

## 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 ..... 16/12/2021 13:02 (SGT)  
Date of Accident ..... 15/12/2021 17:15 (SGT)  
Exact Location of Accident ..... Jln Eunus, Singapore  
Additional Location Information ..... ALONG JALAN EUNUS FROM STILL ROAD TOWARDS PIE  
CHANGI  
Country/State of Loss ..... Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... GBE7362J

#### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... TRINUTTY LIMITED LIABILITY PARTNERSHIP  
Company Reg No ..... T17LL1751E  
Email Address ..... TRINUTTYSG@GMAIL.COM  
Mobile Phone No ..... (Phone) +65-84885755  
Alternative Phone No ..... +65-84885755

#### VEHICLE PARTICULARS

Manufacturer ..... Renault  
Model ..... Kangoo  
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? ..... Yes  
Vehicle Category ..... Goods vehicle  
Transmission ..... Manual  
CC ..... 1461

#### INSURANCE COMPANY

Name of Insurance Company ..... China Taiping Insurance (Singapore) Pte. Ltd.  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... DMCVSNW00142072100  
Cover Note Number ..... -

#### DRIVER

Name of Driver ..... POH JI EN TREVOR

NRIC No .....	S9602929B
Date Of Birth .....	24/01/1996
Occupation .....	Indoor
Date Of Driving Pass .....	14/12/2017
Driving experience .....	4 YEARS
Gender .....	Male
Mobile Number .....	(Phone) +65-84885755
Alt. Phone Number .....	-
Email Address .....	TREVORPOH.JE@GMAIL.COM
Address .....	BLK 255 SIMEI STREET 1 #04-507
Address complement .....	-
Postcode .....	520255
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	PARTNER
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 - Head to Rear
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? .....	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 .....	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

AS PER SKETCH PLAN & POLICE REPORT NO G/20211215/7102 ATTACHED.

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	Yes
Was there any audio recorded? .....	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SHA9173A
Vehicle Manufacturer .....	Hyundai
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	Yellow

Vehicle Category .....	Taxi
Name of Driver .....	TAN MENG CHONG
NRIC No .....	S1152651I
Contact Number .....	(Phone) +65-90094618
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	REAR
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	2

SKETCH PLANIMPORTANT NOTICE

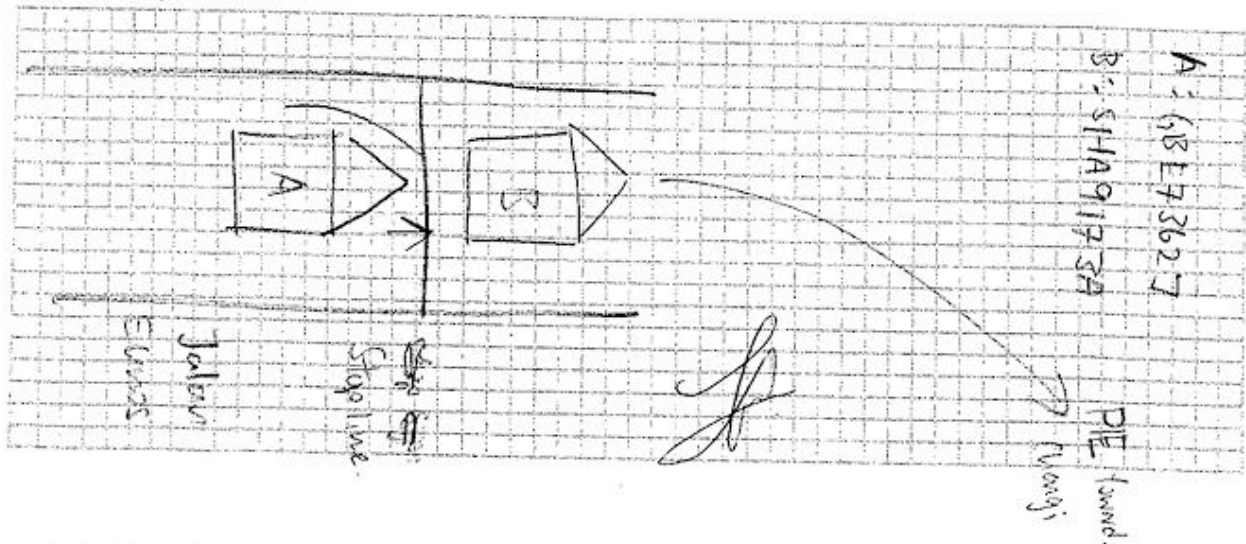
1. Please report correctly the details of the accident to speed up the claims process.
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3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
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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**

Describe Circumstances of the Accident

As per attached Police Report No.  
G20211215/7102  
dated 15/12/2021 @ 1944 hrs.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

*[Signature]*

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

16 Dec 2021 1040hrs

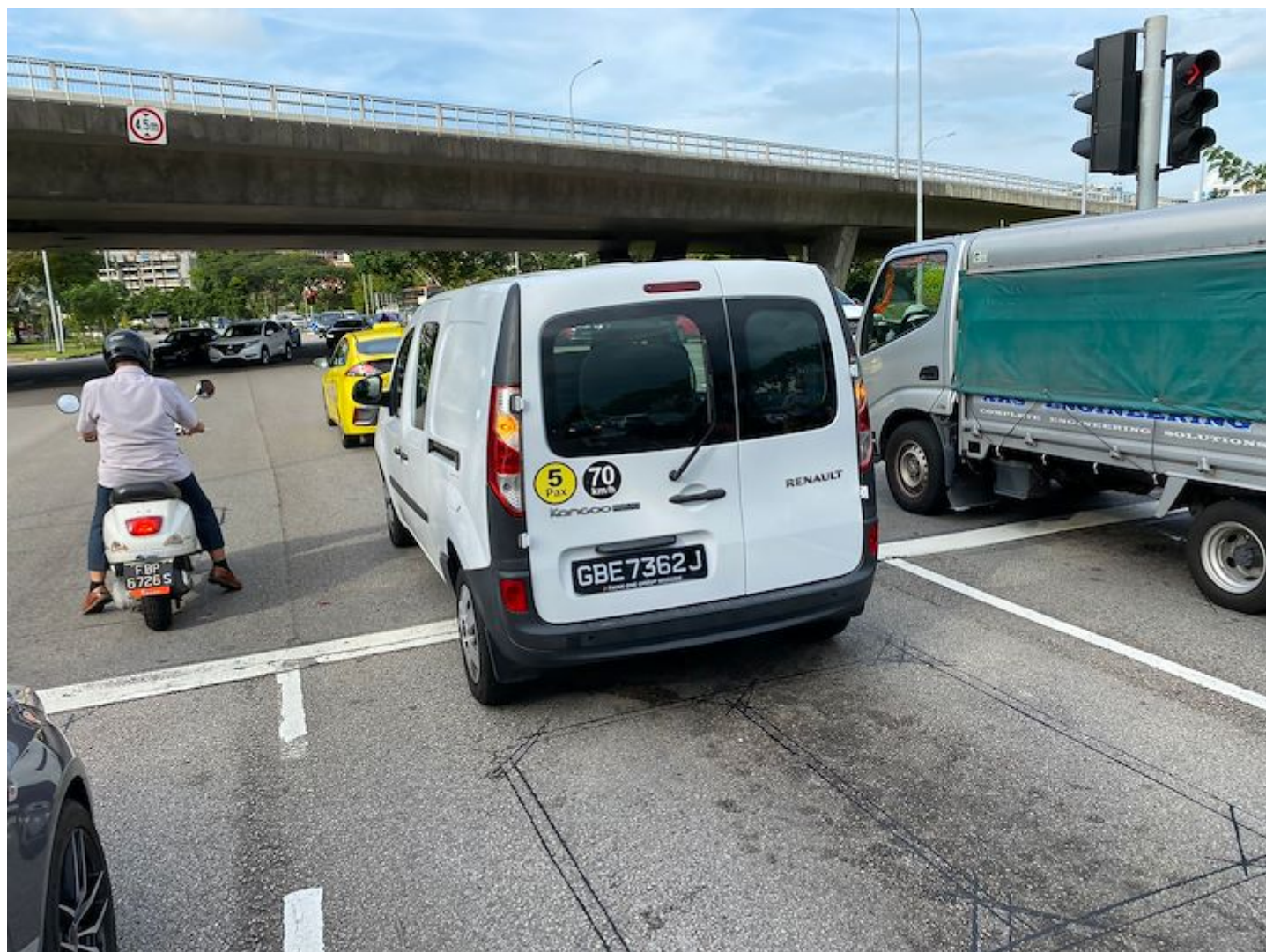
*[Signature]*

Witnessed by Reporting Centre Personnel











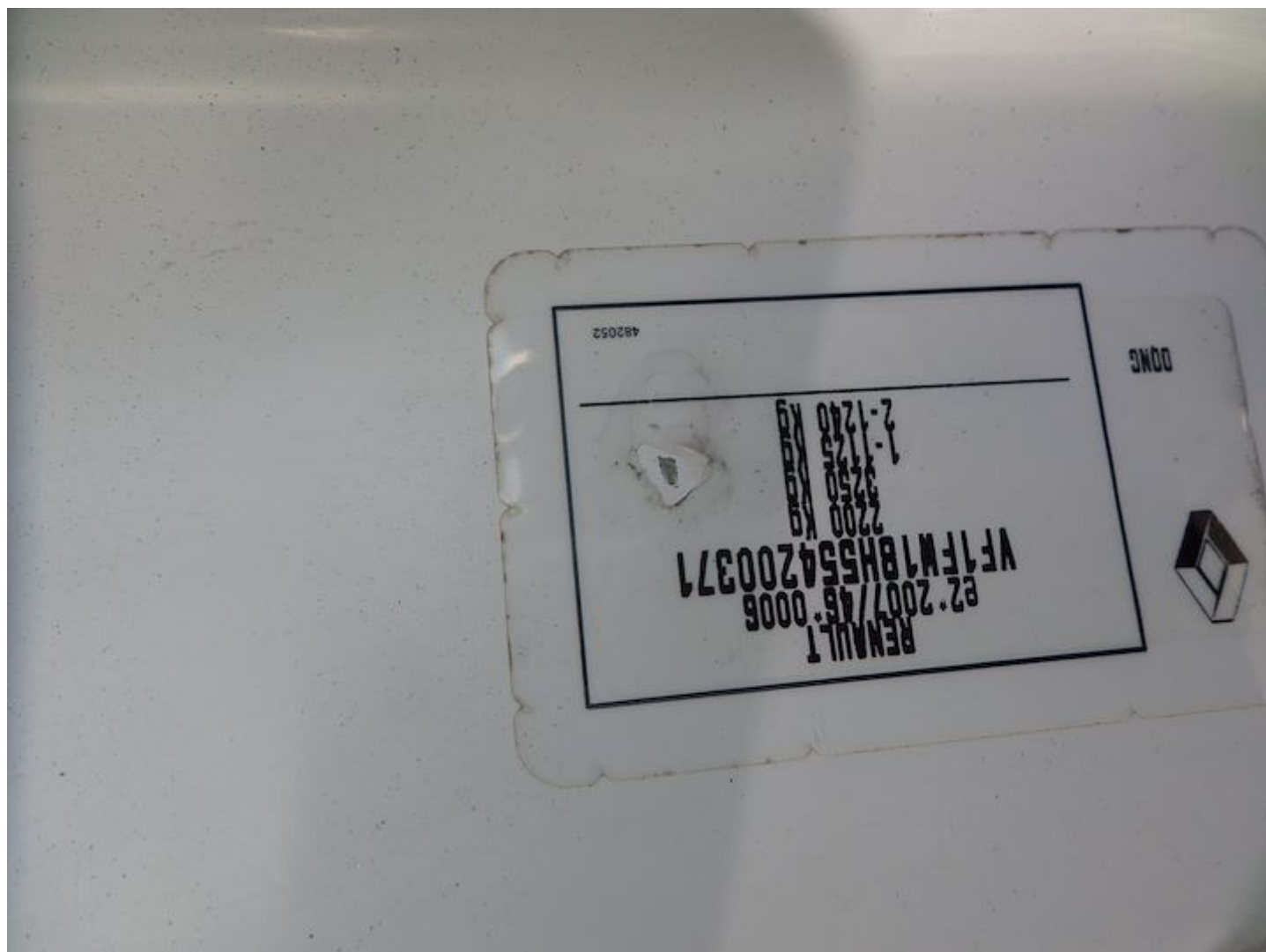
















**SINGAPORE  
POLICE FORCE**



G/20211215/7102

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**POLICE REPORT (NP299)**

Report No. G/20211215/7102

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

Date/Time Report Made 15/12/2021 19:44	Vide Report No.	Station Diary No.
Name Of Informant POH JI EN TREVOR	Address 255 SIMEI STREET 1 #04-507 SINGAPORE 520255	
ID Type / ID No. NRIC NO / S9602929B	Contact No. Home/Office:	Mobile: 84885755
Nationality SINGAPORE CITIZEN	Email Address TREVORPOH.JE@GMAIL.COM	
Occupation Advertising/Public relations manager	Sex Male	Age 25
Institution/School Name	Date of Birth 24/01/1996	Race Chinese
Date/Time Of Incident 15/12/2021 17:00 - 15/12/2021 17:15	Location Of Incident JALAN EUNOS	

