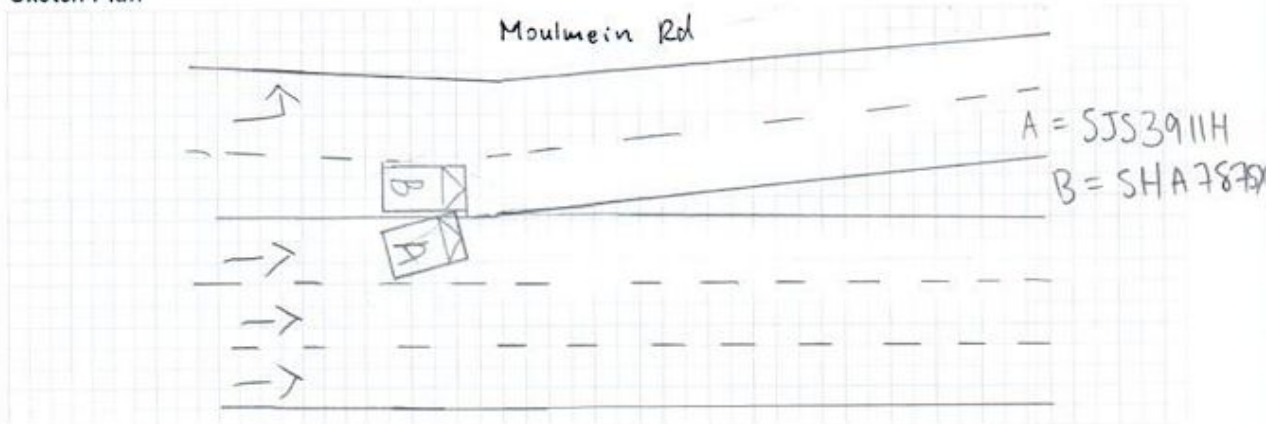


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Refer to Police report (Report No. T/20210301/2152)

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date &
Time

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

A handwritten signature, possibly reading "H. A.", written in dark ink at the bottom center of the page.

