

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 Report	27/07/2020 12:48
Date Of Accident	25/07/2020 08:00
Exact Location Of Accident	MIDDLE ROAD TOWARDS SELEGIE ROAD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKD2211T
Insured/Policyholder	
Name Of Registered Owner	CHUA SEAH LIANG HARRY
NRIC No	S6919950Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90605411
Alternative Phone No	OFFICE-90605411

Vehicle Particulars

Manufacturer	PORSCHE
Model	CAYMAN-S
Exact Purpose for which vehicle was being used at time of accident	WORK
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSNA00001521900
Cover Note Number	

Driver

Name of Driver	CHUA SEAH LIANG HARRY
NRIC No	S6919950Z
Date Of Birth	21/06/1969
Occupation	INDOOR
Date Of Driving Pass	29/11/1988
Driving Experience	31 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90605411
Fax Number	
Contact Number	OFFICE-90605411
Email Address	NOEMAIL

Address	502 CHANGI ROAD
Postcode	419905
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

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 this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	ROCHOR NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 11 KAMPONG KAPOR ROAD , POSTCODE: 208678 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2949999 - FAX NO: 63918583
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

On 25/07/2020 at around 0800hrs, I was driving my car (SKD2211T) along Middle Road going towards Selegie Road. During the turn, I was already on the extreme right lane and the rider (FBN8789H) was on the lane beside me when he swerved into me. The damages to my car includes scratches and dents on the front left side panel, front left side door and the left side fender. The damages to the motorcycle includes the right side mirror. These are the damages I know of so far but there could be more. I will be bringing my car to a workshop soon. After the accident, the rider was attended to by paramedics as he suffered abrasions on the right elbow and right leg but he was not conveyed. Traffic Police also came down. I do have a functioning in-vehicle camera that showcases the entire incident and I am able to provide it for investigation purposes. I then informed my insurance company of this accident, who then recommended me to lodge a police report to be sure.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

Details of Witness 1

Name	JAGJIT SINGH S/O SUNDAR SINGH
Phone Number	91721901
Email Address	

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBN8789H
Vehicle Make/Model/Colour	

Details Of Properties

Vehicle Category	MOTORCYCLE
Name of Driver	TAN SIONG SENG @ MUHAMMAD HADI TAN
NRIC/Passport Number	S1530595I
Contact Number	91839872
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	TAN SIONG SENG@ MUHAMMAD HADI TAN
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	FBN8789H
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Sketch Plan

SKETCH PLAN

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6. The 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 lodgment 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
- (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time: 27/07/2020

Driver's Signature

(If driver is not the policyholder)

Date & Time:

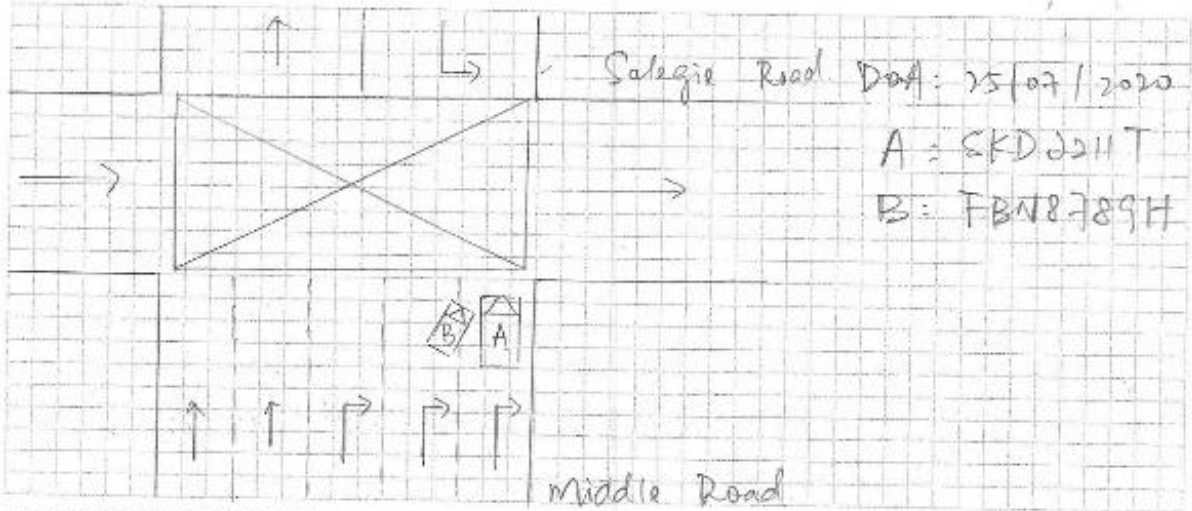
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to the attached police report: T/20200725/2084

