

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 26/07/2021 14:31 (SGT)
Date of Accident 24/07/2021 08:00 (SGT)
Exact Location of Accident Jln Jurong Kechil, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKJ2084L

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner Yang Yuxi
NRIC No S8273893B
Email Address jessieyangoh@gmail.com
Mobile Phone No (Phone) +65-93879635
Alternative Phone No +65-93879635

VEHICLE PARTICULARS

Manufacturer Volvo
Model Xc90
Variant -
Exact purpose for which vehicle was being used at time of accident Private use
Are you claiming under your own insurance policy for repair to your vehicle? Yes
Vehicle Category Private car
Transmission Auto
CC 2000

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DMPCSNW00038432104
Cover Note Number -

DRIVER

Name of Driver Yang Yuxi
NRIC No S8273893B

Date Of Birth	20/11/1982
Occupation	Indoor
Date Of Driving Pass	30/08/2006
Driving experience	14 YEARS AND 11 MONTHS
Gender	Female
Mobile Number	(Phone) +65-93879635
Alt. Phone Number	+65-93879635
Email Address	jessieyangoh@gmail.com
Address	25 Jalan Tenang
Address complement	-
Postcode	277959
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 - Head to Rear
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	Oh Jia Qi Aaron
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

Please 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	The SD card is with the police.
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHB9629Y
-----------------------------------	----------

Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
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.

[Signature]

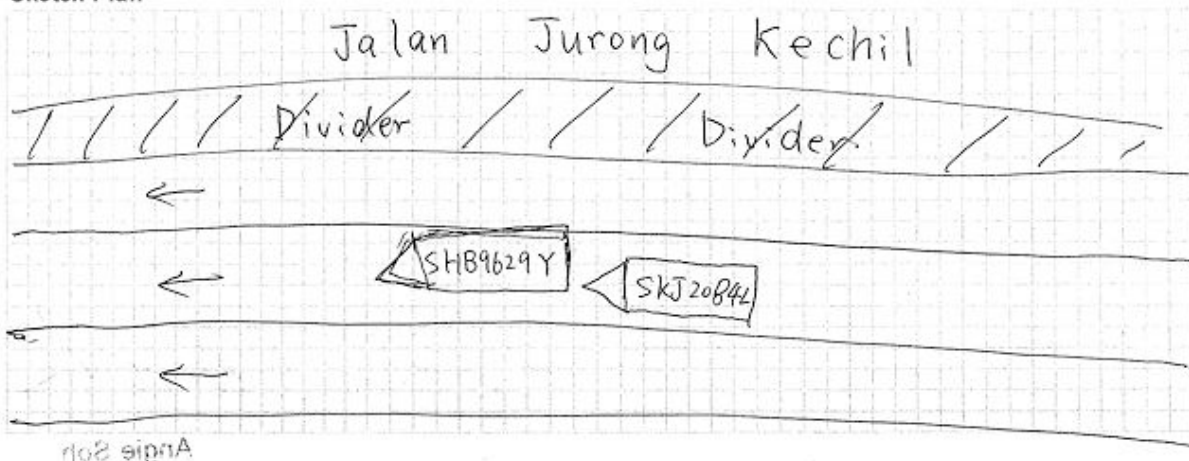
Policyholder's Signature / Date &
Time 26/07/2021 10:47am

[Signature]

Driver's Signature (If driver is not the policyholder) / Date
& Time 26/07/2021 10:47am

[Signature]

Witnessed by Reporting Centre
Personnel **Angie Soh**

Sketch Plan

Describe Circumstances of the Accident


I was driving along Jalan Jurong Kechil at normal speed before Bukit Timah CC. The taxi SHB 9629 Y cut into the middle lane which I was in and suddenly stopped in front of my car to avoid a bus from the lane on my left. The taxi suddenly crossed into my path and stopped in front of me. I applied the brakes hard immediately but the front of my right bumper still knocked his back left bumper.

Angie Soh

Declaration

We declare the foregoing particulars are true in every respect.

