

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	05/10/2021 14:57 (SGT)
Date of Accident	03/10/2021 09:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	CHANGI ROAD TOWARDS GEYLANG ROAD INFRONT OF GEYLANG SERAI TAXI STAND
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMK8495R
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TANG YOIK MIN
NRIC No	SXXXX159G
Email Address	CHARLIETANGYOIKMIN@GMAIL.COM
Mobile Phone No	(Phone) +65-87526982
Alternative Phone No	(Office) +65-87526982

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Prius
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 car
Transmission	Auto
CC	1497

INSURANCE COMPANY

Name of Insurance Company	Liberty Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	SD20V12397/VPL/R00
Cover Note Number	-

DRIVER

Name of Driver	TANG YOIK MIN
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NRIC No	SXXXX159G
Date Of Birth	31/03/1980
Occupation	Outdoor
Date Of Driving Pass	09/03/2015
Driving experience	6 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-87526982
Alt. Phone Number	(Office) +65-87526982
Email Address	CHARLIETANGYOIKMIN@GMAIL.COM
Address	BLK 149 LORONG 1 TOA PAYOH
Address complement	#11-919
Postcode	310149
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	Side Swipe
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	UNKNOWN
Gender	Male

PASSENGER 2

Name	UNKNOWN
Gender	Female

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 NO G/20211003/7055

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	SHD7242G
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	TANG YOIK MIN
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	RIGHT ELBOW,RIGHT KNEE AND NECK.
Injured person in which vehicle?	SMK8495R
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

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.

Chueh

Chueh

[Signature]

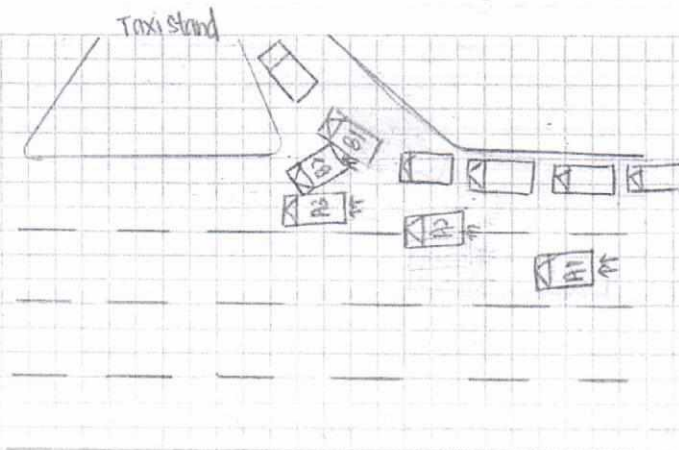
Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan

Changi Road towards Geylang
Road in front of Geylang Serai
Taxi Stand.



Vehicle A: SMK 845R
Vehicle B: SHD 7426

Describe Circumstances of the Accident

Refer to Police Report No: 61 2021/003 7055

Declaration

We declare the foregoing particulars are true in every respect.

Charlie

Policyholder's Signature / Date &
Time

Charlie

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

[Signature]

Witnessed by Reporting Centre
Personnel

Date of Accident : 3/10/2021 Accident Time: 0930hrs (24-HR-FORMAT)
Accident Place : Changi Road towards Geylang Road in front of Geylang Serai Taxi stand
Vehicle Reg. No (Car plate No.) : Smk 8495R Vehicle Make/Model: Toyota Prius C
Insurance Company : Liberty Policy No. SD20V12347/VPL/R00
Name of Registered Owner : Company/Individual Tang Yoik min
ID of Registered Owner : Co Reg No: - Owner's NRIC No: S8010159G
Co Contact No: - Owner's Contact No: 8752 6982

DRIVER'S Name : Tang Yoik min DRIVER'S NRIC No: S8010159G
DRIVER'S Date of Birth : 31 mar 1980 DRIVER'S License Pass Date 09 mar 2015

Relationship bet. Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Other: owner

DRIVER'S Address : APT Blk 149 Lorong 1 Toa Payoh #11-919 Singapore 310149

DRIVER'S Contact No./ Alt No. : 1) 8752 6982 2) -

DRIVER'S Occupation : INDOOR \ OUTDOOR (eg. working inside or outside of an ofc)

Email Address : charlie tangyoikmin@gmail.com

Weather & Road Surface : CLEAR & DRY \ RAINING & WET \ AFTER RAIN & WET

Reporting Type : Reporting Only \ Claim Other Party \ Claim Own Insurance

Number of Passengers (including Driver): 03 Passenger Name: unknown Gender: M/F
Was the accident reported to the police? YES \ NO Passenger Name: unknown Gender: M/F
Was there any video Captured by car camera: YES \ NO Any Injuries: YES \ NO Injured Name: Tang Yoik min
Injured Name: -
Exact purpose for which vehicle was being used at the time of accident: Private use \ Work purpose

Other Party Driver's Particulars (if any)