Witnessed by Reporting Centre
Personnel

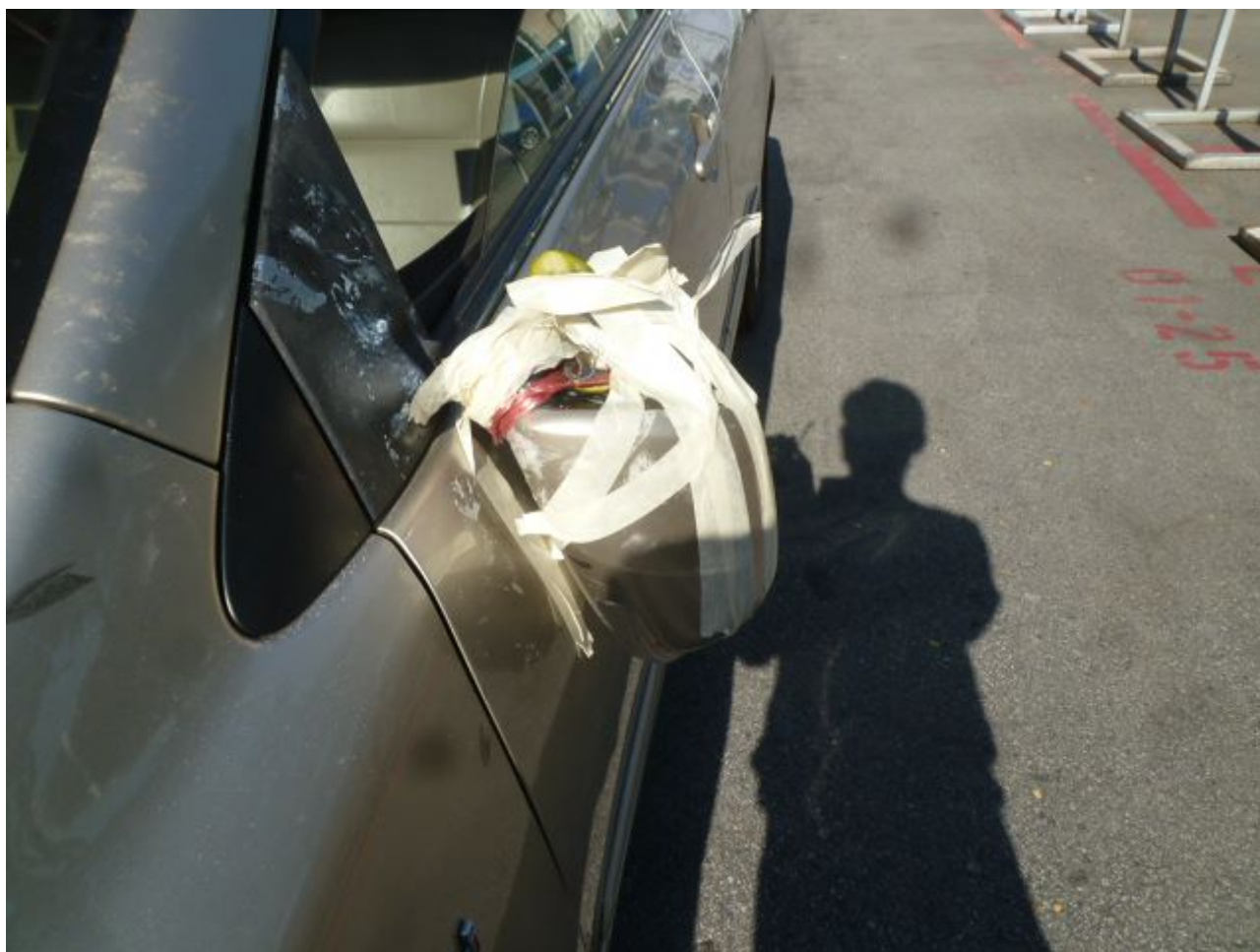




















**SINGAPORE
POLICE FORCE**



T/20210301/2152

Police Station Of Origin:
Geylang N.P.C
1 Cassia Link SINGAPORE 397618
Tel No: 1800-8486999

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Report No. T/20210301/2152

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 01/03/2021 23:04	Vide Report No.:	Station Diary No.: 109
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Informant's Particulars

Name of Informant: TAN CHOO LYE			Address: APT BLK 540 HOUGANG AVENUE 8 #06-1233 SINGAPORE 530540		
ID Type / ID No.: NRIC NO / S1354230I			Contact No.: Home/Office: Mobile: 97616348		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 61	Date of Birth: 14/06/1959	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Retiree			Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 01/03/2021 09:30	Type of Location: Bend
Location: MOULMEIN ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		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
SHA7875X	Taxi				Slightly Damaged	1
SJS3911H	Car				Slightly Damaged	3

Details of Person Involved

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20210301/2152

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Police Station Of Origin:
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Report No. T/20210301/2152

CONTINUATION OF REPORT

Driver			
Name	TAN CHOO LYE		ID No. S1354230I
Related Vehicle	NIL		Contact No. 97616348
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	SOH MENG CHYE		ID No. S7401059H
Related Vehicle	NIL		Contact No. 97979917
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 the above-mentioned date and time, I was driving my vehicle (SJS3911H) along Moulmein Rd. I wanted to filter into CTE/SLE. However, I did not realize that there was a blue Comfort taxi (SHA7875X) on my left. I was unable to stop in time and brushed the right side of the said taxi and caused scratches and the right mirror to flip.

We exchanged particulars and the taxi driver immediately drove off. I went down to Comfort Delgro to try and get the taxi driver's contact number. But he refused to give me and gave me the accident report officer's contact number (Roger:62148406) instead. I called many times, but nobody answered.

That's when my son and I went to his unit to get his number and make a personal settlement. He wasn't home and his son gave us his father's number. We called him at 1350hrs and initially said that he would think about it. But, when we called him again at 1432hrs he said that he could not do a personal settlement as he claims that his 3 passengers were injured.

As far as I recall, I only saw 1 passenger in the vehicle. The damage to his taxi was also very minor. I believe that he might make a false report against me.



**SINGAPORE
POLICE FORCE**

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Geylang N.P.C
1 Cassia Link SINGAPORE 397618
Tel No: 1800-8486999



T/20210301/2152

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Report No. T/20210301/2152

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:

G /
Staff Sgt MOHAMMED FARHAN BIN
SAMSUDIN

Signature Of Informant:

Signature Of Interpreter:
Not applicableDate/Time:
01/03/2021 23:04Officer In Charge Of Case:
TP / GIA /
Staff Sgt WONG SIEU LUI
Contact No.: 65476151

Classification Of Case:

Authentication Stamp
NP168

