

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 27/05/2021 17:27 (SGT)
Date of Accident 25/05/2021 15:10 (SGT)
Exact Location of Accident Balestier Rd, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SHB4724M

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner CITYCAB PTE LTD
Company Reg No 199502839G
Email Address fleetsafety@cdgtaxi.com.sg
Mobile Phone No (Phone) +65-96516920
Alternative Phone No (Office) +65-65508768

VEHICLE PARTICULARS

Manufacturer Hyundai
Model I40
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 Taxi
Transmission Auto
CC 1685

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd
Type of Coverage ThirdPartyFireTheft
Fleet Policy Yes
Policy Number VFX/P2419140
Cover Note Number -

DRIVER

Name of Driver TAN BENG HONG
NRIC No S1448943F

Date Of Birth	20/09/1960
Occupation	Outdoor
Date Of Driving Pass	13/12/1982
Driving experience	38 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96516920
Alt. Phone Number	-
Email Address	fleetsafety@cdgtaxi.com.sg
Address	BLK 330 YISHUN RING ROAD #08-1442
Address complement	-
Postcode	760330
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
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	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Yishun North Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18008529999
Alt. Police Station Phone No	(Fax) +65-68522299
Police Station Address	31 Yishun Central Singapore 768827
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT

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	SD CARD SEIZED BY TRAFFIC POLICE
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLP8814P
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Vehicle Manufacturer	Toyota
Vehicle Model	Prius
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private hire
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	SMT829S
Vehicle Manufacturer	Toyota
Vehicle Model	Noah
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private hire
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	TAN BENG HONG
Address	BLK 330 YISHUN RING ROAD #08-1442
Address Complement	-
Post Code	760330
Approximate Age Years Old	60
Injuries Sustained	BODY, NECK AND CHEST PAIN. SLIGHT SWELLING ON RIGHT PALM. GIVEN 4 DAYS MC.
Injured person in which vehicle?	SHB4724M
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	Yes

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.

<p>Policyholder's Signature / Date & Time</p> <p><i>[Signature]</i></p>	<p>Driver's Signature (If driver is not the policyholder) / Date & Time</p> <p><i>[Signature]</i> 27.05.2021 1630 HRS</p>	<p>Witnessed by Reporting Centre Personnel</p> <p><i>[Signature]</i> Kyan Yon</p>
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Sketch Plan

