

# 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 .....	03/01/2022 17:45 (SGT)
Date of Accident .....	01/01/2022 21:06 (SGT)
Exact Location of Accident .....	Paya Lebar Rd, Singapore
Additional Location Information .....	PAYA LEBAR ROAD TOWARDS UPPER PAYA LEBAR
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SMT947J
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### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	WAN ZAILANI BIN WAN YUSOF
NRIC No .....	S7245204F
Email Address .....	a6679b@gmail.com
Mobile Phone No .....	(Phone) +65-97432468
Alternative Phone No .....	(Home) +65-87432468

### VEHICLE PARTICULARS

Manufacturer .....	Toyota
Model .....	Noah
Variant .....	-
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 .....	Manual
CC .....	1797

### INSURANCE COMPANY

Name of Insurance Company .....	Tokio Marine Insurance Singapore Ltd
Type of Coverage .....	Comprehensive
Fleet Policy .....	No
Policy Number .....	MQ001321
Cover Note Number .....	-

### DRIVER

Name of Driver .....	WAN ZAILANI BIN WAN YUSOF
NRIC No .....	S7245204F

Date Of Birth .....	12/12/1972
Occupation .....	Indoor
Date Of Driving Pass .....	06/01/1999
Driving experience .....	23 YEARS
Gender .....	Male
Mobile Number .....	(Phone) +65-97432468
Alt. Phone Number .....	(Home) +65-87432468
Email Address .....	a6679b@gmail.com
Address .....	BLK 54 NEW UPPER CHANGI ROAD
Address complement .....	#18-1464
Postcode .....	461054
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 - Head to Rear
Weather Conditions .....	Clear
Road Surface .....	Wet

#### 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) .....	3
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### PASSENGER 1

Name .....	PASSENGER
Gender .....	Male

#### PASSENGER 2

Name .....	PASSENGER
Gender .....	Male

#### 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

REFER TO SKETCH PLAN AND POLICE REPORT ATTACHED.

#### 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 .....	SMN7853G
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) .....	-

## INJURED PERSONS DETAILS

### INJURED 1

Name of injured person .....	WAN ZAILANI BIN WAN YUSOF
Gender .....	Male
Phone No .....	(Phone) +65-97432468
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	-
Injured person in which vehicle? .....	SMT947J
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No

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5. Any false reporting may be referred to the Traffic Police Department for investigation.
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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' law yers/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 w ith 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 w ell as on the external cover of envelopes/mail packages); and/or
- (v) complying w ith applicable law in administering, processing, handling and/or dealing w ith my claims.
- (collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' law yers/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 law yers/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 = SM T949I  
Vehicle B = SM N78526

