

# 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 ..... 17/06/2021 16:00 (SGT)  
Date of Accident ..... 14/05/2021 07:55 (SGT)  
Exact Location of Accident ..... Club St, Singapore  
Additional Location Information ..... -  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SLJ7186G

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... GRAB RENTALS PTE LTD  
Company Reg No ..... 201617200G  
Email Address ..... gr.sg.accident@grab.com  
Mobile Phone No ..... (Phone) +65-96846486  
Alternative Phone No ..... (Office) +65-66550005

### VEHICLE PARTICULARS

Manufacturer ..... Mazda  
Model ..... 3  
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  
Transmission ..... Auto  
CC ..... 1496

### INSURANCE COMPANY

Name of Insurance Company ..... India International Insurance Pte Ltd  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... Yes  
Policy Number ..... D21MFL0000447  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... GOH KWEE HONG  
NRIC No ..... S7335962G

Date Of Birth .....	03/10/1973
Occupation .....	Outdoor
Date Of Driving Pass .....	17/09/2002
Driving experience .....	18 YEARS AND 8 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-96846486
Alt. Phone Number .....	-
Email Address .....	gr.sg.accident@grab.com
Address .....	BLK 718 BEDOK RESERVOIR ROAD #08-4610
Address complement .....	-
Postcode .....	470718
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 .....	Collided into Parked Vehicle
Weather Conditions .....	Raining
Road Surface .....	Wet

#### 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) .....	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### PASSENGER 1

Name .....	UNKNOWN
Gender .....	Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Tampines Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18005871999
Alt. Police Station Phone No .....	(Fax) +65-65871699
Police Station Address .....	6 Tampines Ave 4 Singapore 529682
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT T/20210514/2011

I WOULD LIKE TO ADD ON THAT THE REASON OF THIS LATE REPORTING IS BECAUSE ON THE DATE I MAKE A POLICE REPORT THE OFFICER INFORMED ME THAT THEY WILL SEND A LETTER TO THE OWNER OF MOTORCYCLE AND LET ME AND THE OWNER TO MUTUAL SETTLEMENT.I DID NOT HIT AND RUN AS I DONE THE POLICE REPORT ON THE SAME DAY OF INCIDENT.I ALSO ASKED PASSERBY IF THEY KNOW THE OWNER/RIDER FOR THE VEH B.

#### 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 .....	FBN8687T
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Motorcycle
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) .....	-

## 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.

Policyholder's Signature / Date & Time		Driver's Signature (If driver is not the policyholder) / Date & Time		Witnessed by Reporting Centre Personnel	
				16/6/21	
Sketch Plan A-SL71864		B-FBN8687T		LOC-CLUB STREET	
Shop	Shop	Peroni Italy	Shop	Shop	Shop
Car Parking Lot		VEH B			Car Parking Lot
		VEH A			
Shop Lot					Shop Lot

