

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	30/06/2021 15:21 (SGT)
Date of Accident	29/06/2021 19:15 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ANG MO KIO AVE 3 SLIP ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMP3708J
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	BIS MOTORING PTE LTD
Company Reg No	2XXXXX055D
Email Address	keiftan@bismotoring.com.sg
Mobile Phone No	(Phone) +65-86881311
Alternative Phone No	(Office) +65-68963633

VEHICLE PARTICULARS

Manufacturer	Renault
Model	Scenic
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	1461

INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	Yes
Policy Number	COI-SPMF1000000413-SMP3708J
Cover Note Number	-

DRIVER

Name of Driver	THAM CHONG MENG
NRIC No	SXXXX154B

Date Of Birth	10/01/1978
Occupation	Outdoor
Date Of Driving Pass	25/02/1998
Driving experience	23 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98261683
Alt. Phone Number	-
Email Address	xavier100178@gmail.com
Address	BLK 278 YISHUN STREET 22 #03-272 SINGAPORE
Address complement	-
Postcode	760278
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	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 vehicle 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?	Yes
Police Station Name	Serangoon North Neighbourhood Police Post
Police Station Address	Blk 108 Serangoon North Avenue 1 #01-709 Singapore 550108
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT NO: T/20210629/2115

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 OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLR1576L
Vehicle Manufacturer	-
Vehicle Model	-
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) -

Describe Circumstances of the Accident

Attach Polia Report T/20210629/2115

Declaration

We declare the foregoing particulars are true in every respect.

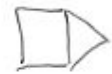
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel



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.