Paya Lebar Road, Woodlands

Describe Circumstance of the Accident


Refer To Police Report T/20220103/7006

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



Page











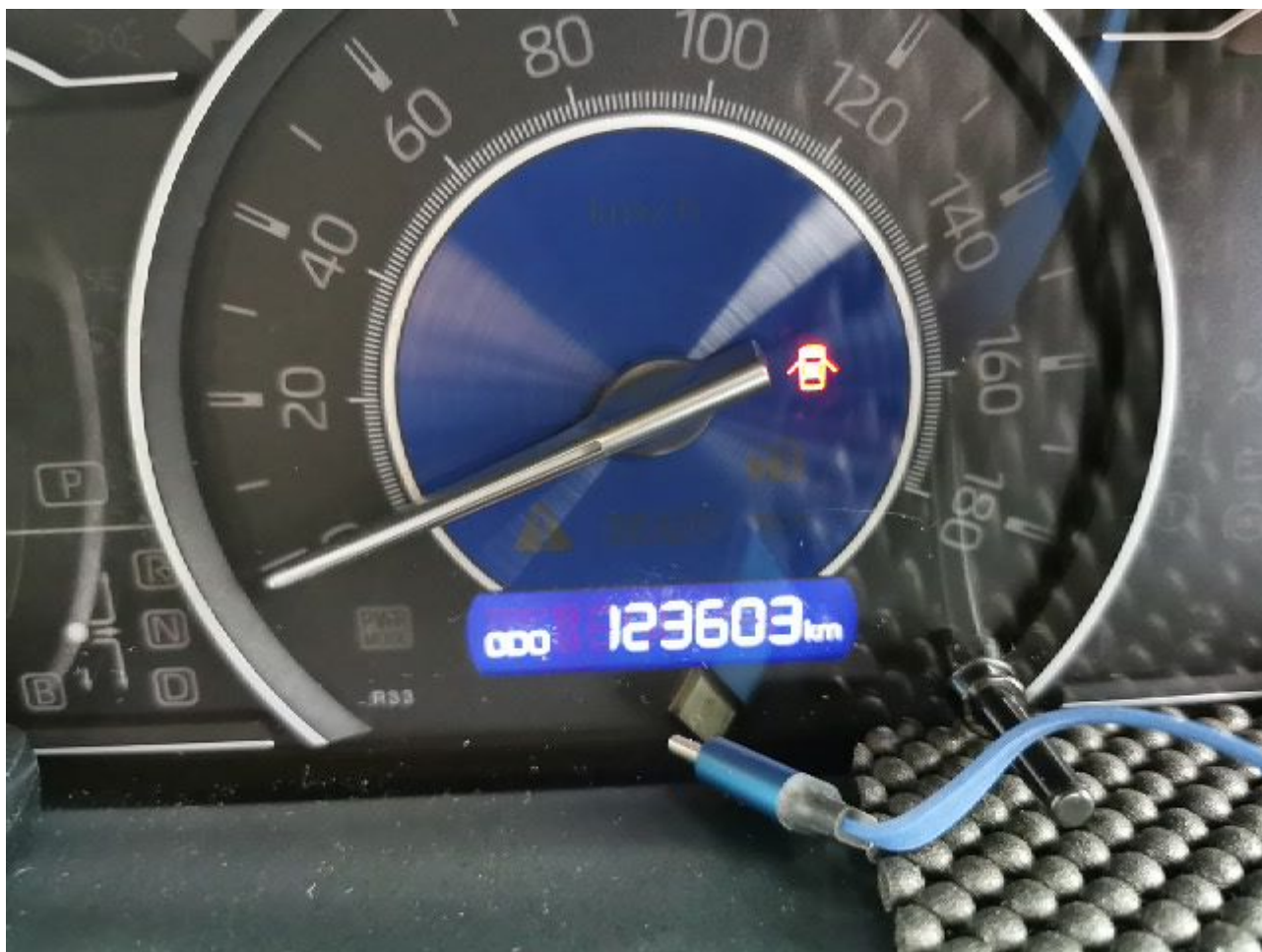

















**SINGAPORE  
POLICE FORCE**


T/20220103/7006

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

1 of 3

Report No. T/20220103/7006

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 03/01/2022 11:08		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: WAN ZAILANI BIN WAN YUSOF			Address: 54 NEW UPPER CHANGI ROAD #18-1464 SINGAPORE 461054		
ID Type / ID No.: NRIC NO / S7245204F			Contact No.: Home/Office: Mobile: 97432468		
Nationality: SINGAPORE CITIZEN			Email: DON_WANZ@YAHOO.COM		
Sex: Male	Age: 49	Date of Birth: 10/12/1972	Type of Informant: Driver		
Race: Malay			Language: English		Institution / School Name:
Occupation: PHV DRIVER			Driving Licence Information: Class: 3		Date of Expiry:

<b>General Information of the Accident</b>				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 01/01/2022 21:00	Type of Location: Straight Road
Location:  PAYA LEBAR ROAD				
Weather: Clear		Road Surface: Wet		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of
SMN7853G	Car	HYUNDAI		Grey	Slightly Damaged	0
SMT947J	Car	TOYOTA	NOAH HYBRID 1.8X CVT	Silver	Slightly Damaged	2



**SINGAPORE  
POLICE FORCE**



T/20220103/7006

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

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Report No. T/20220103/7006

## CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMT947J	TOKIO MARINE INSURANCE SINGAPORE LTD.	MQ001321	27/03/2021	26/03/2022

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	LIM JOO CHATE		ID No.	S1430913F
Related Vehicle	SMN7853G (Car)		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave		NIL	Degree of	NIL
Driver				
Name	WAN ZAILANI BIN WAN YUSOF		ID No.	S7245204F
Related Vehicle	SMT947J (Car)		Contact No.	97432468
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL		Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	03/01/2022		Date	03/01/2022
No. of Days granted Medical Leave		05	Degree of	Slight

## Brief Details.

On 1/1/2022 at about 2100 Hrs,i was driving my vehicle SMT947J along Paya Lebar Road towards Upp Paya Lebar with 2 passenger onboard.Due to slow traffic,in front of me a vehicle slow down and stop so i follow and come to a complete stopped.Suddenly i felt a impact from behind,i alighted my vehicle and discover that a car SMN7853G cannot stop on time and rear ended my vehicle rear portion and cause damage and dented to my vehicle rear section.After the accident we exchange particular and leave the scene.My neck and back pain due to the impact of the accident and today the pain more worse so i consult doctor and was given 5 days MC.