## Describe Circumstances of the Accident

REFER TO POLICE REPORT T/20210514/2011

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## Declaration

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

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

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

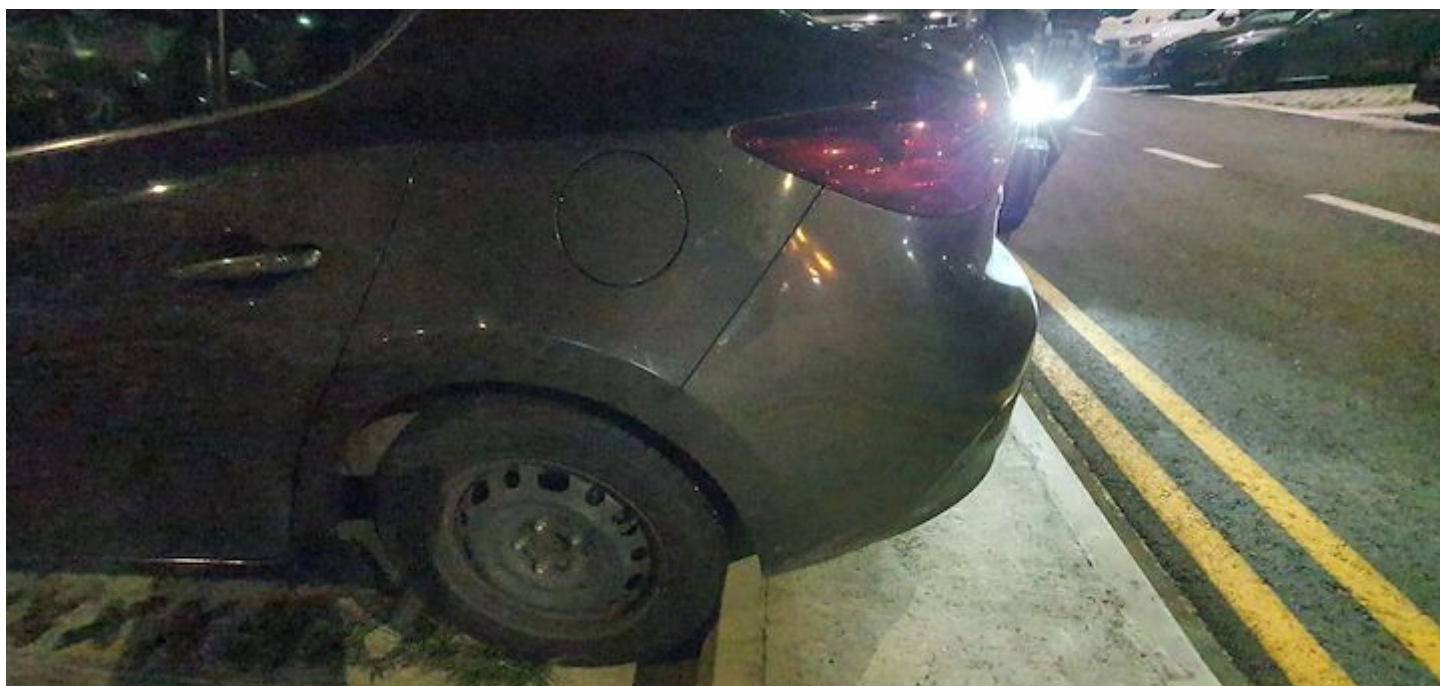
\_\_\_\_\_  
Witnessed by Reporting Centre  
Personnel







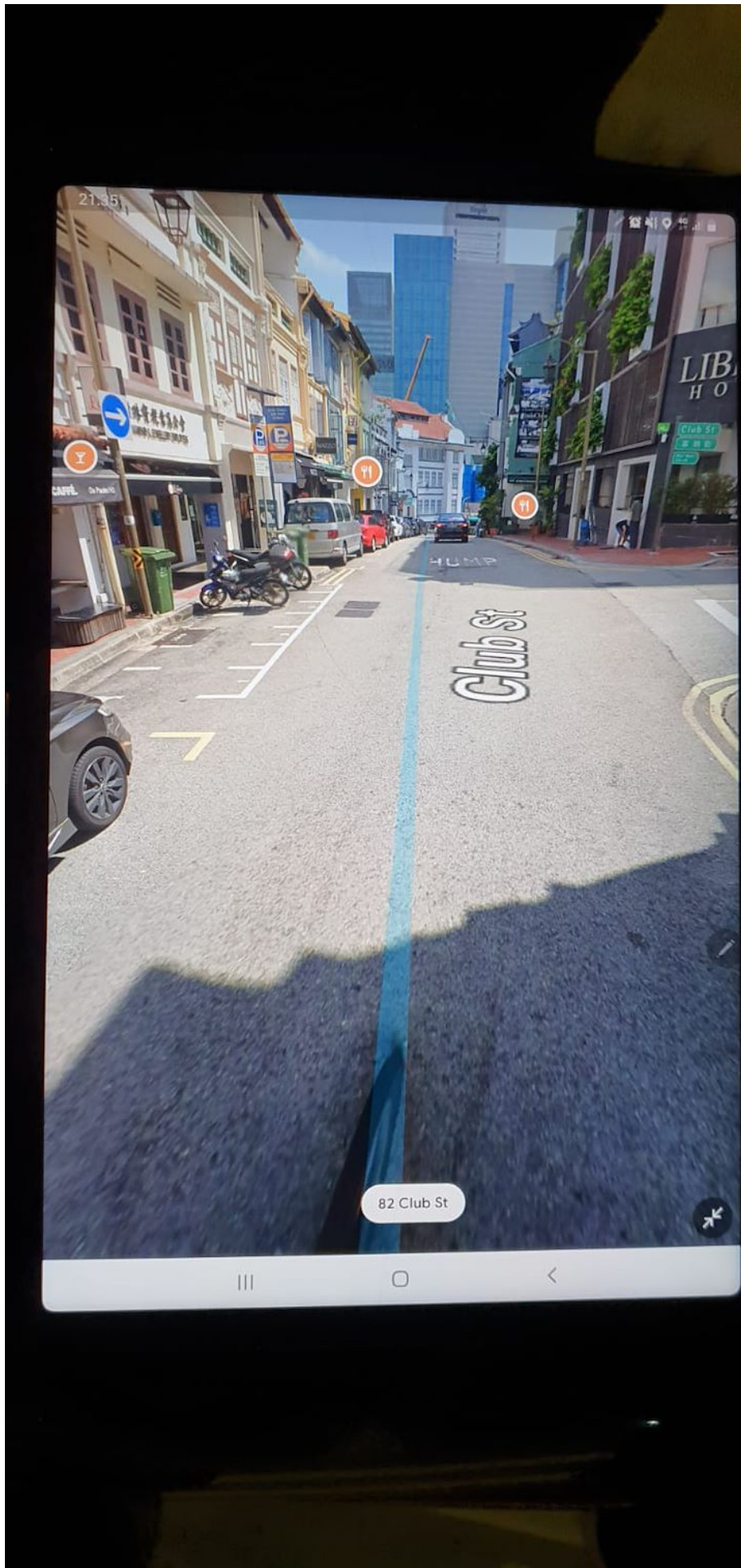














**SINGAPORE  
POLICE FORCE**



T/20210514/2011

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Police Station Of Origin:  
Tampines N.P.C  
6 Tampines Avenue 4 SINGAPORE 529682  
Tel No: 1800-5871999

Report No. T/20210514/2011

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 14/05/2021 10:27	Vide Report No.:	Station Diary No.: 25
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Informant's Particulars			
Name of Informant: GOH KWEE HONG		Address: APT BLK 718 BEDOK RESERVOIR ROAD #08-4610 SINGAPORE 470718	
ID Type / ID No.: NRIC NO / S7335962G		Contact No.: Home/Office: Mobile: 96846486	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 47	Date of Birth: 03/10/1973	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: GRAB DRIVER		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: 14/05/2021 07:55	Type of Location: Straight Road
Location: CLUB STREET				
Weather: Drizzling		Road Surface: Wet	Road Speed Limit: 10 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision: Rear to Head			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBN8687T	Motorcycle				Slightly Damaged	0
SLJ7186G	Car				Slightly Damaged	1

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



**SINGAPORE  
POLICE FORCE**



T/20210514/2011

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Report No. T/20210514/2011

Police Station Of Origin:  
Tampines N.P.C  
6 Tampines Avenue 4 SINGAPORE 529682  
Tel No: 1800-5871999

**CONTINUATION OF REPORT**

Driver			
Name	GOH KWEE HONG	ID No.	S7335962G
Related Vehicle	SLJ7186G (Car)	Contact No.	96846486
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

**Brief Details.**

On 14/05/2021 at about 0755hrs, I was travelling along Club Street and needed to drop a passenger off along the road. The passenger then told me turn right to stop at her unit when I was at unit 80 along Club Street but I went a bit further.

I then wanted to reverse my car but did not manage to check my rear properly, causing the rear of my vehicle to hit the mentioned motorcycle (FBN8687T) and causing it to fall over. My vehicle sustained minor scratches. The motorcycle sustained some scratches on the front bumper and right side of the motorcycle due to this incident. I tried to wait for the owner of the motorcycle till 0845hrs to come however, to no avail.

I decided to lodge a report in regards to this incident so that the owner can contact me and I can pay for the damages that the motorcycle sustained.



**SINGAPORE  
POLICE FORCE**



T/20210514/2011

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Report No T/20210514/2011

Police Station Of Origin:  
Tampines N.P.C  
6 Tampines Avenue 4 SINGAPORE 529682  
Tel No: 1800-5871999

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 /  
Sgt 2 HO QI ZHI

Signature Of Informant:

Signature Of Interpreter:  
Not applicable

Date/Time:  
14/05/2021 10:27

Officer In Charge Of Case:  
TP / GIA /  
SI TAN JEOK LENG  
Contact No.: 65476151

Classification Of Case:

Authentication Stamp  
NP168