**Brief details.**

I (GBE7362J) was driving along the Jalan Eunus from Still Road preparing to turn into the expressway towards Changi airport. There was a yellow taxi (SHA9173A) driving ahead of me also on the same path. The taxi has driven past the stop line of the junction and was turning when it suddenly came to a hard abrupt stop. I had attempted to apply the brake on my vehicle (cargo van) but instead accidentally applied pressure on the accelerator pedal instead. Do note that I was travelling at approximately 20-30km/hour, well within the speed limit of the road, as I was preparing to make a turn.

This led to a collision to the rear end of the taxi. Both drivers quickly exited the vehicle and began

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: 15/12/2021 19:44
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE  
POLICE FORCE**



G/20211215/7102

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20211215/7102

documenting the accident through pictures taken by our mobile phones. After both parties had completed documenting the incident, I suggested to the other driver for us to drive our vehicles past the junction so as to not further obstruct the flow of traffic.

Upon arriving to a safer part of the road, we exchanged contacts and identification details I proceeded to check on the passenger of the taxi who since the incident had not left the vehicle. Speaking to her from the front passenger seat, she explained that she is feeling a little unwell and it also in a bit of shock from the impact. I offered to call the ambulance to check on her to which she refuse, but instead she stated that she would go to a doctor instead. I gave her my contact details and offered to pay for her taxi fare since she needed time to compose herself.

The incident concluded with both vehicles parting ways with the taxi driver sending the passenger to her destination. After finding a safe spot at a carpark nearby I contact my insurance provider and made my way to the workshop.

As of writing this report neither the taxi driver or the passenger has contacted me. (15 Dec 7.30PM)

Subjects Involved			
Suspect			
Person Name	Tan Meng Chong		
ID Type	OTHERS / Vocational Licence	ID No	S1152651I
Gender	Male	Age	50-60
Race	Chinese	Language	Chinese
Occupation	Taxi driver	Mobile No	90094618

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: 15/12/2021 19:44
Officer In-Charge Of Case:	Classification Of Case:



SINGAPORE  
POLICE FORCE



G/20211215/7102

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20211215/7102

Relation To Informant	No relation		
Victim			
Person Name	POH JI EN TREVOR		
ID Type	NRIC NO	ID No	S9602929B
Gender	Male	Age	25
Race	Chinese	Language	English
Occupation	Advertising/Public relations manager	Address	255 SIMEI STREET 1 #04-507 SINGAPORE 520255
Mobile No	84885755	Is Informant A Victim?	Yes
Person Name	POH JI EN TREVOR (Informant)		

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: 15/12/2021 19:44
Officer In-Charge Of Case:	Classification Of Case:



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

Motor Commercial

MZ300/C

N SN

AN0622A

Cov. Type: C

### CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)  
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1990  
Road Transport Act, 1967 (Malaysia)  
Motor Vehicles (Third-Party Risks) Rules, 1969 (Malaysia)

CERTIFICATE No. DMCVSNW00142072100

Engine No.: K9KB608D606011  
Cha. No.: VF1FW18H554200371

1. Index Mark and Registration  
Number of Vehicle

GBE7362J

AUTOSAFE  
\*\*\*\*\*

2. Name of Policy Holder

TRINUTTY LIMITED LIABILITY PARTNERSHIP

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

10/11/2021  
(00:00:00)

Excess Sect I : S\$450.00  
EX ON WINDSCREEN : S\$100.00

4. Date of Expiry of Insurance

09/11/2022

5. Persons or Classes of Persons entitled to drive\*

Any person who is driving on the Policyholder's order or with their permission.

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.

6. Limitations as to use\*

- (1) Use in connection with the Policyholder's business.
- (2) Use for the carriage of passengers (other than for hire or reward) in connection with the Policyholder's business.
- (3) Use for social, domestic or pleasure purposes.

The Policy does not cover:

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

HIRE PURCHASE CO.: THINK ONE CREDIT 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 1967 (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, 1967 (Malaysia).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: SAFE INSURED PTE LTD  
Authorised Officer

杨西美  
Authorised Signatory

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

☎ 6389 6111

☎ 6222 1033

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