

# 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 ..... 08/07/2021 12:16 (SGT)  
Date of Accident ..... 21/06/2021 16:50 (SGT)  
Exact Location of Accident ..... Hougang Ave 2, Singapore  
Additional Location Information ..... -  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SMD9673Z

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... TEO ENG SENG  
NRIC No ..... SXXXX928I  
Email Address ..... esteo1958@gmail.com  
Mobile Phone No ..... (Phone) +65-84684522  
Alternative Phone No ..... +65-84684522

### VEHICLE PARTICULARS

Manufacturer ..... Toyota  
Model ..... Wish  
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 ..... 1800

### INSURANCE COMPANY

Name of Insurance Company ..... China Taiping Insurance (Singapore) Pte. Ltd.  
Type of Coverage ..... ThirdPartyFireTheft  
Fleet Policy ..... No  
Policy Number ..... DMPCSNW00172352000  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... TEO ENG SENG  
NRIC No ..... SXXXX928I

Date Of Birth .....	21/10/1958
Occupation .....	Outdoor
Date Of Driving Pass .....	19/09/1979
Driving experience .....	41 YEARS AND 9 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-84684522
Alt. Phone Number .....	+65-84684522
Email Address .....	esteo1958@gmail.com
Address .....	BLK 451 HOUGANG AVE 10
Address complement .....	#06-553
Postcode .....	530451
Is the driver the policyholder? .....	Yes
If No, Relationship of the Driver with the Insured .....	-
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 - Change/cross lane
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 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 .....	Hougang Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18004890999
Alt. Police Station Phone No .....	(Fax) +65-63128989
Police Station Address .....	60 Hougang Ave 9 Singapore 538775
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE POLICE REPORT:T/20210707/2034

#### 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 .....	HAVEN'T RETRIEVE.
Was there any audio recorded? .....	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

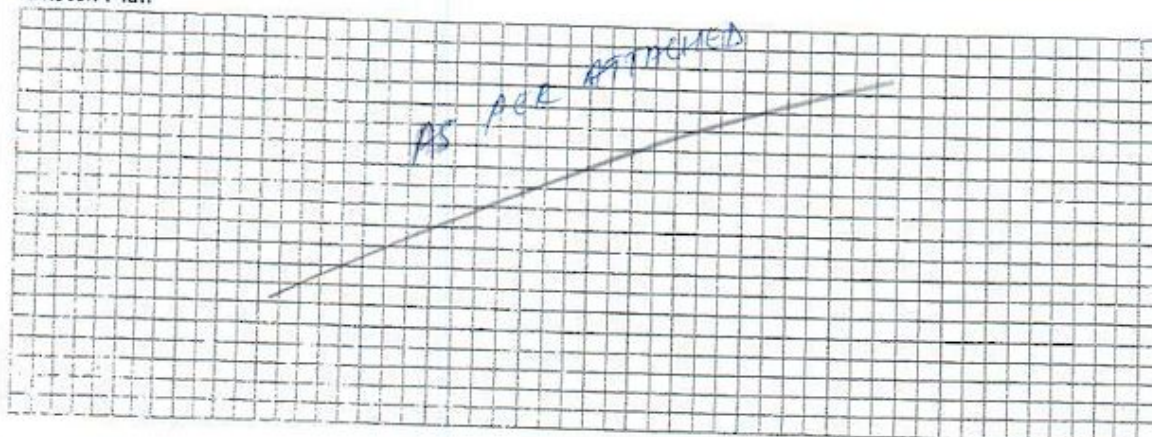
Vehicle Registration Number .....	SJR7045L
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-

