

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 17:40 (SGT)
Date of Accident	06/10/2021 10:15 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	PIONEER RD NORTH TOWARDS JURONG WEST ST 91
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNB5198D
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHIA POH CHUNG (XIE BAOTONG)
NRIC No	SXXXX884J
Email Address	ANGGORDAN.X@GMAIL.COM
Mobile Phone No	(Phone) +65-96839358
Alternative Phone No	(Office) +65-96839358

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Freed
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1496

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	DMHCSNW00009182100
Cover Note Number	-

DRIVER

Name of Driver	CHIA POH CHUNG (XIE BAOTONG)
NRIC No	SXXXX884J

Date Of Birth	18/05/1971
Occupation	Outdoor
Date Of Driving Pass	12/09/2012
Driving experience	9 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-96839358
Alt. Phone Number	(Office) +65-96839358
Email Address	ANGGORDAN.X@GMAIL.COM
Address	1 DUNDEE ROAD
Address complement	#18-13
Postcode	149456
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 - Major/Minor Rd
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)	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 NO:G/20211006/7047

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	GBG3663G
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle

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	CHIA POH CHUNG (XIE BAOTONG)
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	LEFT ANKLE,LEFT WRIST AND NECK AREA.
Injured person in which vehicle?	SNB5198D
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

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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

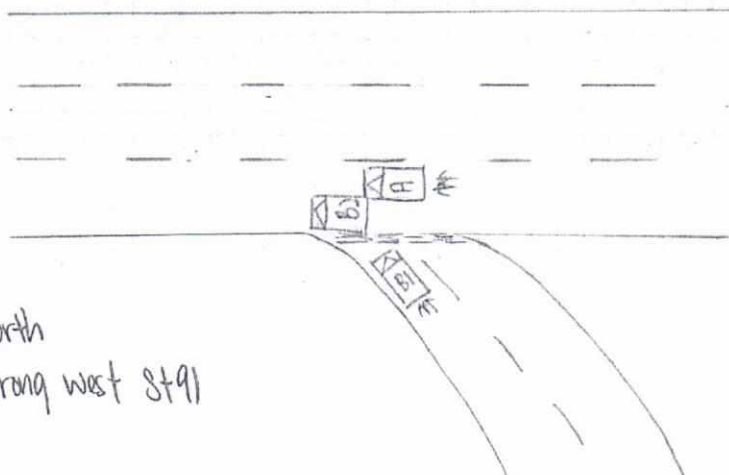
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Vehicle A: SNB5198D
Vehicle B: GBA3663A

Describe Circumstances of the Accident

Refer to Police Report No: G 2021/1006 / 7047

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

Date of Accident : 06/10/2021 Accident Time: 1015hrs (24-HR-FORMAT)
Accident Place : Pioneer Rd North towards Jurong West St 91
Vehicle Reg. No (Car plate No.) : SNB5198D Vehicle Make/Model: Honda Freed
Insurance Company : China Taiping Policy No. DMHCSNW00009182100
Name of Registered Owner : Company / Individual (Chia Poh Chung (Xie BaoTong))
ID of Registered Owner : Co Reg No: - Owner's NRIC No: S7116884J
Co Contact No: - Owner's Contact No: 96839358

DRIVER'S Name : Chia Poh Chung (Xie BaoTong) DRIVER'S NRIC No: S7116884J

DRIVER'S Date of Birth : 18 May 1971 DRIVER'S License Pass Date 12 Sep 2012

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

DRIVER'S Address : 1 Dundee Road #18-13 Singapore 149456

DRIVER'S Contact No / Alt No. : 1) 96839358 2) -

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

Email Address : anggordon.x@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): 01 Passenger Name: _____ Gender: M/F

Was the accident reported to the police? YES / NO Passenger Name: _____ Gender: M/F

Was there any video captured by car camera: YES / NO Any Injuries: YES / NO Injured Name: Chia Poh Chung