 26/07/2021
Policyholder's Signature / Date &
Time 10:47am

 26/07/2021
Driver's Signature (If driver is not the policyholder) / Date
& Time 10:47am

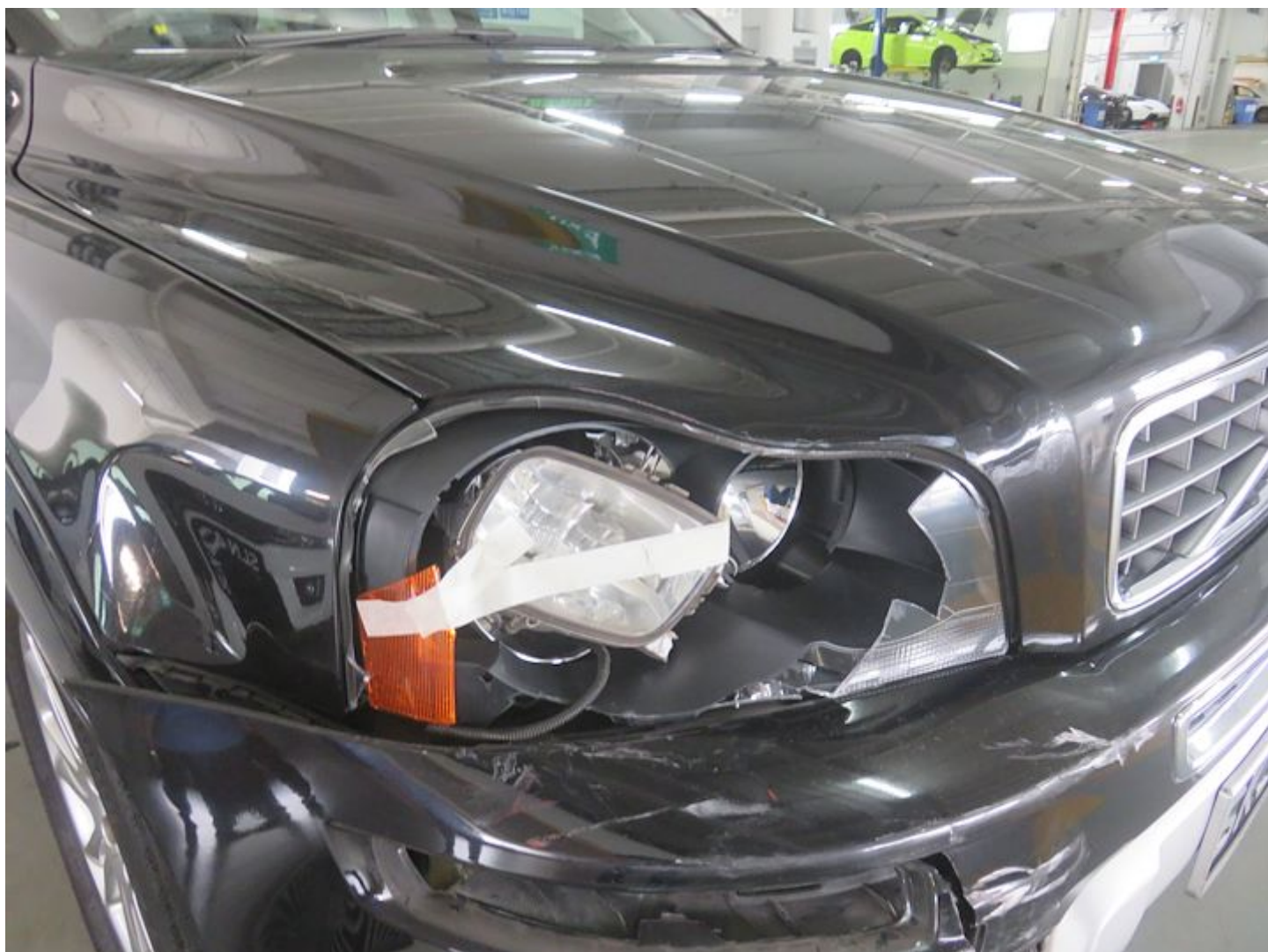

Witnessed by Reporting Centre
Personnel Angie Soh





















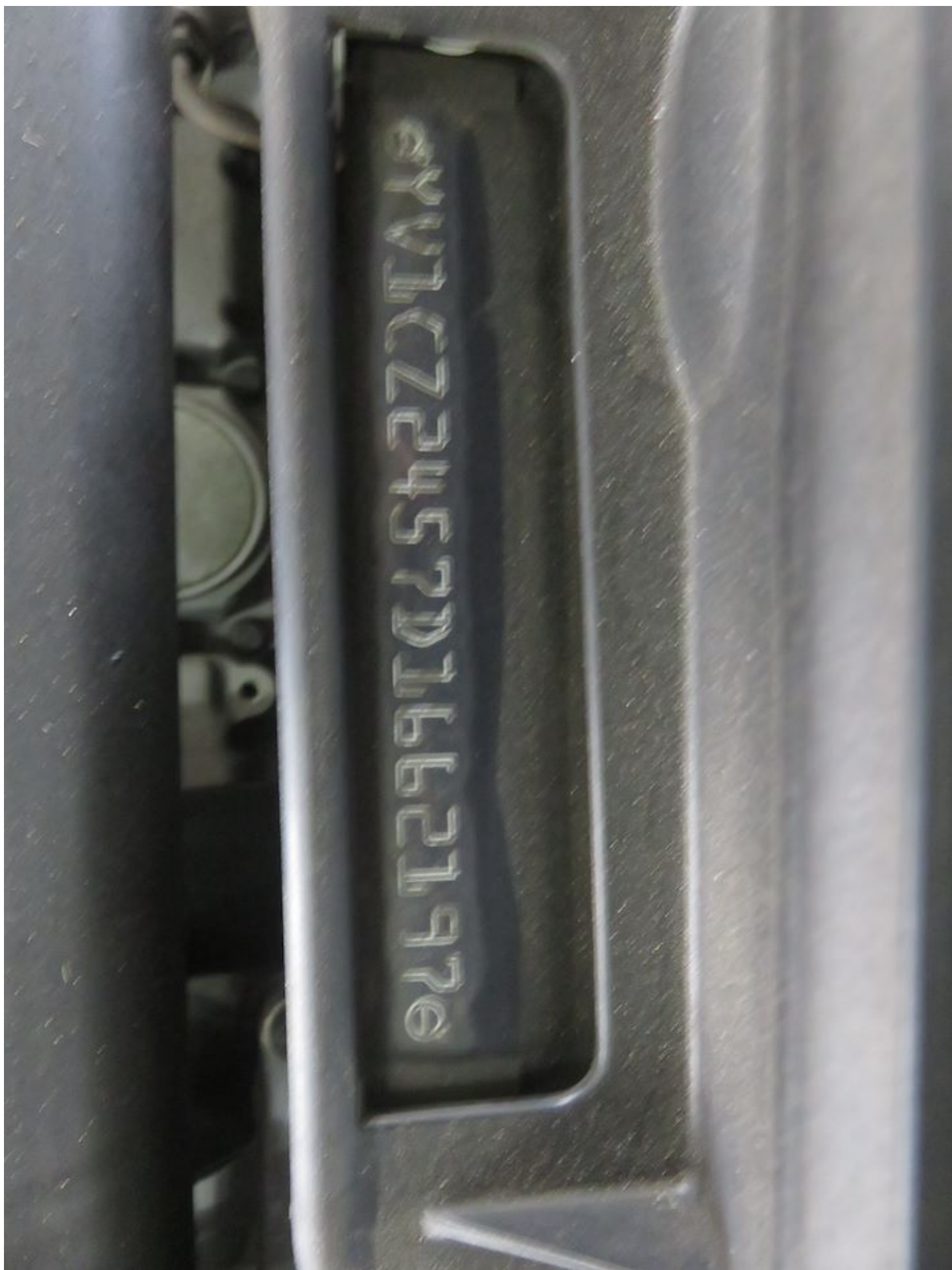


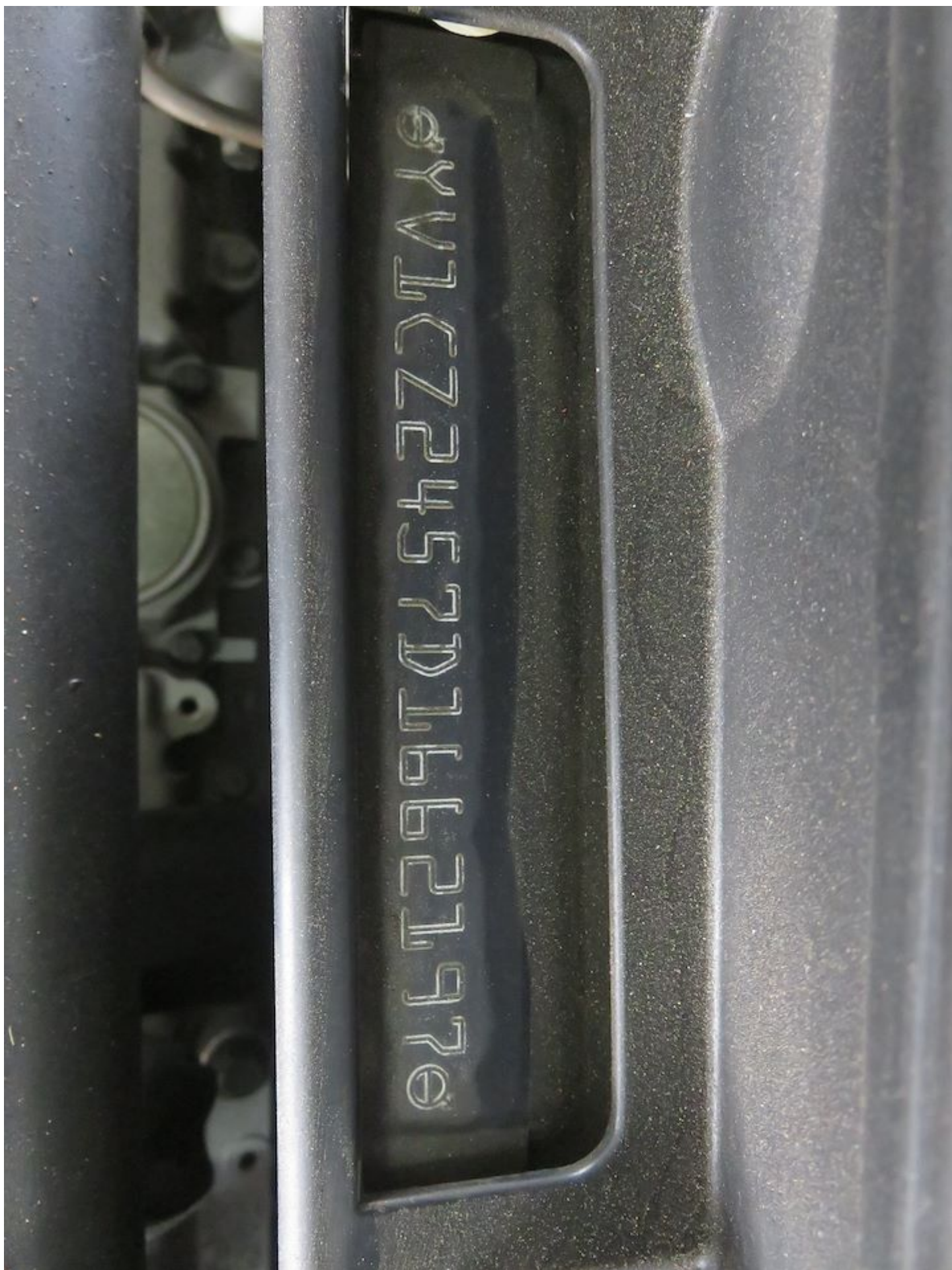














**SINGAPORE
POLICE FORCE**



T/20210724/7012

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3

Report No. T/20210724/7012

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/07/2021 12:54		Vide Report No.: D/20210724/0037		Station Diary No.:	
Informant's Particulars					
Name of Informant: YANG YUXI			Address: 25 JALAN TENANG SINGAPORE 277959		
ID Type / ID No.: NRIC NO / S8273893B			Contact No.: Home/Office: Mobile: 93879635		
Nationality: SINGAPORE CITIZEN			Email: jessieyangoh@gmail.com		
Sex: Female	Age: 38	Date of Birth: 20/11/1982	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Personal Assistant			Driving Licence Information: Class:		Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 24/07/2021 08:00	Type of Location: Straight Road