DECLARATION

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

[Signature]

Policvholder's Signature

[Signature]

Declarer's Signature

[Signature]



POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20200725/2084

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

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Report No. T/20200725/2084

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/07/2020 15:43	Vide Report No.:	Station Diary No.: 91
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Informant's Particulars

Name of Informant: CHUA SEAH LIANG HARRY	Address: 502 CHANGI ROAD SINGAPORE 419905
ID Type / ID No.: NRIC NO / S6919950Z	Contact No.: Home/Office: Mobile: 90605411
Nationality: SINGAPORE CITIZEN	Email:
Sex: Male Age: 51 Date of Birth: 21/06/1969	Type of Informant: Driver
Race: Chinese	Language: Institution / School Name:
Occupation: SELF-EMPLOYED	Driving Licence Information: Class: 3 Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 25/07/2020 08:00	Type of Location: Bend
Location: Along Road 1 Traveling Toward Road 2 MIDDLE ROAD SELEGIE ROAD Extreme right lane				
Weather: Clear	Road Surface: Dry	Road Speed Limit:		
Traffic Flow: Dual Carriage Way	Traffic Control: Traffic Light - Working	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
FBN8789H	Motorcycle	HONDA	WW150 (PCX150)	White		0
SKD2211T	Car	PORSCHE	CAYMAN S PDK 3.4L SMT ABS D/AB 2WD HID	Silver		0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20200725/2084

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Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

Report No. T/20200725/2084

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKD2211T	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSNA0000152 1900	03/12/2019	02/12/2020

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Rider				
Name	TAN SIONG SENG @ MUHAMMAD HADI TAN		ID No.	S1530595I
Related Vehicle	FBN8789H (Motorcycle)		Contact No.	91839872
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	Slight
Driver				
Name	CHUA SEAH LIANG HARRY		ID No.	S6919950Z
Related Vehicle	SKD2211T (Car)		Contact No.	90605411
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.

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After the accident, the rider was attended to by paramedics as he suffered abrasions on the right elbow and right leg but he was not conveyed. Traffic Police also came down.

I do have a functioning in-vehicle camera that showcases the entire incident and I am able to provide it for investigation purposes.

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20200725/2084

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

3 of 4

Report No. T/20200725/2084

CONTINUATION OF REPORT

I then informed my insurance company of this accident, who then recommended me to lodge a Police Report to be sure.

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20200725/2084

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

4 of 4

Report No. T/20200725/2084

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:
A /
Sgt 2 LIM ZE YU, LOVELL

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
25/07/2020 15:43

Officer In Charge Of Case:
TP / GIT /
Sr Staff Sgt SYED ZAYID MUHAMMAD BIN
SYED ABDUL WAHID ALHINDUAN
Contact No.: 65476394

Classification Of Case:

Authentication Stamp
NP108



SINGAPORE
POLICE FORCE

SIGNATURE

Identification Card

REPUBLIC OF SINGAPORE
IDENTITY CARD NO.

DecaMAX 96

5

Name
CHUA SEAH LIANG HARRY

蔡昇良



Race
CHINESE

Date of birth
21-06-1969

Sex
M

Country/Place of birth
SINGAPORE

36919950Z



REPUBLIC OF SINGAPORE

Licence Number:

Name:
CHUA SEAH LIANG HARRY



Birth Date: 21 Jun 1969

Issue Date: 07 Mar 2003

Made in Taiwan

20 19 18

000267270J



Identification Card

6223828

Made in Taiwan

16 17 18 19 20



NRIC No.