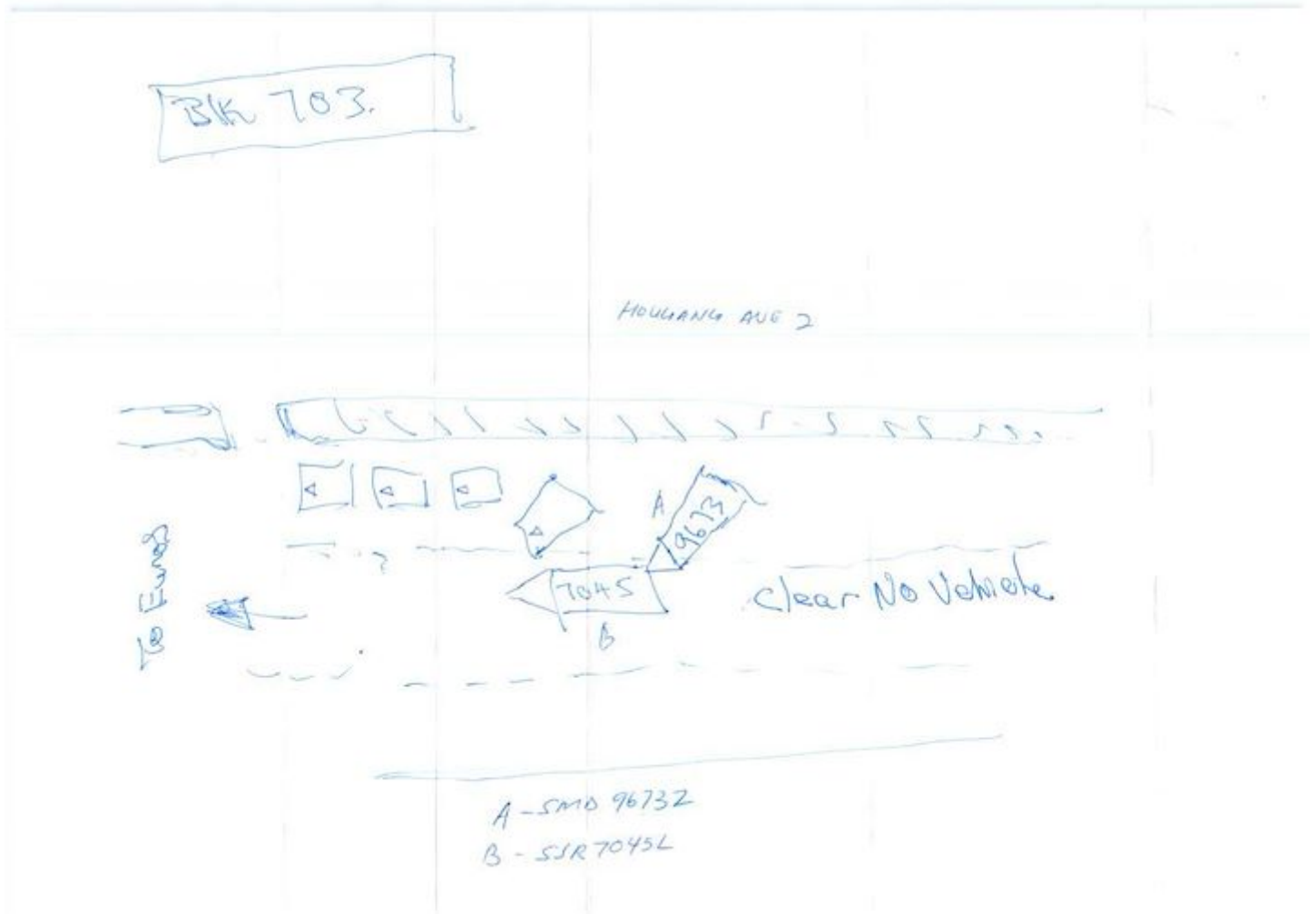
Vehicle Category .....	Private car
Name of Driver .....	-
Contact Number .....	-
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

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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.
  - (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.

Witnessed by Reporting Centre  
Personnel

### Sketch Plan









## Describe Circumstances of the Accident


P/s refer to the police report: T/20210707/2034

## 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

 08/07/21  
Witnessed by Reporting Centre  
Personnel



**SINGAPORE  
POLICE FORCE**



T/20210707/2034

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Report No. T/20210707/2034

Police Station Of Origin:  
Hougang NPP  
357 Hougang Avenue 7 #01-805  
SINGAPORE 530357  
Tel No: 1800-2869999

**CONTINUATION OF REPORT**

**Brief Details.**

On 21/06/2021 at about 1650hrs, I was driving along Hougang Avenue 2 on lane 3 when the lane was very congested therefore I decided to change to lane 2. When the vehicle (SJR7045L) passed me, I immediately changed lane but another vehicle from the same lane 3 also changed lane at this instance. Thus, the vehicle (SJR7045L) suddenly stopped and I immediately applied my emergency brakes but could not stop in time hitting her right rear. I immediately got out of the vehicle and she informed that there are no injuries sustained during the accident. I checked my vehicle and saw a small crack on the left side of my front bumper and her vehicle sustained a broken rear tail light on the right and a minor crack on the back bumper. We then exchanged particulars and decided to pursue private settlement instead.

I can confirm that no Traffic Police or Ambulance were at scene and I have a dashboard camera but I do not know if it caught the accident.

I did not report to my insurance company as I wasn't intending to make a claim therefore I didn't make the report as I didn't know that I need to make a report but I did make a report to the police and was given a Notice of Compliance.





















# SINGAPORE POLICE FORCE

Police Station Of Origin:  
Hougang NPP  
357 Hougang Avenue 7 #01-805  
SINGAPORE 530357  
Tel No: 1800-2869999



T/20210707/2034

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Report No. T/20210707/2034

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 07/07/2021 12:35		Vide Report No.:	Station Diary No.: 9
<b>Informant's Particulars</b>			
Name of Informant: TEO ENG SENG		Address: APT BLK 451 HOUGANG AVENUE 10 #06-553 SINGAPORE 530451	
ID Type / ID No.: NRIC NO / S13159281		Contact No.: Home/Office: Mobile: 84684522	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 62	Date of Birth: 21/10/1958	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: GRAB DRIVER		Driving Licence Information: Class: 3 Date of Expiry:	

## General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 21/06/2021 16:50	Type of Location:
Location: HOUGANG AVENUE 2				
Weather: Clear	Road Surface: Dry		Road Speed Limit:	
Traffic Flow:	Traffic Control:		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
SJR7045L	Car				Slightly Damaged	0
SMD9673Z	Car	TOYOTA	WISH 1.8 AUTO	Grey	Slightly Damaged	0

## Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMD9673Z	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSNW001723 52000	18/11/2020	17/11/2021



**SINGAPORE  
POLICE FORCE**



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Report No. T/20210707/2034

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357 Hougang Avenue 7 #01-805  
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Tel No: 1800-2869999



T/20210707/2034

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Report No. T/20210707/2034

## 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 J SHAFER DEEN

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

07/07/2021 12:35

Officer In Charge Of Case:

TP / AEIT /

SI TAN JEOK LENG

Contact No.: 65476151

Classification Of Case:

Authentication Stamp  
NP168

SN 065



Signature:

Singapore Police Force



