

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 06/10/2021 10:09 (SGT)
Date of Accident 03/10/2021 15:00 (SGT)
Exact Location of Accident Singapore
Additional Location Information AMK AVE 5 TWDS CTE(CHANGI)
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJZ8935U

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner MAH JIUNN PING(MA JUNPING)
NRIC No SXXXX704F
Email Address johnnygansh@yahoo.com.sg
Mobile Phone No (Phone) +65-93376599
Alternative Phone No +65-93376599

VEHICLE PARTICULARS

Manufacturer Nissan
Model Latio
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 1500

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DMPCSNW00012362100
Cover Note Number -

DRIVER

Name of Driver MAH JIUNN PING(MA JUNPING)
NRIC No SXXXX704F

Date Of Birth	15/08/1977
Occupation	Outdoor
Date Of Driving Pass	01/01/1998
Driving experience	23 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93376599
Alt. Phone Number	+65-93376599
Email Address	johnnygansh@yahoo.com.sg
Address	BLK 538 ANG MO KIO AVE 5
Address complement	#04-4036
Postcode	560538
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
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	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

PLS REFER TO THE ATTACHED STATEMENT.

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	SMT6714A
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SGQ3445H
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)	-

SKETCH PLAN

IMPORTANT NOTICE

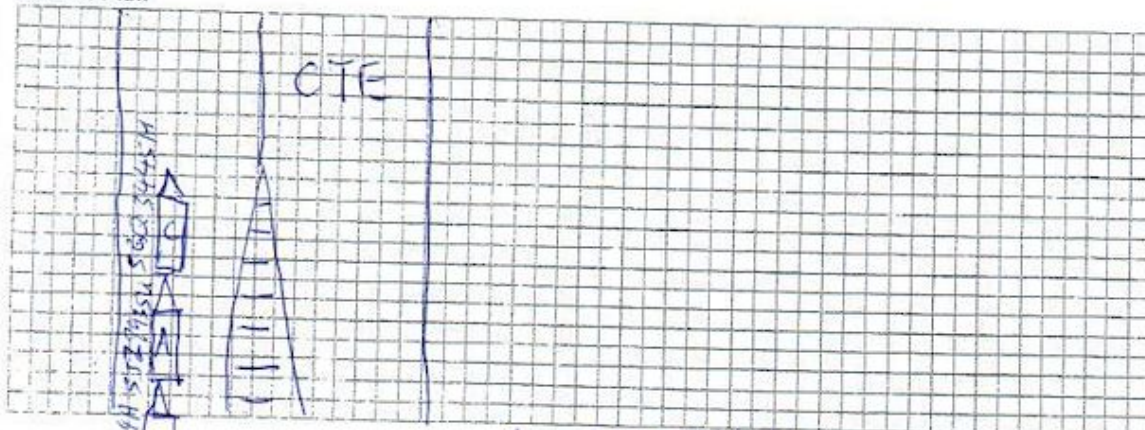
1. Please report correctly the details of the accident to speed up the claims process.
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7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available 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



A - SJZ 893SU
B - SMT 6714A
C - SGQ 3445H

Describe Circumstances of the Accident

On the day dated 03 October '21 around 3pm.
 My vehicle was turning from Ang Mo Kio Ave 5
 traffic light to the slip road towards CTE
 Along the way cut off sudden, a Honda car from
 behind bang into my car and eventually, my
 car move forward and hit another car in
 front.

Declaration

We declare the foregoing particulars are true in every respect.

[Signature] 3/10/21
 12pm
 Policyholder's Signature / Date &
 Time

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

[Signature] 06/10/21
 Witnessed by Reporting Centre
 Personnel



**SINGAPORE
POLICE FORCE**



T/20211005/7021

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

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Report No. T/20211005/7021

CONTINUATION OF REPORT

Passenger			
Name	Unknown Passenger		ID No. NIL
Related Vehicle	SMT6714A (Car)		Contact No. 96863375
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.

on the day dated 03 october 2021 around 3pm. I(SJZ8935U) was travelling along Amk ave 5 turning left into CTE(SLE) Slip Road. along the way, out of sudden A honda car (SMT6714A) from behind bang into my car and eventually, my car move forward and hit another car (SGQ3445H) infront. We exchanged particulars before driving off.























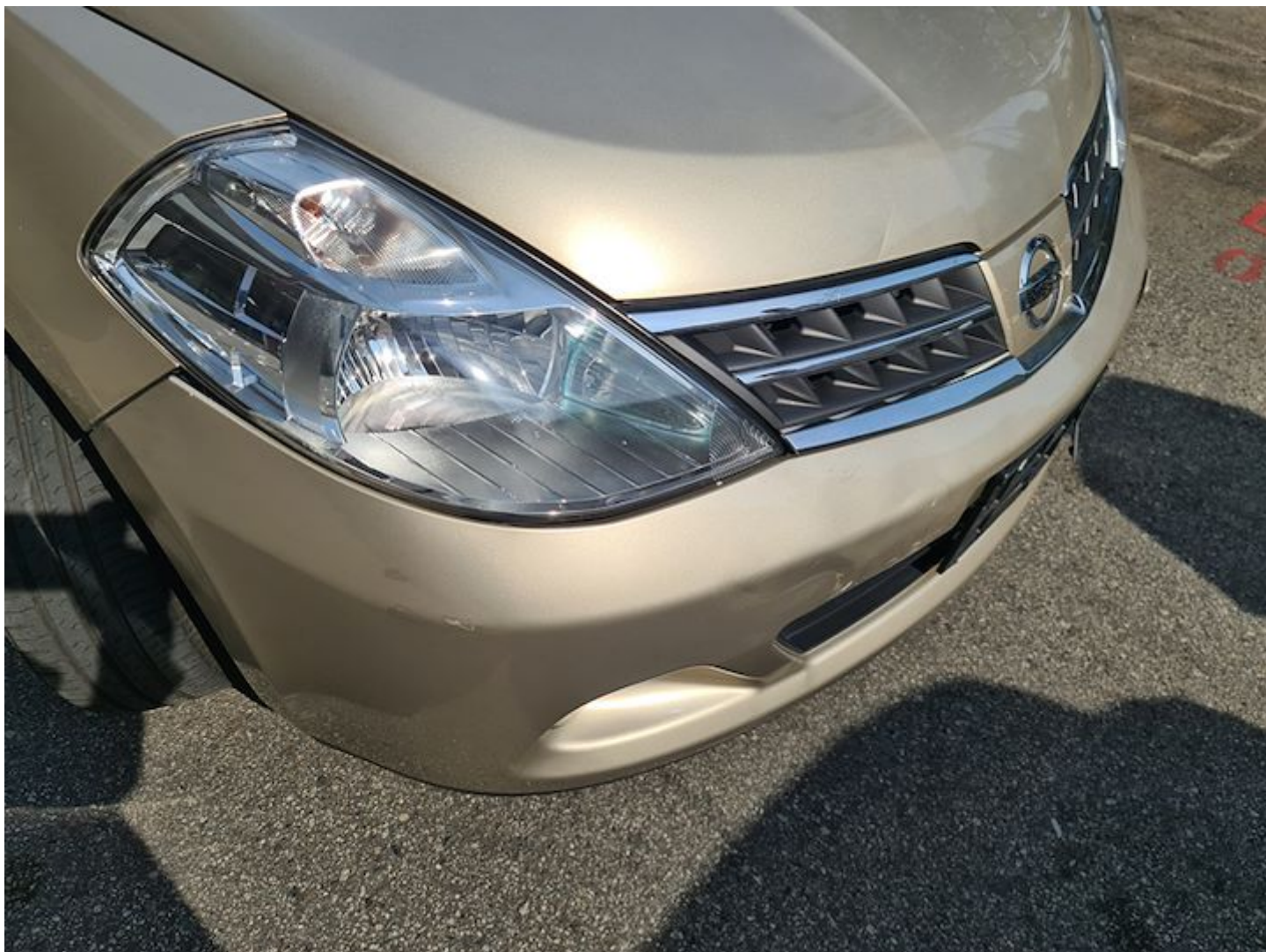















**SINGAPORE
POLICE FORCE**


T/20211005/7021

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

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Report No. T/20211005/7021

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/10/2021 13:53		Vide Report No.:	Station Diary No.:
Informant's Particulars			
Name of Informant: MAH JIUNN PING		Address: 538 ANG MO KIO AVENUE 5 #04-4036 SINGAPORE 560538	
ID Type / ID No.: NRIC NO / S7723704F		Contact No.: Home/Office: Mobile: 93376599	
Nationality: SINGAPORE CITIZEN		Email: garychivo@yahoo.com	
Sex: Male	Age: 44	Date of Birth: 15/08/1977	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: Lorry driver		Driving Licence Information: Class: 3,4,5 Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 03/10/2021 15:00	Type of Location: Bend
Location: ANG MO KIO DRIVE				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	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
SGQ3445H	Car	HONDA	civic	Silver	Slightly Damaged	1
SJZ8935U	Car	NISSAN	Latio	Gold	Slightly Damaged	0



**SINGAPORE
POLICE FORCE**

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



T/20211005/7021

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Report No. T/20211005/7021

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of
SMT6714A	Car	HONDA	civic	Gold	Seriously Damaged	1

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJZ8935U	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSNW000123 62100		

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Passenger			
Name	Unknown Passenger		ID No. NIL
Related Vehicle	SGQ3445H (Car)		Contact No. 92766711
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	MAH JIUNN PING		ID No. S7723704F
Related Vehicle	SJZ8935U (Car)		Contact No. 93376599
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Class: 3,4,5 Date of Expiry: NIL
Date	03/10/2021		Date 03/10/2021
No. of Days granted Medical Leave	05	Degree of	Slight



**SINGAPORE
POLICE FORCE**



T/20211005/7021

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

3 of 4

Report No. T/20211005/7021

CONTINUATION OF REPORT

Passenger			
Name	Unknown Passenger		ID No. NIL
Related Vehicle	SMT6714A (Car)		Contact No. 96863375
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.

on the day dated 03 october 2021 around 3pm. I(SJZ8935U) was travelling along Amk ave 5 turning left into CTE(SLE) Slip Road. along the way, out of sudden A honda car (SMT6714A) from behind bang into my car and eventually, my car move forward and hit another car (SGQ3445H) infront. We exchanged particulars before driving off.

**SINGAPORE
POLICE FORCE**

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10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000



T/20211005/7021

4 of 4

Report No. T/20211005/7021

CONTINUATION OF REPORTSketch 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 / TPHQ /
SYED ZAYID MUHAMMAD BIN SYED ABDUL
WAHID ALHINDUAN
Contact No.: 65476404

This report is lodged at Ang Mo Kio South NPC Kiosk 1
NP168

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

Date/Time:
05/10/2021 13:53

Classification Of Case: