

# 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 ..... 29/03/2021 15:46 (SGT)  
Date of Accident ..... 28/03/2021 19:40 (SGT)  
Exact Location of Accident ..... Elias Rd, Singapore  
Additional Location Information ..... -  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SHA3339D

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... COMFORT TRANSPORTATION PTE LTD  
Company Reg No ..... 199303821R  
Email Address ..... fleetsafety@cdgtaxi.com.sg  
Mobile Phone No ..... (Phone) +65-98256011  
Alternative Phone No ..... (Office) +65-65508768

### VEHICLE PARTICULARS

Manufacturer ..... Hyundai  
Model ..... Ioniq  
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 ..... Taxi  
Transmission ..... Auto  
CC ..... 1580

### INSURANCE COMPANY

Name of Insurance Company ..... AXA Insurance Pte Ltd  
Type of Coverage ..... ThirdPartyFireTheft  
Fleet Policy ..... Yes  
Policy Number ..... VFX/P2419138  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... KWA CHNG LENG (KE ZHUANGLONG)  
NRIC No ..... S7247763D

Date Of Birth .....	15/04/1972
Occupation .....	Outdoor
Date Of Driving Pass .....	27/07/1992
Driving experience .....	28 YEARS AND 8 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-98256011
Alt. Phone Number .....	-
Email Address .....	fleetsafety@cdgtaxi.com.sg
Address .....	BLK 619B PUNGGOL DRIVE # 15-773
Address complement .....	-
Postcode .....	822619
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 - Head to Rear
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) .....	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

ON 28/3/21 @ 1940HRS I WAS DRIVING ALONG ELIAS ROAD AFTER EXITING FROM TPE ONBOARD MY VEHICLE SHA3339D. I WAS DRIVING ON THE EXTREME LEFT LANE AND I HAD LANE CHANGE TO THE EXTREME RIGHT LANE BEFORE THE FIRST TRAFFIC LIGHT JUNCTION. BEFORE DOING THE LANE CHANGE I HAD CHECKED MY BLINDSPOT I THEN PROCEED TO CHANGE INTO THE RIGHT LANE AND AS I WAS DOING THAT A CAR SUDDENLY EMERGE AT THE FRONT AS SOON AS I DRIVE THE SLIGHTLY DOWNHILL SLOPE ROAD AND I TRIED TO SLOW DOWN BUT MY FRONT BUMPER END UP COLLIDING ONTO HIS REAR BUMPER. NO INJURY SUSTAINED FROM BOTH PARTIES. BOTH DRIVERS STEPPED OUT AND EXCHANGED DETAILS

#### 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 .....	SLQ8851B
Vehicle Manufacturer .....	Nissan
Vehicle Model .....	Pulsar
Vehicle Variant .....	-
Vehicle Colour .....	-

Vehicle Category .....	Private car
Name of Driver .....	LEOW YIH SHYAN
NRIC No .....	S8901645B
Contact Number .....	-
Address .....	BLK 417 EUNOS ROAD 5 # 15-22
Address complement .....	-
Postcode .....	400417
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-



**Describe Circumstances of the Accident**

On 28/3/21 @ 1940hrs I was driving along Elias Rd after exiting from TPE onboard my vehicle SHA3339D. I was driving on the extreme left lane and I had lane change to the extreme right lane before the first traffic light junction. Before doing the lane change I had checked my blindspot and slowed down before making the lane change. After checking my right blindspot I then proceed to change into the right lane and as I was doing that a car suddenly emerge at the front as soon as I drive the slightly downhill slope road and I tried to slow down my vehicle but my front bumper end up colliding onto his rear bumper. No injury sustained from both parties. Both drivers stepped out and exchanged details.

**Declaration**

We declare the foregoing particulars are true in every respect.

\_\_\_\_\_  
Policyholder's Signature / Date & Time

*[Signature]*  
\_\_\_\_\_  
Driver's Signature (if driver is not the policyholder) / Date & Time

*[Signature]* 29/3/21  
\_\_\_\_\_  
Witnessed by/Reporting Centre Personnel 14:30hrs











