

# 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 ..... 22/10/2021 15:52 (SGT)  
Date of Accident ..... 22/10/2021 11:45 (SGT)  
Exact Location of Accident ..... Near 6 Ang Mo Kio Street 44, Singapore 569253  
Additional Location Information ..... CTE TOWARDS ANG MO KIO AVE 3  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SHD9953A

## INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... TRANS-CAB SERVICES PTE LTD  
Company Reg No ..... 2XXXXX878K  
Email Address ..... Claims@transcab.com.sg  
Mobile Phone No ..... (Phone) +65-62876666  
Alternative Phone No ..... (Office) +65-62876666

## VEHICLE PARTICULARS

Manufacturer ..... Toyota  
Model ..... Prius  
Variant ..... DR HATCHBACK (AUTO)  
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 ..... Taxi  
Transmission ..... Auto  
CC ..... 1767

## INSURANCE COMPANY

Name of Insurance Company ..... AXA Insurance Pte Ltd  
Type of Coverage ..... ThirdParty  
Fleet Policy ..... Yes  
Policy Number ..... VFX/P2413997  
Cover Note Number ..... -

## DRIVER

Name of Driver ..... TAN HOCK NAM  
NRIC No ..... SXXXX473Z

Date Of Birth	30/11/1977
Occupation	Outdoor
Date Of Driving Pass	18/01/2008
Driving experience	13 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98348997
Alt. Phone Number	-
Email Address	Claims@transcath.com.sg
Address	771 YISHUN AVE 3
Address complement	#08-239
Postcode	760771
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	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	5
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	P1
Gender	Male

#### DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

#### CIRCUMSTANCES OF ACCIDENT

I WAS TRAVELLING ALONG CTE TOWARDS ANG MO KIO AVE 3. WHEN I SAW VEHICLE IN FRONT OF ME CAME TO A STOP, I APPLIED MY BRAKE AND STOPPED IN TIME. AFTER FEW SECONDS, I FELT AN IMPACT AND NOTICED HAD VEHICLE B HAD COLLIDED ONTO REAR OF MY VEHICLE.

#### ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	VIDEO HAAS BEEN FORWARD TO AXA INSURANCE
Was there any audio recorded?	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBJ7725U
Vehicle Manufacturer	Nissan
Vehicle Model	Nv200



Vehicle Variant	
Vehicle Colour	Gray
Vehicle Category	Commercial vehicle
Name of Driver	TAN BOON WEE
NRIC No	SXXXX247G
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	SKB3652H
Vehicle Manufacturer	BMW
Vehicle Model	320i
Vehicle Variant	
Vehicle Colour	
Vehicle Category	Private car
Name of Driver	NA
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 3

Vehicle Registration Number	SMV8150C
Vehicle Manufacturer	Nissan
Vehicle Model	X-trail
Vehicle Variant	
Vehicle Colour	
Vehicle Category	Private car
Name of Driver	NA
Contact Number	
Address	
Address complement	
Postcode	
Insurance Company Name	
Nature Of Damage	
Details of property damaged in accident	
No. Of Passenger (Including Driver)	