Date of issue
24-06-2019

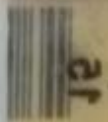

Address
502 CHANGI ROAD
SINGAPORE 419905

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

	PASS DATE
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	29 Nov 1988

NP 428A

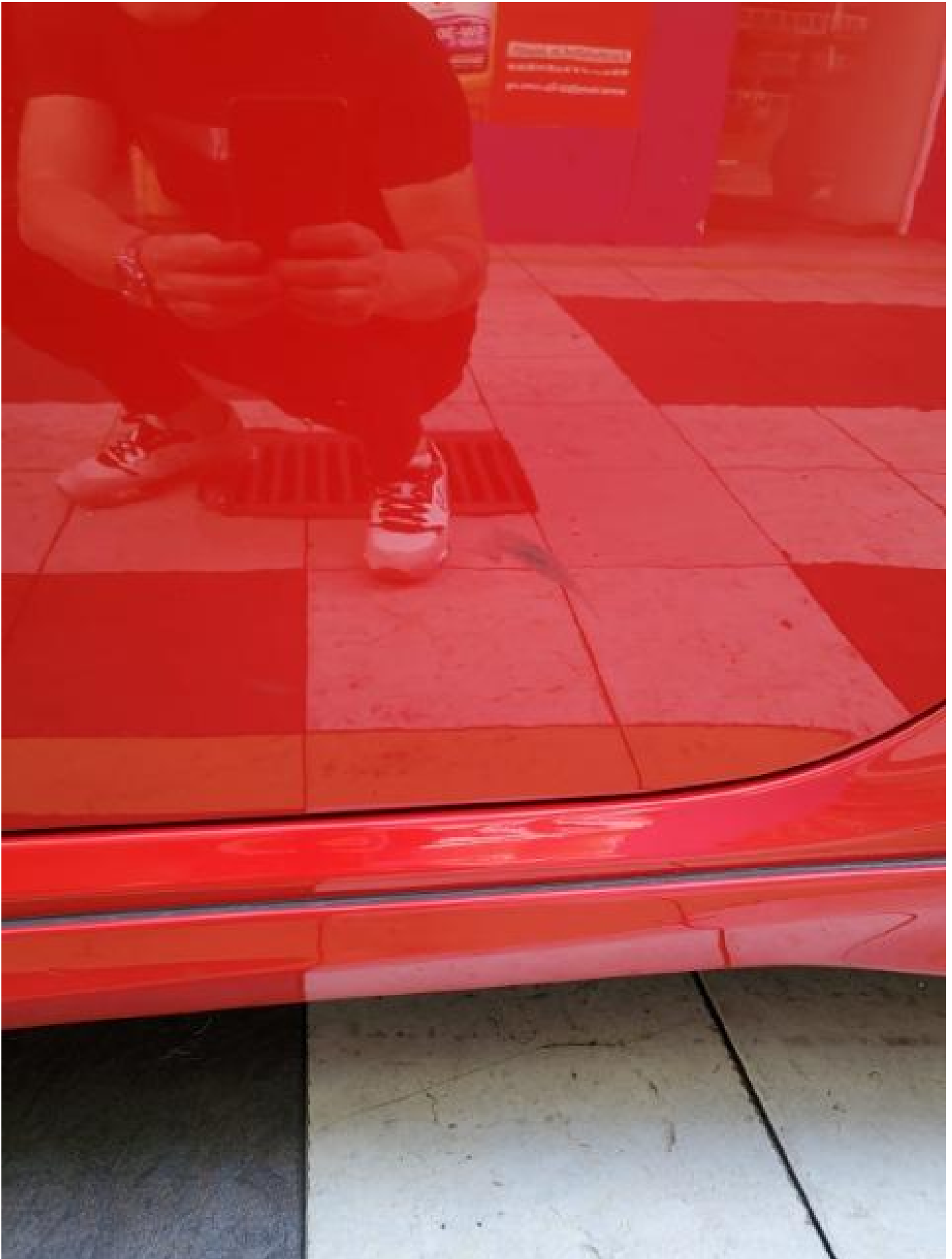
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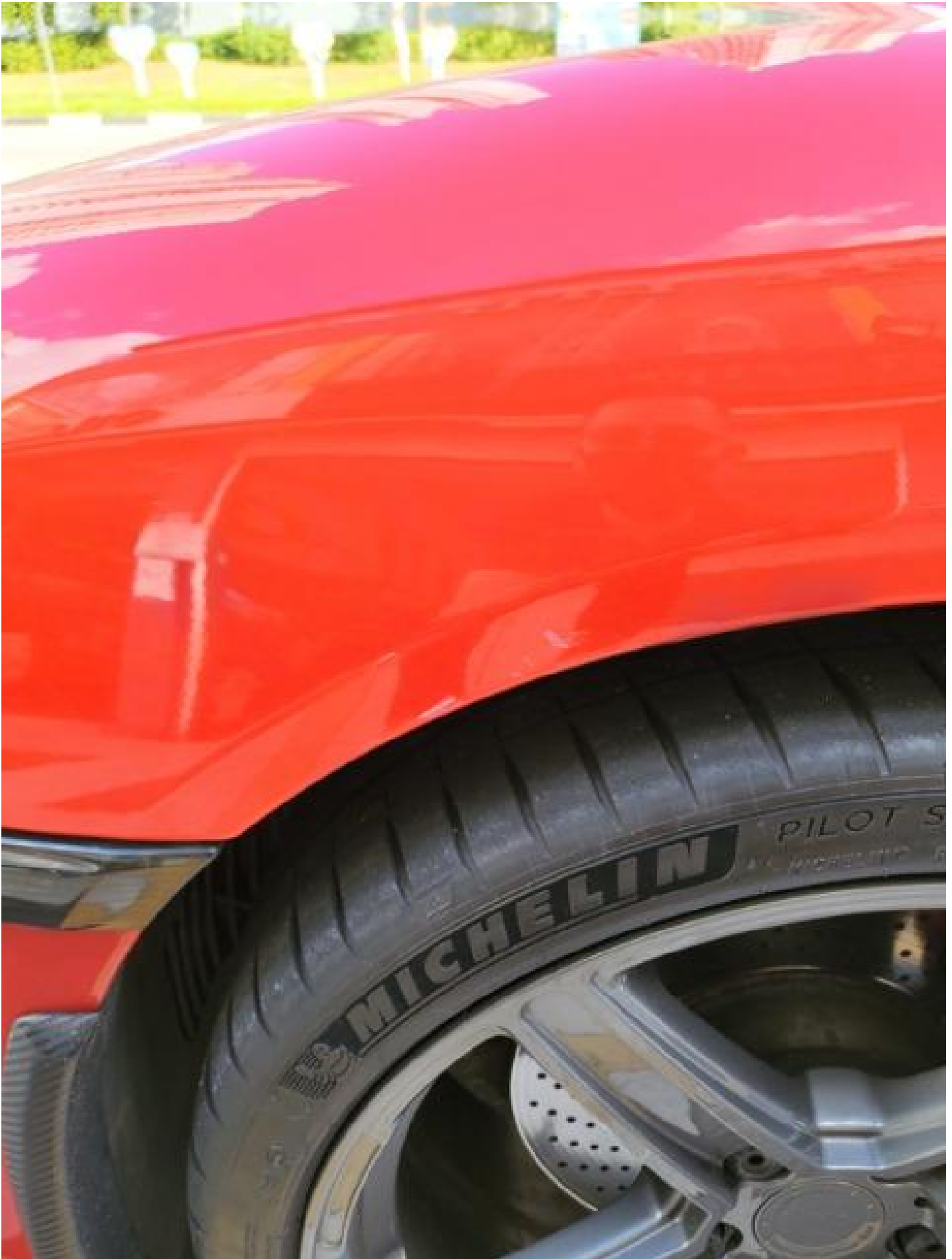
SCENE PHOTO



