

# 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 ..... 30/11/2021 16:05 (SGT)  
Date of Accident ..... 29/11/2021 18:45 (SGT)  
Exact Location of Accident ..... 600 Upper Thomson Rd, Singapore 574421  
Additional Location Information ..... ALONG UPPER THOMSON  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SMN5165Y

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... ADVANCE CR PTE. LTD.  
Company Reg No ..... 201320997M  
Email Address ..... PEIJIE@EXPRESSCAR.COM.SG  
Mobile Phone No ..... (Phone) +65-92342543  
Alternative Phone No ..... +65-0

### VEHICLE PARTICULARS

Manufacturer ..... Honda  
Model ..... Freed  
Variant ..... HYBRID 1.5G 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 ..... Private hire  
Transmission ..... Auto  
CC ..... 1496

### INSURANCE COMPANY

Name of Insurance Company ..... NTUC Income Insurance Co-operative Ltd  
Type of Coverage ..... ThirdPartyFireTheft  
Fleet Policy ..... Yes  
Policy Number ..... 5121553281  
Cover Note Number ..... 5121553281-000011

### DRIVER

Name of Driver ..... YUN HONG MENG  
NRIC No ..... S1232444H

|  |                                    |
|--|------------------------------------|
| Date Of Birth .....  | 28/10/1957                         |
| Occupation .....   | Outdoor                            |
| Date Of Driving Pass .....   | 14/12/1978                         |
| Driving experience .....   | 42 YEARS AND 11 MONTHS             |
| Gender .....   | Male                               |
| Mobile Number .....  | (Phone) +65-96696676               |
| Alt. Phone Number .....  | -                                  |
| Email Address .....  | PEIJIE@EXPRESSCAR.COM.SG           |
| Address .....  | BLK 40 JALAN RUMAH TINGG0I #18-274 |
| Address complement .....   | -                                  |
| Postcode .....   | 151040                             |
| 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 .....   | 3   |
| Was anybody injured in the Accident? .....  | Yes |
| Was any injured conveyed to hospital by ambulance? .....  | Yes |
| 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 ..... | Male    |

#### DETAILS OF POLICE ACTION

|   |   |
|---|---|
| Was the accident reported to the police? .....  | Yes   |
| Police Station Name .....                       | Kaki Bukit Neighbourhood Police Post                  |
| Police Station Phone No .....                   | (Phone) +65-18004429999                               |
| Alt. Police Station Phone No .....              | (Fax) +65-62444377                                    |
| Police Station Address .....                    | Blk 526 Bedok North Street 3 #01-448 Singapore 460526 |
| Was notice of intended Prosecution given? ..... | No  |
| If yes, against whom? .....                     | -   |

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO SKETCH PLAN AND POLICE REPORT

#### 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 ..... | FBM5500Z |
| Vehicle Manufacturer .....        | Honda    |

|   |                          |
|---|--------------------------|
| Vehicle Model .....                           | Adv 750                  |
| Vehicle Variant .....                         | -                        |
| Vehicle Colour .....                          | Black                    |
| Vehicle Category .....                        | Motorcycle               |
| Name of Driver .....                          | MUHAMMAD IRFAN BIN AZMAN |
| NRIC No .....                                 | S9345724B                |
| Contact Number .....                          | (Phone) +65-87484753     |
| 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 .....             | SLE5941H             |
| Vehicle Manufacturer .....                    | Mazda                |
| Vehicle Model .....                           | 2                    |
| Vehicle Variant .....                         | -                    |
| Vehicle Colour .....                          | -                    |
| Vehicle Category .....                        | Private car          |
| Name of Driver .....                          | YAP TECK CHUAN       |
| NRIC No .....                                 | S1130484B            |
| Contact Number .....                          | (Phone) +65-96773786 |
| 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 .....                              | MUHAMMAD IRFAN BIN AZMAN |
| Gender .....  | Male                     |
| Phone No .....  | (Phone) +65-87484753     |
| Address .....   | -                        |
| Address Complement .....                                  | -                        |
| Post Code .....   | -                        |
| Approximate Age Years Old .....                           | -                        |
| Injuries Sustained .....                                  | -                        |
| Injured person in which vehicle? .....                    | FBM5500Z                 |
| Were seat belts worn? .....                               | No                       |
| Was this injured conveyed to hospital by ambulance? ..... | Yes                      |