**SINGAPORE  
POLICE FORCE**



T/20220103/7006

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

3 of 3

Report No. T/20220103/7006

**CONTINUATION OF REPORT**

Sketch 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 / TPIB /  
TAY CHUN KEEN  
Contact No.: 65476436

NP168

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

Date/Time:  
03/01/2022 11:08

Classification Of Case:





## Tokio Marine Insurance Singapore Ltd.

(Company Reg No.: 192300014M) (GST Reg No.: M2-0000023-4)

20 McCallum Street #09-01 Tokio Marine Centre Singapore 069046

T: (65) 6221 6111 F: (65) 6221 4355 / (65) 6224 0895 E: tmis@tokiomarine.com.sg W: www.tokiomarine.com

A member of the  
Tokio Marine GroupTOKIO MARINE  
INSURANCE GROUP

## Certificate of Insurance

FORM MX1 H

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)

Policy No.: MQ001321 (Private Car)

- |  |  |                           |
|--|--|---------------------------|
| 1. Index Mark and Registration Number of Vehicle                               | SMT947J  | Chassis No.: ZWR800359060 |
| 2. Name of Policyholder  | WAN ZAILANI BIN WAN YUSOF  |                           |
| 3. Effective date of the Commencement of Insurance for the purposes of the Act | 27/03/2021 (00:00:00)  |                           |
| 4. Date of Expiry of Insurance   | 26/03/2022   |                           |
| 5. Persons or Class of Persons entitled to drive*                              | The Policyholder<br>Any person who is driving on the Policyholder's order or with the Policyholder's 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. And provided further that the Motor Vehicle is registered under the Road Traffic Act and its registration under the Road Traffic Act has not been cancelled at the time of the accident loss or damage.

## 6. Limitations as to use\*

Use for the carriage of passengers or goods in connection with the Policyholder's business or the hirer's business.  
Use for social domestic and pleasure purpose and business purposes of the Policyholder or 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.
- 3) Use for the carriage of passengers for hire or reward by any person except for private hire services.
- 4) Use for hire or reward except for (3) and rental by the Policyholder.

\* Limitations rendered inoperative by Section 6 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.

We hereby certify that the Policy to which this Certificate relates is issued in accordance with the provision of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please refer to the Policy Schedule for full details, terms and conditions of the insurance.

## IMPORTANT NOTICE

This Certificate is not transferable. During its currency, if the insurance is cancelled for whatsoever reason, you must return the Certificate to Tokio Marine Insurance Singapore Ltd. within 7 days thereof or, if the Certificate has been lost destroyed, you must make a statutory declaration to that effect. Failure to comply with this duty is an offence under Motor Vehicle (Third-Party Risks and Compensation) Act (Chapter 189).

ADDITIONAL INFORMATION		Account No: 2891DDA	
Insurance Plan:	Comprehensive Essential		
Limit for total loss or theft:	Prevailing Market Value		
Policy Excess:	Own Damage Claims	SGD 2,500.00	(Original Excess : SGD 2,500.00)
	Additional Excess for Unnamed Driver(s)	SGD 500.00	
	Additional Excess for Young or Inexperience Driver(s)	SGD 1,500.00	
	WindScreen Excess		
	Excess-Third Party (Sect II)	SGD 100.00	
		SGD 2,500.00	
Financial Interest:	SKYWAY CREDIT & LEASING PTE LTD		
Additional Terms:	1.Private Hire Usage Vehicle Endorsement is included. 2.Unnamed Driver Excess is not applicable 3.Car is licensed for private hire (PH) by LTA. 4.Only PH licensed Named Drivers can use car for PH in Spore only 5.No rental to unnamed driver. 6.YID excess on Section 1 & 2 separately. 7.TMIS Approved workshop plan only 8.Notwithstanding anything to the contrary in the policy, MC19 Waiver of Excess is NOT applicable		

TOKIO MARINE INSURANCE SINGAPORE LTD.

Authorised Signature