Location: TOH YI DRIVE				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control:		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of
SHB9629Y	TAXI				Slightly Damaged	0
SKJ2084L	Car	VOLVO	XC90	Brown	Slightly Damaged	1



**SINGAPORE
POLICE FORCE**



T/20210724/7012

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

2 of 3

Report No. T/20210724/7012

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Passenger			
Name	OH JIA QI AARON	ID No.	T0839729A
Related Vehicle	SKJ2084L (Car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL
Driver			
Name	YANG YUXI	ID No.	S8273893B
Related Vehicle	SKJ2084L (Car)	Contact No.	93879635
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

I was driving along Jalan Jurong Kechil at normal speed before Bukit Timah CC. The taxi SHB9629Y cut into the middle lane which I was in and suddenly stopped in front of my car to avoid a bus from the lane on my left. The taxi suddenly crossed into my path and stopped in front of me, I applied the brakes hard immediately but the front of my right bumper still knocked his back left bumper.



**SINGAPORE
POLICE FORCE**



T/20210724/7012

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3

Report No, T/20210724/7012

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPB /
ABDUL MUHAIMIN BIN HUSSAIN
Contact No.: 65476090

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
24/07/2021 12:54

Classification Of Case:



SINGAPORE POLICE FORCE

ACKNOWLEDGEMENT SLIP

Ref: Report No: 0/20210724/0037

I, SS Syahmir
(Recipient's Name, Contact No. / NRIC or Passport No. / Rank and No.)

of Tampines Police
(Address / Police Station / NPC / NPP)

hereby acknowledge receipt of the below mentioned items of:

- 1 One Thiruvananthapuram Pash Cam 64GB Micro SD Card -
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10

from Yang Yuxi
(Name, NRIC or Passport No. / Rank and No.)

of S82738938 / S820812
(Address / Police Station / NPC / NPP)

on 24/07/21 at _____
(Date) (Time)

Witnessed by / * Handed over by:
(* Delete if applicable)

[Signature]
(Signature)
Yang Yuxi S82738938
(Name, NRIC or Passport No. / Rank and No.)