PALESTINE ROAD

MCNAUL ROAD

A: 3HB4724M
B: SMT829S
C: SLP 8814P

Describe Circumstances of the Accident

REFER TO POLICE REPORT

Declaration

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

































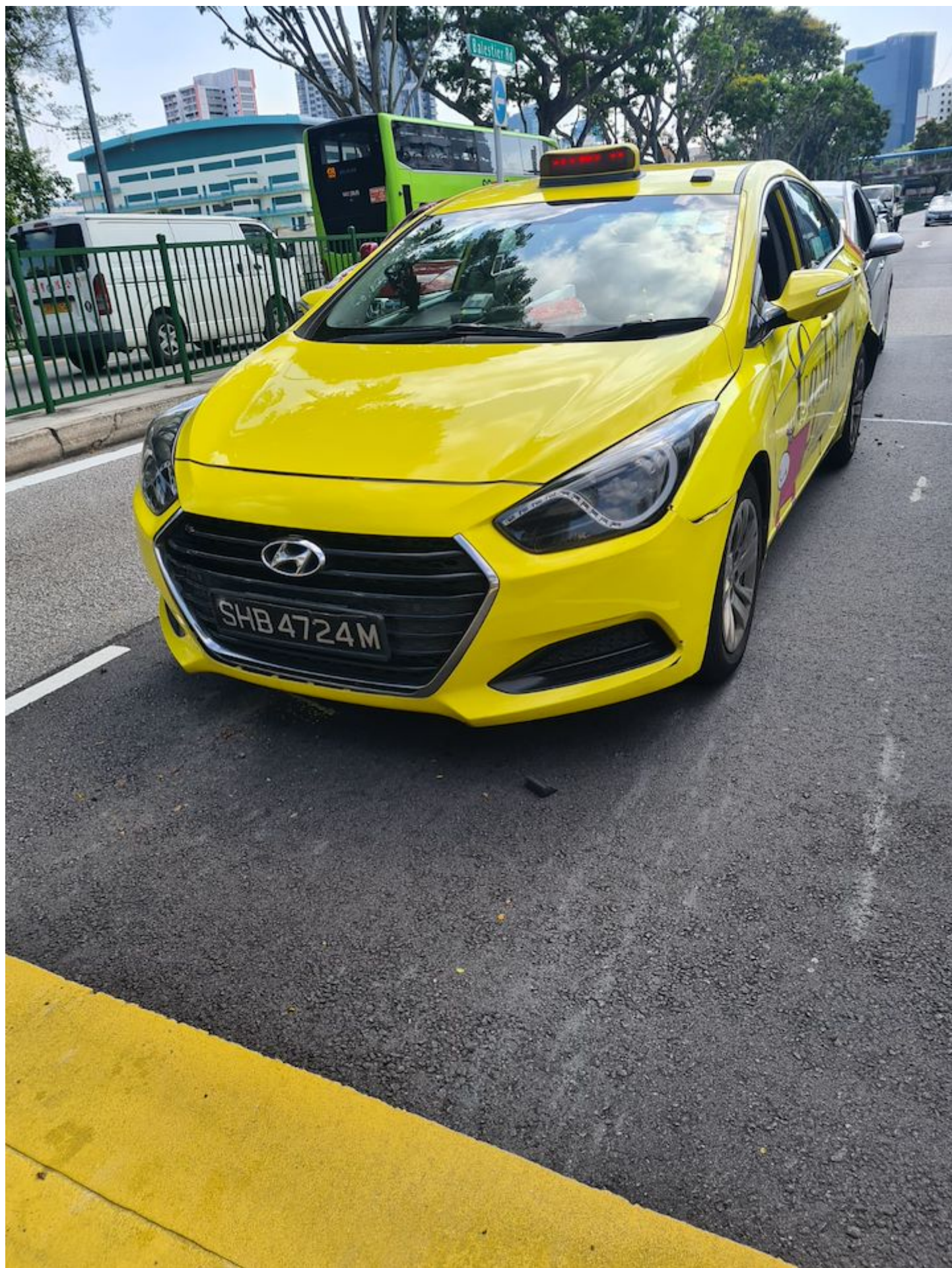










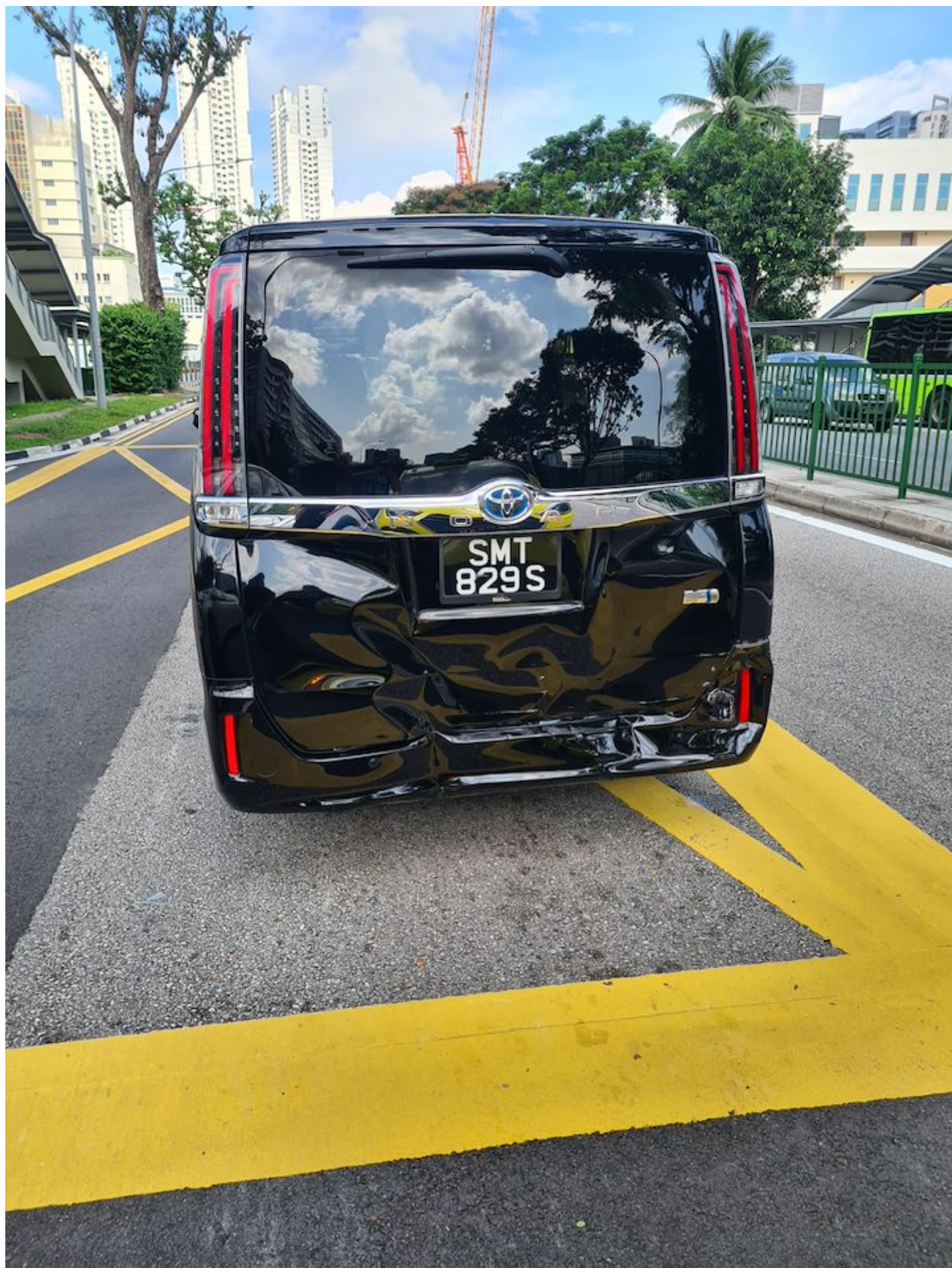
















SINGAPORE POLICE FORCE



T/20210526/2020

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

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Report No. T/20210526/2020

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/05/2021 13:44	Vide Report No.:	Station Diary No.: 48
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Informant's Particulars

Name of Informant: TAN BENG HONG			Address: APT BLK 330 YISHUN RING ROAD #08-1442 SINGAPORE 760330	
ID Type / ID No.: NRIC NO / S1448943F			Contact No.: Home/Office: Mobile: 96516920	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 60	Date of Birth: 20/09/1960	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: TAXI DRIVER			Driving Licence Information: Class: 3,4 Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 25/05/2021 15:10	Type of Location: Straight Road
Location: BALESTIER ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 60 Km/h
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Heavy
Type of Collision: Chain Accident - Moving Vehicles				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHB4724M	Yellow Comfort Taxi	HYUNDAI	I40 1.7 CRDI F/L AT ABS AIRBAG 4DR	Yellow	Seriously Damaged	1
SLP8814P	Car	TOYOTA	PRIUS HYBRID 1.8 CVT	Silver	Seriously Damaged	0
SMT829S	Car - 10 Seater Type	TOYOTA	NOAH HYBRID 1.8X CVT	Black	Seriously Damaged	0



**SINGAPORE
POLICE FORCE**



T/20210528/2020



Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999

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Report No. T/20210528/2020

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TAN BENG HONG	ID No.	S1448943F
Related Vehicle	SHB4724M (Yellow Comfort Taxi)	Contact No.	96516920
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3,4 Date of Expiry: NIL
Date Treatment	25/05/2021	Date Discharge	25/05/2021
No. of Days granted Medical Leave	04	Degree of Injury	Slight

Brief Details.

- On 25/05/2021 between 1507hrs to 1510hrs, I was driving taxi Reg No: SHB4724M along Balestier Road towards Lavender Road. I was fetching one male/Chinese/30+ yrs passenger which was seated at the left rear passenger seat and this service was through booking. This is a three lane road and I was driving at the center lane.