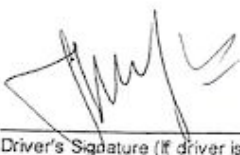
Describe Circumstances of the Accident

*Refer to Police Report*

**Declaration**

I/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

# 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' 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

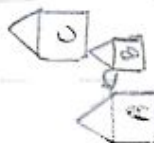
Sketch Plan

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



Witnessed by Reporting Centre Personnel

A: CMN5165Y  
B: FBM55002  
C: SLE5941H


























**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Kaki Bukit NPP  
526 Bedok North Street 3 #01-448  
SINGAPORE 460526  
Tel No: 1800-4429999



T/20211130/2036

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Report No. T/20211130/2036

## CONTINUATION OF REPORT

| Details of Person Involved        |                          |  |                                   |
|-----------------------------------|--------------------------|--|-----------------------------------|
| Any Pedestrian Involved: No       |                          |  |                                   |
| No. of Pedestrians Injured: NIL   |                          | Use of Pedestrian Crossing: NA         |                                   |
| <b>Rider</b>                      |                          |  |                                   |
| Name                              | MUHAMMAD IRFAN BIN AZMAN | ID No.                                 | S9345724B                         |
| Related Vehicle                   | FBM5500Z (Motorcycle)    | Contact No.                            | 87484753                          |
| Hospital/Clinic                   | NIL                      | Class of Driving Licence & Expiry Date | Class: NIL<br>Date of Expiry: NIL |
| Date Treatment                    | NIL                      | Date Discharge                         | NIL                               |
| No. of Days granted Medical Leave | NIL                      | Degree of Injury                       | NIL                               |
| <b>Driver</b>                     |                          |  |                                   |
| Name                              | YAP TECK CHUAN           | ID No.                                 | S1130484B                         |
| Related Vehicle                   | SLE5941H (Car)           | Contact No.                            | 96773786                          |
| Hospital/Clinic                   | NIL                      | Class of Driving Licence & Expiry Date | Class: NIL<br>Date of Expiry: NIL |
| Date Treatment                    | NIL                      | Date Discharge                         | NIL                               |
| No. of Days granted Medical Leave | NIL                      | Degree of Injury                       | NIL                               |
| <b>Driver</b>                     |                          |  |                                   |
| Name                              | YUN HONG MENG            | ID No.                                 | S1232444H                         |
| Related Vehicle                   | SMN5165Y (Car)           | Contact No.                            | 96696676                          |
| Hospital/Clinic                   | NIL                      | Class of Driving Licence & Expiry Date | Class: 3<br>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 29/11/2021 at 1900hrs I was travelling along the said location at the 3rd lane, the left most lane going straight. All of a sudden, I felt an impact from my right side of my vehicle(SMN5165Y). I had then exited and saw a motorcyclist(FBM5500Z) and his pillion had fallen onto the ground after hitting my vehicle on the right side. After getting to know from a witness, the motorcycle(FBM5500Z) was travelling on the 2nd lane the middle lane and was behind the other vehicle(SLE5941H). As other vehicles had braked to slow down and stop, the other car(SLE5941H) had also done the same thing. The motorcycle(FBM5500Z) was too late and collided into the vehicle before falling onto the left and hitting onto my vehicle. There was a black police car which was travelling at the back of the traffic and they had



**SINGAPORE  
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T/20211130/2036

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526 Bedok North Street 3 #01-448  
SINGAPORE 460526  
Tel No: 1800-4429999

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Report No. T/20211130/2036

**CONTINUATION OF REPORT**

to render assistance, traffic police and paramedics were called for and shortly they came. The paramedics had taken the pillion who was injured to the nearest hospital while the traffic police had taken our in car dash camera SD card for investigation.