Vehicle Reg No: SHD7242G

Vehicle Reg No: -

Vehicle Make/Model: -

Vehicle Make/Model: -

Name DRIVER: -

Name DRIVER: -

IC No. DRIVER: -

IC No. DRIVER: -

DRIVER'S Contact & add: -

DRIVER'S Contact & add: -

Other Party Driver's Particulars (if any)

Vehicle Reg No: -

Vehicle Reg No: -

Vehicle Make/Model: -

Vehicle Make/Model: -

Name DRIVER: -

Name DRIVER: -

IC No. DRIVER: -

IC No. DRIVER: -

DRIVER'S Contact & add: -

DRIVER'S Contact & add: -



**SINGAPORE
POLICE FORCE**



G/2021 1003/7055

1 of 3

POLICE REPORT (NP299)

Report No. G/2021 1003/7055

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

Date/Time Report Made 03/10/2021 23:53		Vide Report No.		Station Diary No.	
Name Of Informant TANG YOIK MIN		Address 149 LORONG 1 TOA PAYOH #11-949 SINGAPORE 310149			
ID Type / ID No. NRIC NO / S8010159G		Contact No. Home/Office:		Mobile: 87526982	
Nationality SINGAPORE CITIZEN		Email Address CHARLIETANGYOIKMIN@GMAIL.COM			
Occupation Self employed		Sex Male	Age 41	Date of Birth 31/03/1980	Race Chinese
Institution/School Name		Language English			
Date/Time Of Incident 03/10/2021 09:30		Location Of Incident CHANGI ROAD			

Brief details.

On the stated date and time I was ferrying 2 malay passengers (1 male and 1 female) on board vehicle SMK8495R. I was traveling along Changi road towards Geylang road.

There were many taxis occupying the extreme right lane, queueing to enter the taxi stand of geylang serai market.

As my passengers had asked to be dropped off at Geylang serai, I proceeded to enter the extreme right

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:

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

Date/Time:
03/10/2021 23:53

Classification Of Case:



**SINGAPORE
POLICE FORCE**



G/20211003/7055

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20211003/7055

lane just after the entrance to said taxi stand.

Prior to entering the extreme right lane, I noticed that all the taxis in the queue were stationary and none had signalled their intentions to exit the queue.

Just as I was entering the lane after the queue of taxis, SHD7242G which was already halfway into the driveway of the taxi stand suddenly swerved out to the left to exit the queue.

As said taxi did not signal its intentions to do so, I was caught by complete surprise.

Despite swerving to my left in a bid to avoid collision and braking hard, said taxi still collided onto my vehicle's right portion.

The impact from the right caused my right knee to hit the door panel and my right elbow to hit onto the window.

Initially, only my right elbow and right knee was hurting a little. However, my neck started aching and became very stiff.

The pain got increasingly worse and I proceeded to a nearby clinic, Unihealth 24hr clinic Jurong East, from where I was at that time to seek treatment.

I was given 5 days MC.

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:

Signature Of Informant:

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

Date/Time:
03/10/2021 23:53

Classification Of Case:



**SINGAPORE
POLICE FORCE**



G/20211003/7055

3 of 3

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20211003/7055

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:

Signature Of Informant:

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

Date/Time:
03/10/2021 23:53

Classification Of Case:




Liberty
Insurance



Liberty Insurance Pte Ltd
Registration no.199002791D
51 Club Street
#03-00 Liberty House
Singapore 069428
Tel: (65) 6221 8611 Website: <http://www.libertyinsurance.com.sg>

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
ROAD TRANSPORT (AMENDMENT) ACT 2019
THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959

Certificate No	SD20V12397 /VPL /R00
From	MZ400B
Date Of Issue	18-MAY-2021
1.Index Mark and Registration No. of Vehicle:	SMK8495R
2.Chassis number of Vehicle:	JTDKD3B3701597339
3.Name of Policyholder:	TANG YOIK MIN
4.Effective date of Commencement of Insurance for the purpose of the Act:	07-OCT-2020 00:00 AM
5.Date of Expiry of Insurance:	27-DEC-2021 23:59 PM
6.Persons or Classes of Persons	
For Private Hire Vehicle (PHV) Usage :	
For Social, domestic & pleasure purposes : Any Authorised Drivers driving with the permission of the Policyholder.	
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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.	
A) Use for carriage of passengers or goods in connection with the Policyholder's business. B) Use for social, domestic and pleasure purposes.	
<div style="text-align: right;">For and on behalf of LIBERTY INSURANCE PTE LTD Approved Insurers  _____ Authorised Signature</div>	
8.Policy does not cover:	
For Information only: COVERAGE : Comprehensive, Unlimited Windscreen, PHV Extension (Geographical Area: Singapore only) SUM INSURED: MARKET VALUE AT THE TIME OF LOSS	
PLKH/CSMT/27-MAY-21 S3_CI_T1_T3_TEMPLATE1-VER1 27-MAY-21	