Exact purpose for which vehicle was being used at the time of accident: Private use / Work purpose
Injured Name: _____

Other Party Driver's Particulars (if any)

Vehicle Reg No: G8G3663G

Vehicle Reg No: _____

Vehicle Make/Model: _____

Vehicle Make/Model: _____

Name DRIVER: _____

Name DRIVER: _____

ID No. DRIVER: _____

ID 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: _____

ID No. DRIVER: _____

ID No. DRIVER: _____

DRIVER'S Contact & add: _____

DRIVER'S Contact & add: _____



**SINGAPORE
POLICE FORCE**



G/20211006/7047

1 of 2

POLICE REPORT (NP299)

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

Report No. G/20211006/7047

Date/Time Report Made 06/10/2021 14:24	Vide Report No.	Station Diary No.
Name Of Informant CHIA POH CHUNG	Address 1 DUNDEE ROAD #18-13 SINGAPORE 149456	
ID Type / ID No. NRIC NO / S7116884J	Contact No. Home/Office: Mobile: 96839358	
Nationality SINGAPORE CITIZEN	Email Address CHIAPOHCHUNG@YAHOO.COM	
Occupation Self Employed	Sex Male	Age 50
	Date of Birth 18/05/1971	Race Chinese
Institution/School Name	Language English	
Date/Time Of Incident 06/10/2021 10:15	Location Of Incident PIONEER ROAD NORTH	

Brief details.

On the above mentioned date and time, I was driving my vehicle SNB5198D along Pioneer Road North towards Jurong West St 91 direction.

I was travelling along the extreme left lane and was going straight when suddenly, GBG3663G, dashed out from the slip road of PIE towards Pioneer Road North.

Despite already slowing down before approaching the slip road on my left, I could not stop in time and collided with the rear right portion of GBG3663G.

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: 06/10/2021 14:24
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE
POLICE FORCE**



G/20211006/7047

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20211006/7047

The impact caused my body to lunge forward only to be restrained by my seat belt.

I knocked my left knee against the underside of the dashboard as a result of the collision.

After the accident, I started feeling aches and pains over my left ankle, left wrist and Neck area.

My left ankle also started to swell.

As such, I proceeded to my family doctor at Shalom Clinic & Surgery for treatment later in the afternoon where 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:
06/10/2021 14:24

Classification Of Case:



中国太平
CHINA TAIPING

中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Hire Car

MZ406L/B

N SN

AN0055A

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.

DMHCSNW00009182100

Engine No.: LEB7259082

Cha. No.: GB73149734

1. Index Mark and Registration
Number of Vehicle

SNB5188D

AUTOSAFE

2. Name of Policy Holder

CHIA POH CHUNG (XIE BAOTONG)

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

26/08/2021
(14:30:23)

Excess Sect. I. S\$1,250.00

Excess Sect. I (Outside Singapore) S\$2,500.00

Excess Sect. II S\$1,250.00

Excess Sect. II (Outside Singapore) S\$2,500.00

EX ON WINDSCREEN. S\$100.00

4. Date of Expiry of Insurance

25/08/2022

5. Persons or Classes of Persons entitled to drive*

As per Named Driver(s) stated below.

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.

CHIA POH CHUNG (XIE BAOTONG)

6. Limitations as to use:

- (1) Use for the carriage of passengers or goods in connection with the Policyholder's business.
- (2) Use for social domestic pleasure purposes and business purposes of any person to whom the vehicle is hired.

The Policy does not cover

- (1) Use for racing, pace-making, reliability trial or speed-testing.
- (2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

HIRE PURCHASE CO.: GOLDBELL FINANCIAL SERVICES PTE. LTD.

* 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: COWELL INSURANCE (AGENCY) PTE LTD
Authorised Officer

杨正美

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)
3 Anson Road #16-00 Springleaf Tower Singapore 079909

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☎ 6222 1033

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