SCENE PHOTO



SCENE PHOTO



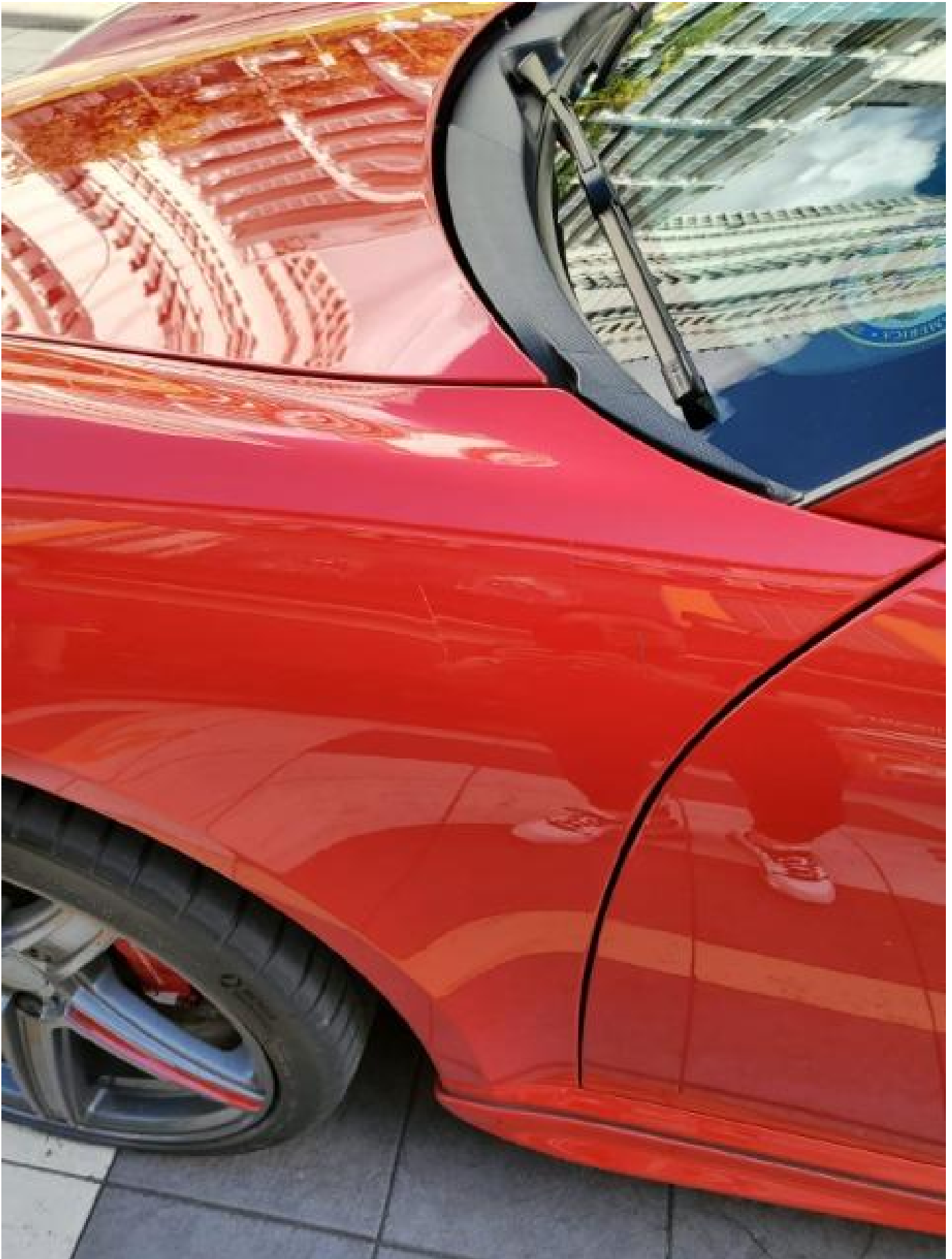
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SCENE PHOTO