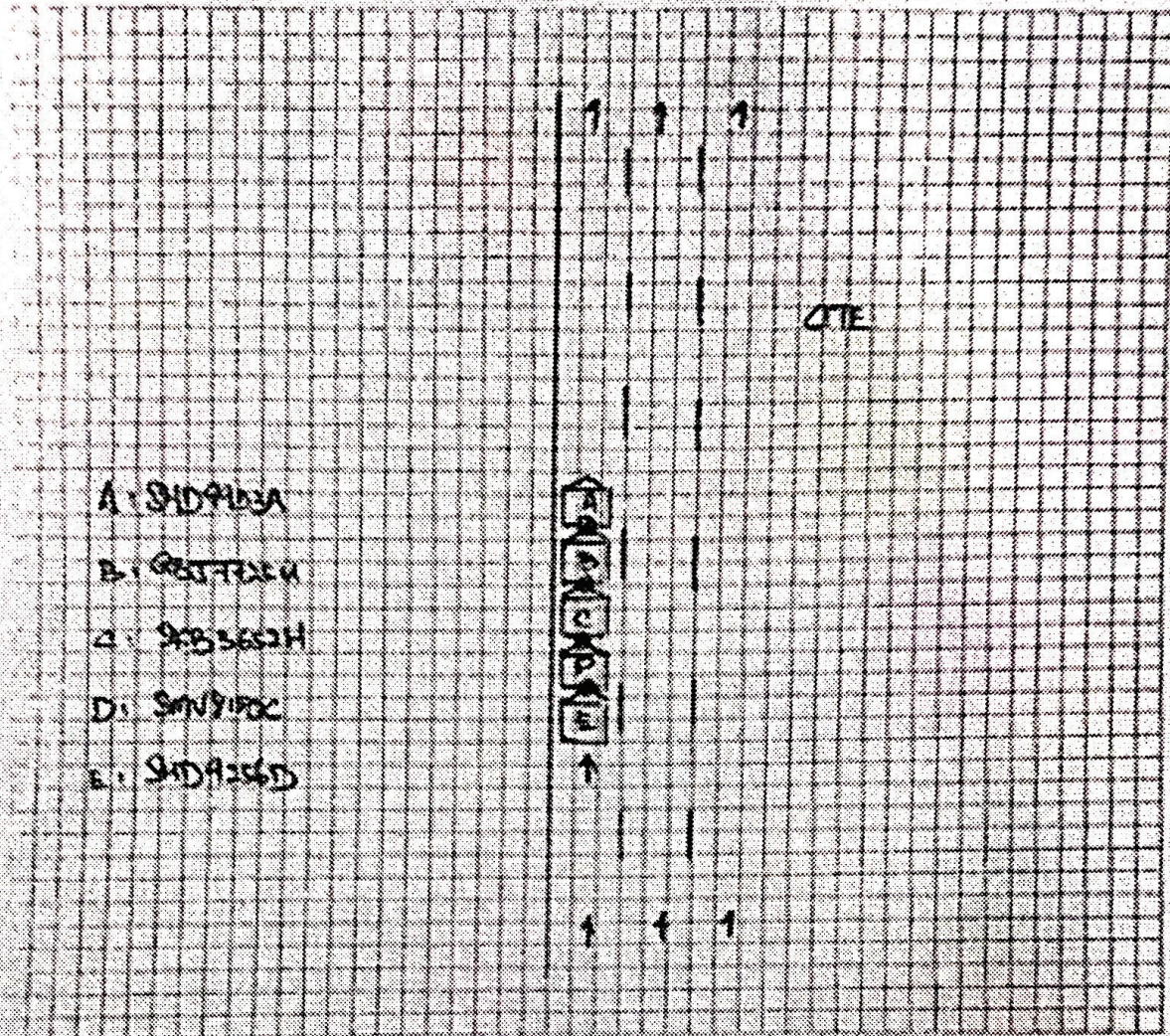
#### DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number	SHD9256D
Vehicle Manufacturer	Toyota
Vehicle Model	Prius
Vehicle Variant	
Vehicle Colour	
Vehicle Category	Taxi
Name of Driver	NA
Contact Number	
Address	
Address complement	
Postcode	
Insurance Company Name	
Nature Of Damage	



## ACCIDENT DIAGRAM

X3111



A: SHD9103A

B: GBT7726W

C: SGB3662H

D: SMV8190C

E: SHD91256D

VERIFIED BY AJAX MARS (ARC)  
REPORTING OFFICER  
WONG JUN KEAT

Policyholder's Signature  
Date & Time:

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

Reporting Centre Personnel's Signature  
Name:  
NR/C/TIN No.: