

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 23/03/2021 17:32 (SGT)
Date of Accident 22/03/2021 18:50 (SGT)
Exact Location of Accident Parsi Rd, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJT2916X

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner KHOO SIEW CHIN
NRIC No SXXXX872I
Email Address ALANPOH96@HOTMAIL.COM
Mobile Phone No (Phone) +65-96860623
Alternative Phone No +65-97478593

VEHICLE PARTICULARS

Manufacturer Volkswagen
Model Golf
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 - Claiming third party
Vehicle Category Private car
Transmission Auto
CC 1400

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 5119158972
Cover Note Number -

DRIVER

Name of Driver ALAN POH CHENG FA
NRIC No SXXXX471G

Date Of Birth	27/04/1996
Occupation	Indoor
Date Of Driving Pass	22/09/2016
Driving experience	4 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96860623
Alt. Phone Number	-
Email Address	ALANPOH96@HOTMAIL.COM
Address	BLK 250 BANGKIT RD #07-364
Address complement	-
Postcode	670250
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	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?	Yes
Was any injured conveyed to hospital by ambulance?	No
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?	No

PASSENGER 1

Name	LYNETTE YEO LI SA
Gender	Female

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/20210323/7000

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	WITH DRIVER
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	PC1882J
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Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Bus
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)	-

INJURED PERSONS DETAILS

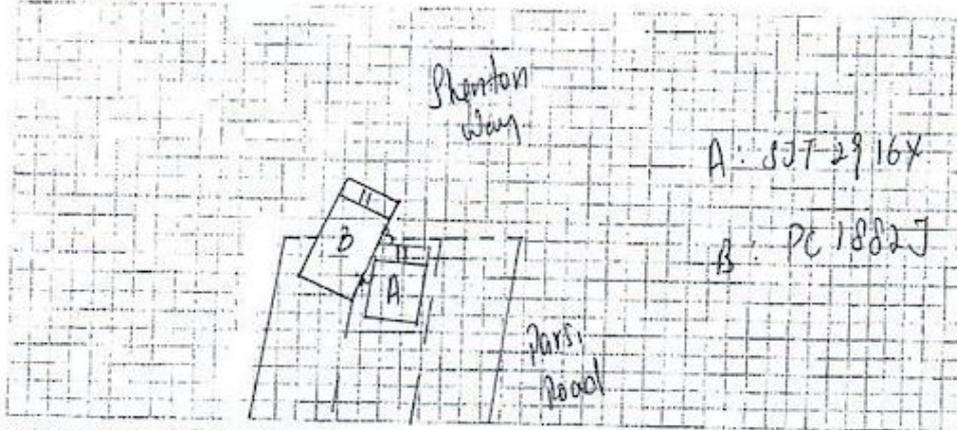
INJURED 1

Name of injured person	ALAN POH CHENG FA
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	BODY
Injured person in which vehicle?	SJT2916X
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 2

Name of injured person	LYNETTE YEO LI SA
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	BODY
Injured person in which vehicle?	SJT2916X
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the mentioned date & time, I was driving along Parsi RD towards Shenton way. As I came to a stop on a right turn junction, I felt a huge impact to the side of my vehicle. I alighted and realised BUS PC 1882J had collided into me while turning to the main road.

Refer to TP report

T/20210323/7000

DECLARATION

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

Policyholder's Signature
Date & Time:

Signature of Reporting Centre Personnel

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

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























**SINGAPORE
POLICE FORCE**



T/20210323/7000

1 of 3

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

Report No. T/20210323/7000

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 23/03/2021 00:17	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: ALAN POH CHENG FA			Address: 250 BANGKIT ROAD #07-364 SINGAPORE 670250		
ID Type / ID No.: NRIC NO / S9614471G			Contact No.: Home/Office: Mobile: 96860623		
Nationality: SINGAPORE CITIZEN			Email: ALANPOH96@HOTMAIL.COM		
Sex: Male	Age: 24	Date of Birth: 27/04/1996	Type of Informant: Driver		
Race: Chinese			Language: English	Institution / School Name:	
Occupation: Banking Sales			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 22/03/2021 18:50	Type of Location: T-Junction
Location: PARSI 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	Conditio	No of
PC1882J	Bus/Coach/Mi nibus					0
SJT2916X	Car	VOLKSWAGO N	Golf 1.4		Seriously Damaged	2



**SINGAPORE
POLICE FORCE**



T/20210323/7000

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

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Report No. T/20210323/7000

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Passenger			
Name	LYNETTE YEO LI SA	ID No.	S9449436B
Related Vehicle	SJT2916X (Car)	Contact No.	92316199
Hospital/Clinic	24 HOUR WALK-IN CLINIC	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	22/03/2021	Date	22/03/2021
No. of Days granted Medical Leave	03	Degree of	Slight
Driver			
Name	ALAN POH CHENG FA	ID No.	S9614471G
Related Vehicle	SJT2916X (Car)	Contact No.	96860623
Hospital/Clinic	24 HOUR WALK-IN CLINIC	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	22/03/2021	Date	22/03/2021
No. of Days granted Medical Leave	03	Degree of	Slight

Brief Details.

On the mentioned date & time. I was driving along Parsi road towards shenton way. My Vehicle was stationary as i was looking out for traffic to turn out to shenton way, i felt a huge impact towards the passenger side of my vehicle. I then alighted my vehicle and realised BUS PC1882J had collided into my vehicle while trying to turn out to shentonway.



**SINGAPORE
POLICE FORCE**

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



T/20210323/7000

3 of 3

Report No. T/20210323/7000

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
MUHAMMAD RIZWAN BIN KAMALUDIN
Contact No.: 65476185

Authentication Stamp
NP168

Signature Of Informant:

The identity of the person making this report has been authenticated by SingPass. No signature is required.

Date/Time:
23/03/2021 00:17

Classification Of Case: