

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 15/09/2021 15:26 (SGT)
Date of Accident 11/09/2021 17:10 (SGT)
Exact Location of Accident Bukit Batok West Ave 6, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJU6646T

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner TEO BAN CHENG
NRIC No S1347170C
Email Address YICHEN26TH@GMAIL.COM
Mobile Phone No (Phone) +65-90186796
Alternative Phone No (Home) +65-90186796

VEHICLE PARTICULARS

Manufacturer Mitsubishi
Model Colt
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? No - Claiming third party
Vehicle Category Private car
Transmission Auto
CC 0

INSURANCE COMPANY

Name of Insurance Company AXA Insurance Pte Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number GA571902/1
Cover Note Number -

DRIVER

Name of Driver TEO YI CHEN CYRUS
NRIC No S9739457A

Date Of Birth	30/10/1997
Occupation	Indoor
Date Of Driving Pass	22/01/2018
Driving experience	3 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90186796
Alt. Phone Number	-
Email Address	YICHEN26TH@GMAIL.COM
Address	APT BLK 194B BUKIT BATOK WEST AVE 6 #09-231
Address complement	-
Postcode	652194
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Child
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	UNKNOWN
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Choa Chu Kang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18007659999
Alt. Police Station Phone No	(Fax) +65-67644104
Police Station Address	No 20 Choa Chu Kang Street 52 #01-02 Singapore 689286
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO ATTACHED

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	SHD3564D
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

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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' law yers/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' law yers/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 law yers/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
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Sketch Plan

Before Hit Area

Hit Area

Veh A - 55U6646T

Veh B - SHD3564D

Describe Circumstances of the Accident

Platz refer to Police report no. T/2010913 / 2082

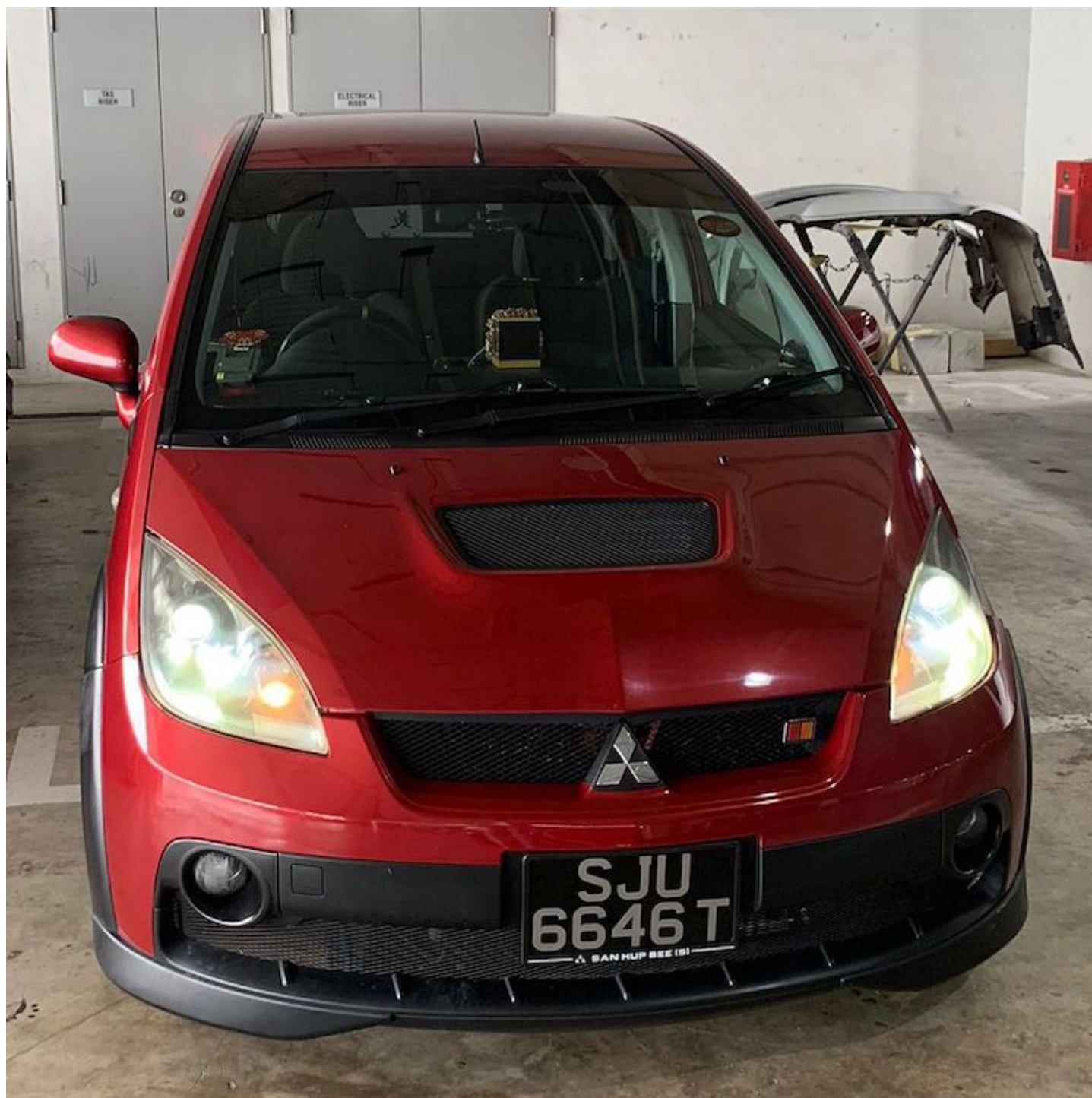
Declaration

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



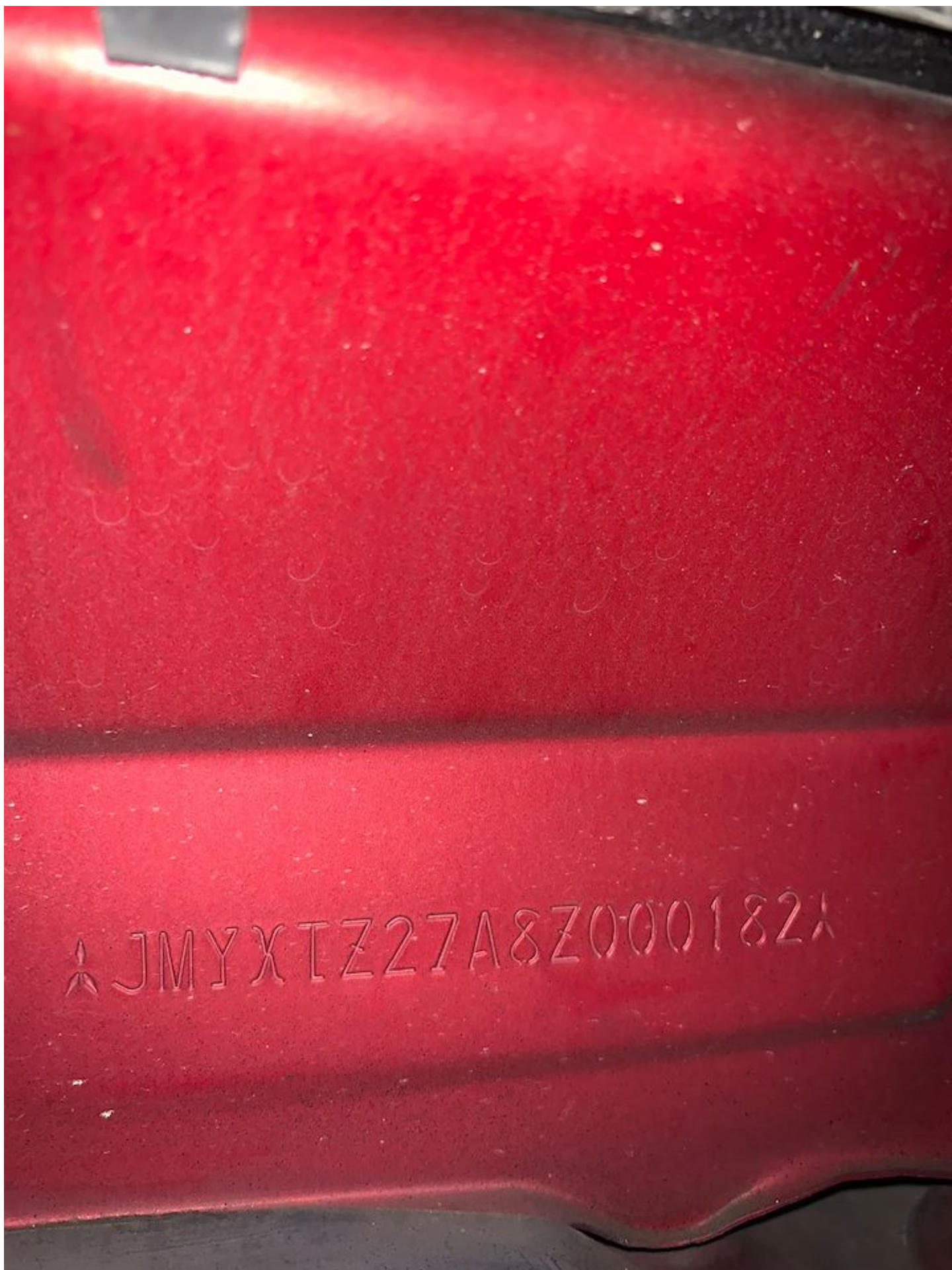


















**SINGAPORE
POLICE FORCE**



T/20210913/2082

1 of 4

Police Station Of Origin:
Choa Chu Kang N.P.C
20 Choa Chu Kang Street 52 #01-02
SINGAPORE 689286
Tel No: 1800-7659999

Report No. T/20210913/2082

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/09/2021 18:32	Vide Report No.:	Station Diary No.: 102
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Informant's Particulars			
Name of Informant: TEO YI CHEN CYRUS		Address: APT BLK 194B BUKIT BATOK WEST AVENUE 6 #09-231 SINGAPORE 652194	
ID Type / ID No.: NRIC NO / S9739457A		Contact No.: Home/Office: Mobile: 92212550	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 23	Date of Birth: 30/10/1997	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: SWABBER		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 11/09/2021 17:10	Type of Location: Carpark Gantry
Location: BUKIT BATOK WEST AVENUE 6				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: No Traffic	
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
SHD3564D	Car				No Damage	2
SJU6646T	Car				Slightly Damaged	1

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



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Report No. T/20210913/2082

CONTINUATION OF REPORT

Driver			
Name	GOH KIAN PENG		ID No. S6946235I
Related Vehicle	SHD3564D (Car)		Contact No. 84604633
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	TEO YI CHEN CYRUS		ID No. S9739457A
Related Vehicle	SJU6646T (Car)		Contact No. 92212550
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 the above date and time mentioned, I was driving my vehicle, SJU6646T as I was going back home from work. As I was about to enter the carpark gantry located at my block, I had to wait as there was a taxi, SHD3564D in front of me. The taxi was also trying to enter the carpark. However, I think that there was an issue with the gantry as it was not opening up for the taxi to drive on.

Due to this, the taxi decided to reverse slowly. I feel that the taxi was unaware that I was behind him as he eventually banged slightly onto my front bumper. Due to this collision, my front bumper was misaligned and there were a few scratches. That said, both of us then alighted our vehicles and exchanged particulars as we wanted to settle the matter privately. We then went our separate ways subsequently. No Traffic Police or Ambulance came as no one was injured and no Government property was damaged.

I then WhatsApp him as I already went to the workshop to see how much the repair would cost. Upon telling him, he then became uncontactable for awhile and suddenly replied me saying that he already lodged a Traffic Police report. I then follow suit and did the same as well as he also told me that he would not be paying anything and reasoning it by saying that both of our cars has no damage. When in fact, earlier on after the accident, he agreed to pay.

I would like to mention that I installed a dashcam in my car and it recorded everything when the accident happened.



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T/20210913/2082

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Report No. T/20210913/2082

CONTINUATION OF REPORT



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T/20210913/2082

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SINGAPORE 689286
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Report No. T/20210913/2082

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

J /

Sgt 2 MUHAMMAD ISKANDAR
BIN ROSSALI

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
13/09/2021 18:32

Officer In Charge Of Case:

TP / SIA
SITAN JEOK LENG
Contact No.: 65476151

Classification Of Case:

Authentication Stamp
NP166 SIGNATURE



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Sex: Male	Age: 23	Date of Birth: 30/10/1997	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: SWABBER			Driving Licence Information: Class: 3 Date of Expiry:		

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Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: No Traffic	
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
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SJU6646T	Car				Slightly Damaged	1

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No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA