

# 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 ..... 11/08/2021 19:29 (SGT)  
Date of Accident ..... 11/08/2021 10:15 (SGT)  
Exact Location of Accident ..... Old Airport Rd, Singapore  
Additional Location Information ..... TOWARDS MOUNTBATTEN ROAD  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SMJ4043T

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... GRAB RENTALS PTE LTD  
Company Reg No ..... 201617200G  
Email Address ..... gr.sg.accident@grab.com  
Mobile Phone No ..... (Phone) +65-94311313  
Alternative Phone No ..... (Office) +65-66550005

### VEHICLE PARTICULARS

Manufacturer ..... Hyundai  
Model ..... OS KONA EV  
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 ..... Private hire  
Transmission ..... Auto  
CC ..... 1600

### INSURANCE COMPANY

Name of Insurance Company ..... India International Insurance Pte Ltd  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... Yes  
Policy Number ..... D21MFL0000447  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... KOH JIE MENG  
NRIC No ..... S9126726H

Date Of Birth .....	26/07/1991
Occupation .....	Outdoor
Date Of Driving Pass .....	11/12/2009
Driving experience .....	11 YEARS AND 8 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-94311313
Alt. Phone Number .....	-
Email Address .....	gr.sg.accident@grab.com
Address .....	BLK 210 YISHUN STREET 21 #07-45
Address complement .....	-
Postcode .....	760210
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 - Cross Junction
Weather Conditions .....	Raining
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 .....	Bedok Division Headquarters
Police Station Phone No .....	(Phone) +65-18002440000
Alt. Police Station Phone No .....	(Fax) +65-64443009
Police Station Address .....	30 Bedok North Road Singapore 469676
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT  
G/20210811/7020

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	No
Was there any audio recorded? .....	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	ES786G
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) .....	1

**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

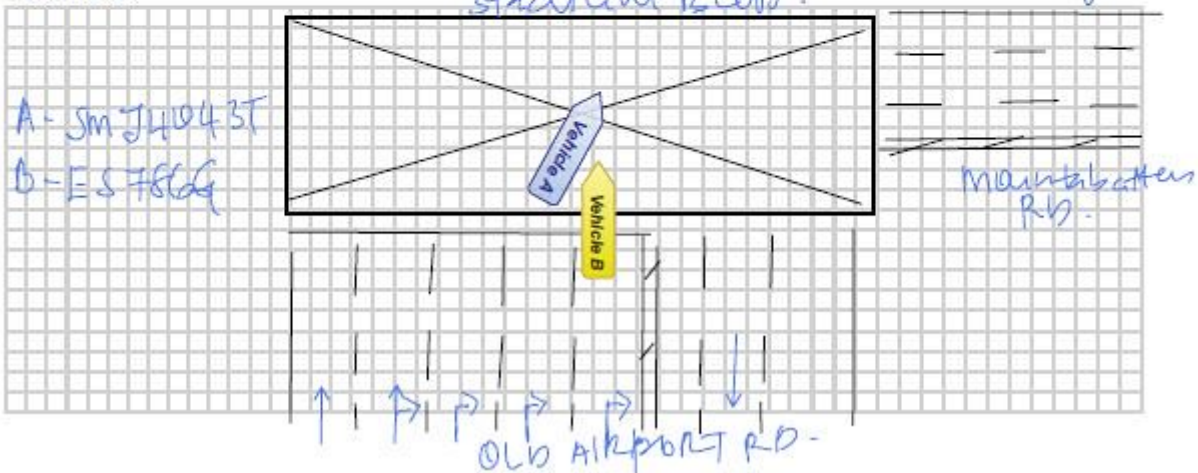
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

**Sketch Plan**



Describe Circumstances of the Accident

PLEASE REFER TO POLICE REPORT  
G/20210811/7020

**Declaration**

I/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



11/8/21 - 1320H



\_\_\_\_\_  
Witnessed by Reporting Centre  
Personnel

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**SINGAPORE  
POLICE FORCE**



G/20210811/7020

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POLICE REPORT (NP299)

Report No. G/20210811/7020

Police Station Of Origin  
Bedok Division HQ  
30 Bedok North Road SINGAPORE 469676  
Tel No:1800-2440000

Date/Time Report Made 11/08/2021 11:58	Vide Report No.	Station Diary No.
Name Of Informant KOH JIE MENG	Address 210 YISHUN STREET 21 #07-45 SINGAPORE 760210	
ID Type / ID No. NRIC NO / S9126726H	Contact No. Home/Office:	Mobile: 81598878
Nationality SINGAPORE CITIZEN	Email Address kjm@hotmail.sg	
Occupation Chief operating officer/General Manager	Sex Male	Age 30
Institution/School Name	Date of Birth 26/07/1991	Race Chinese
Date/Time Of Incident 11/08/2021 10:15	Location Of Incident 301 MOUNTBATTEN ROAD MOUNTBATTEN MRT STATION SINGAPORE 398006	

**Brief details.**

My car plate: SMJ4043T  
Hit and Run Car: ES786G

My car was hit at rear right by ES786G at the junction at Old Airport Road while turning right into Mountbatten Road.

The driver refused to stop and drove off into Nicoll Highway. Finally we stopped at the traffic light at

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 11/08/2021 11:58
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp



**SINGAPORE  
POLICE FORCE**



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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20210811/7020

Suntec City, I went over to ask her if she wants to stop. She acknowledged it but still continue to drive back to her home at 6 Rochalie Dr. And we finally exchanged details.

The hit and run driver is Mrs Shabana Abedeen Tyebally (NRIC S2205065F)

All front footage were recorded.

Subjects Involved			
<b>Suspect</b>			
Person Name	Mrs Shabana Abedeen Tyebally		
ID Type	NRIC NO	ID No	S2205065F
Gender	Female	Age	40-50
Address	6 Rochalie Drive SINGAPORE 248235		
<b>Victim</b>			
Person Name	KOH JIE MENG		
ID Type	NRIC NO	ID No	S9126726H
Gender	Male	Age	30
Race	Chinese	Language	English
Occupation	Chief operating officer/General Manager	Address	210 YISHUN STREET 21 #07- 45 SINGAPORE 760210
Mobile No	81598878	Is Informant A Victim?	Yes

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 11/08/2021 11:58
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp



**SINGAPORE  
POLICE FORCE**



G/20210811/7020

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20210811/7020

Person Name	KOH JIE MENG (Informant)
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Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 11/08/2021 11:58
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	