- Before approaching the cross junction of Balestier Road Lavender Road the traffic light was red and all the vehicles came to a stop. When the traffic light turned green, I started to move my vehicle slowly as the traffic was heavy thus all of a sudden my vehicle was pushed forward from the rear by another vehicle (car) Reg No: SLP8814P which caused my taxi front side to collide against the rear of another vehicle (car) Reg No: SMT829S, all our vehicles were on the same lane at the time collision.
- I sustained pain at my whole rear side body and neck area, and also my front chest area and I was conveyed by ambulance to Tan Tock Seng Hospital. At this moment, I am not sure of the injury of my passenger but he did mentioned he would consult a doctor on his own later. I not sure as of now also of the injury sustained by the two other drivers (Male/Chinese/between 40 to 50 yrs of vehicle Reg No: SMT829S and the driver of another vehicle (Race unknown as this driver did not alight from his vehicle Reg No: SLP8814P). I am also not sure of both this two vehicles drivers had any passengers inside their respective vehicles as I had been conveyed to hospital. My vehicle has been towed by traffic Police at the accident scene, In/charge case: Jey / Tel: 65476178 of Traffic Police.
- I was discharged on the same day and X-ray results reveal no fractures except for pain at my front/back of my body. Slight swelling at my right outer palm area. I have been give a period of four days , medical leave reference MC No: TTSH21099309, medical bill till date: \$128.00/-, Damage as follow:
SHB 4724M - my taxi
Front slight damage
Rear side serious damage as bumper dislodged

SMT 829S - other party
Rear side serious damage as dented

SLP8814P - other party
Serious damage as dented inwards



**SINGAPORE
POLICE FORCE**



T/20210526/2020

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Report No. T/20210526/2020

CONTINUATION OF REPORT



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Yishun North N.P.C
31 Yishun Central SINGAPORE 768827
Tel No: 1800-8529999



T/20210526/2020

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Report No. T/20210526/2020

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: L / SSI ANDY LUCAS 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 26/05/2021 13:44
Officer In Charge Of Case: TP / GIT / SI THABAGESH JEYATHESH Contact No.: 65476178	Classification Of Case: SN 085
Authentication Stamp NP168	Signature:  Singapore Police Force