Received by:

[Signature]
(Signature)
Sgt Syahmir
(Name, Contact No. / NRIC or Passport No. / Rank and No.)

Other Remarks: [Signature]



**SINGAPORE
POLICE FORCE**
SAFEGUARDING EVERY DAY

CASE CARD

Report Number: 0/20210724/650037
 Traffic Accident along Jln Jang Kudat → RT 6046
 Involving vehicles: 1 taxi & 1 car
 On 24/7/21 at about am / pm.

With reference to the above, you are advised to lodge a traffic accident report online via the Police E-Services website (<https://eservices.police.gov.sg>) within 24 hours.

NP315E (2019)

You are required to be present at Traffic Police on
 at am / pm to meet the Investigation Officer to assist in the investigation.

Please bring along your:

- a) Identity Card / Passport / Work Pass
- b) Driving License / Vocational License
- c) Vehicle Insurance / Medical Certificate
- d) Any other relevant documents (e.g. Video footages)

If you are unable to keep to the appointment, please contact:

IC: *Sufyan*
 Investigation Branch: 6547 6391

TEL: 6547 6390
 Email: SPF_TP_Invest_Branch@spt.gov.sg

NP315E (2019)

Motor Private Car

OKJ 2084L

MX1E

R SN

AN0083A

Cov. Type: C

CERTIFICATE OF INSURANCE

Motor Vehicles (Third Party Risks and Compensation) Act (Chapter 189)
 Motor Vehicles (Third Party Risks and Compensation) Rules, 1960
 Road Transport Act, 1987 (Malaysia)
 Motor Vehicles (Third Party Risks) Rules, 1959 (Malaysia)

CERTIFICATE No

DMPCSNW00038432104

Engine No B5254T4595186

Cha No YV1CZ2457D1662197

1. Index Mark and Registration
 Number of Vehicle

SKJ2084L

AUTOSAFE

2. Name of Policy Holder

YANG YUXI

3. Effective date of the Commencement of
 Insurance for the purposes of the Regulations,
 Ordinance or Enactment

28/02/2021
(00:00:00)

Named Drivers Ex Sect. I

S\$1,500.00

Additional Ex Other than Named Drivers:

Ex Sect. I - Age <= 25

S\$3,000.00

Ex Sect. I - Age >= 26

S\$500.00

* Age as at date of accident

EX ON WINDSCREEN

S\$100.00

5. Persons or Classes of Persons entitled to drive*

(a) The Policyholder.

(b) Any other person who is driving on the Policyholder's order or with his permission.

Provided that the person driving is permitted in accordance with the licensing or other laws or
 regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of
 a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor
 Vehicle.

6. Limitations as to use.*

Use for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover use for hire or reward tuition driving test racing pace-making, reliability trial, speed-testing, the carriage of
 goods other than samples in connection with any trade or business or use for any purpose in connection with the Motor Trade.
 Excess whichever is applicable for losses occurring outside Singapore (Constructive Total Loss/Theft) will be doubled. One time
 Waiver of Excess for the first S\$1,000 will apply to the Insured and Named Drivers in the event of Own Damage Claim at our
 Authorised Workshops for each Policy Year.

HIRE PURCHASE CO. : OCBC BANK LTD AS HP OWNER

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
 and Section 95 of the Road Transport Act 1987 (Malaysia), are not to be included under these headings.

I/We hereby Certify that the policy to which this Certificate relates is issued in accordance with the
 provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road
 Transport Act, 1987 (Malaysia).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By:

KCB AGENCY

Authorised Officer

KCB AGENCY

Co Reg No. 53116552C

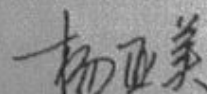
200 Jalan Sultan

#02-36B Textile Centre

Singapore 199018

Tel: 6391 3811 Fax: 6391 3810

E: kcbinv0236@gmail.com



Authorised Signatory

Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)

nson Road #16-00 Springleaf Tower Singapore 079909

☎ 6389 6111

☎ 6222 1033

🌐 www.sg.cntaiping.com