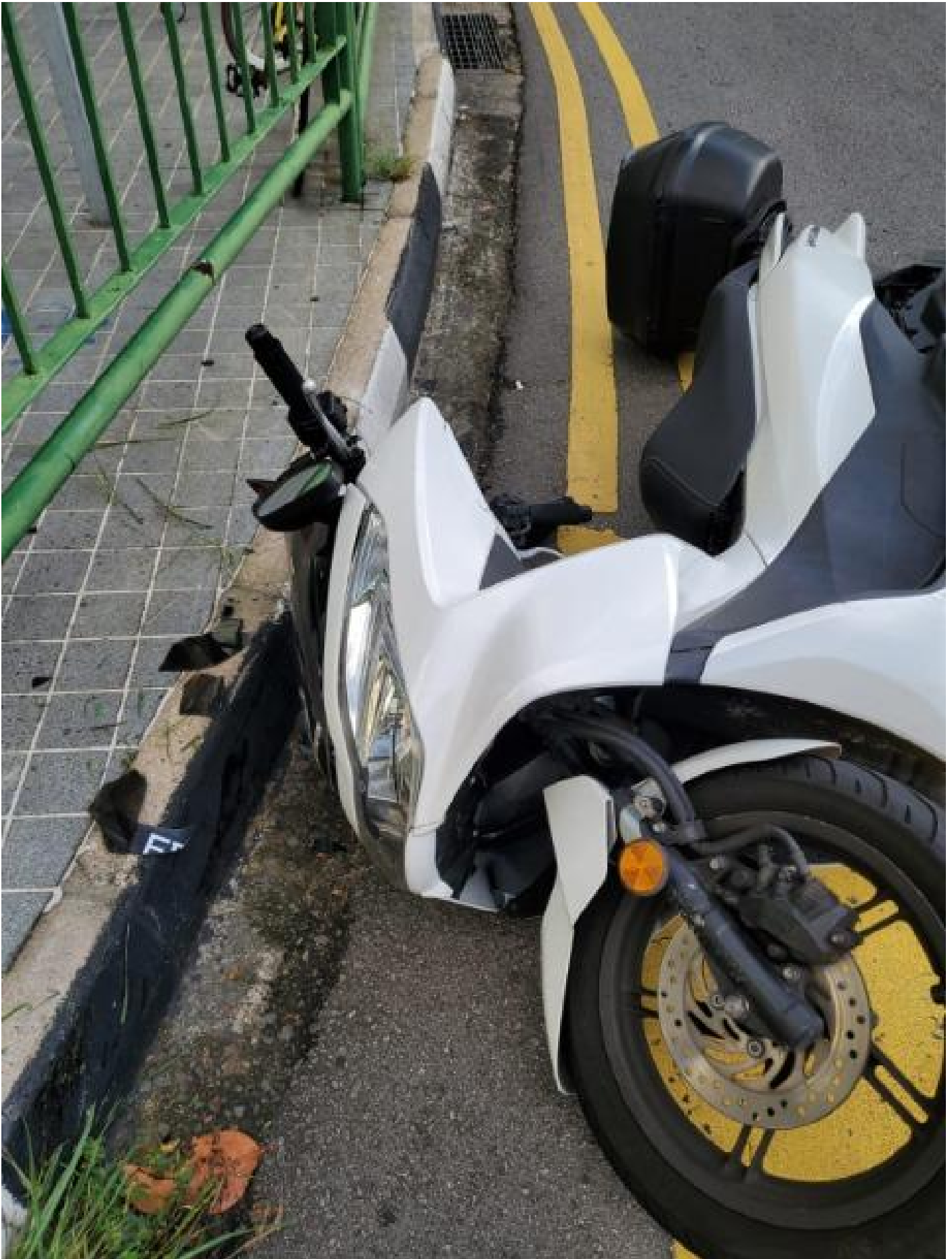
SCENE PHOTO



SCENE PHOTO



SCENE PHOTO



SCENE PHOTO



SCENE PHOTO



Accident Photo



Accident Photo



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Accident Photo



Accident Photo



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Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Identification Card

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S15305951



Name

**TAN SIONG SENG
@MUHAMMAD HADI TAN**

Race
CHINESE

Date of Birth
11-11-1955

Sex
M

Country of Birth
SINGAPORE