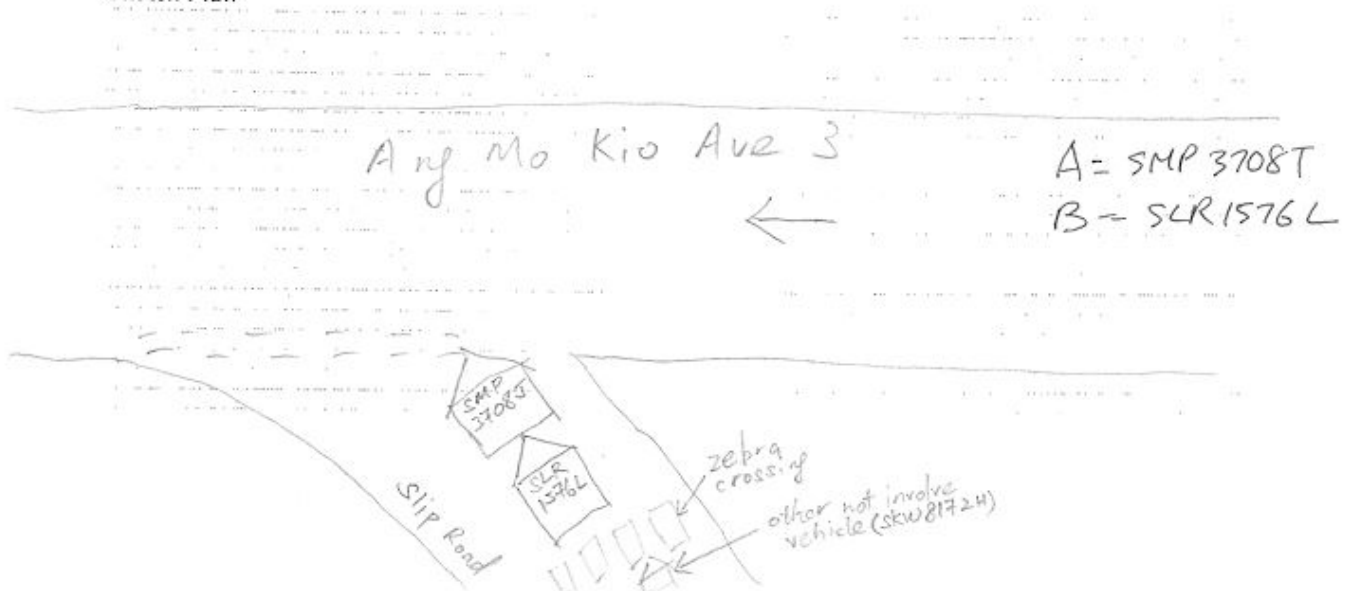
Policyholder's Signature / Date & Time

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



Witnessed by Reporting Centre Personnel

Sketch Plan











































**SINGAPORE
POLICE FORCE**



T/20210629/2115

Police Station Of Origin:
Serangoon North NPP
108 Serangoon North Ave 1 #01-709
SINGAPORE 550108
Tel No: 1800-2849999

1 of 4

Report No. T/20210629/2115

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/06/2021 20:39		Vide Report No.:		Station Diary No.: 17	
Informant's Particulars					
Name of Informant: THAM CHONG MENG			Address: APT BLK 278 YISHUN STREET 22 #03-272 SINGAPORE 760278		
ID Type / ID No.: NRIC NO / S7800154B			Contact No.: Home/Office: Mobile: 98261683		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 43	Date of Birth: 10/01/1978	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: DRIVER			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 29/06/2021 19:15	Type of Location: Bend
Location: ANG MO KIO AVENUE 5				
Weather: Clear		Road Surface: Wet		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLR1576L	Car	HONDA	VEZEL HYBRID 1.5X AUTO	Brown	Slightly Damaged	0
SMP3708J	Car	RENAULT	GRAND SCENIC IV 1.5 DCI AT EU6	Black	Slightly Damaged	0



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T/20210629/2115

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Tel No: 1800-2849999

2 of 4

Report No. T/20210629/2115

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMP3708J	ALLIANZ INSURANCE SINGAPORE PTE. LTD.	COI-SPMF1000000413-SMP3708J	26/12/2020	25/12/2021

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	Unknown Driver		ID No.	NIL
Related Vehicle	SLR1576L (Car)		Contact No.	NIL
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	NIL
Driver				
Name	THAM CHONG MENG		ID No.	S7800154B
Related Vehicle	SMP3708J (Car)		Contact No.	98261683
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 29/6/2021 1916hrs, I was driving alone my vehicle(SMP3708J) along the left filter lane from CTE towards Ang Mo Kio Ave 3, and as I was entering Ang Mo Kio Ave 3 at the bend I slowed down and went to a stop as I have to give way to the vehicles coming from the right. As I come to a stop, a vehicle(SLR1576L) collided to the rear of my vehicle.

I went out of my car to take photo of the accident and the damages and the other party did the same. Subsequently, I requested to exchange particulars, however he refused and requested me to get it from GrabRentals as they can retrieve his particulars from the car plate number. We then got back into our vehicles and drove off as there are oncoming traffic and do not want to obstruct the road.

I did not notice any injuries from the guy and I also did not suffer any injuries. However, there are some damages to my car which are the scratches around the rear of my vehicle and most visible on the right rear of my vehicle. There was also damages on his vehicle which is the front of his vehicle got dented in



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T/20210629/2115

Police Station Of Origin:
Serangoon North NPP
108 Serangoon North Ave 1 #01-709
SINGAPORE 550108
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3 of 4

Report No. T/20210629/2115

CONTINUATION OF REPORT

with his number plate and the right front of his vehicle seemed to have paint peeled off.

I wish to state that I have an in car camera at the front and do not have camera at the back.

As such I am lodging this report for record and insurance purposes.



**SINGAPORE
POLICE FORCE**



T/20210629/2115

Police Station Of Origin:
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108 Serangoon North Ave 1 #01-709
SINGAPORE 550108
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4 of 4

Report No. T/20210629/2115

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:

F /

Sgt 2 MUHAMMAD RIDHWAN BIN AHMAD

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

29/06/2021 20:39

Officer In Charge Of Case:

TP / GIA /

SI TAN JEOK LENG

Contact No.: 65476151

SN 16



SINGAPORE
POLICE FORCE

Authentication Stamp

NP168

SIGNATURE

Classification Of Case:

