

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 17/01/2022 13:27 (SGT)
Date of Accident 14/01/2022 19:50 (SGT)
Exact Location of Accident Singapore
Additional Location Information BKE TOWARDS SLE (CTE, TPE)
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLQ7694U

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner LAY AUTO LEASING PTE LTD
Company Reg No 2XXXXX521C
Email Address fiona@layauto.com
Mobile Phone No (Phone) +65-87973443
Alternative Phone No +65-87973443

VEHICLE PARTICULARS

Manufacturer Toyota
Model C-hr
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 hire
Transmission Auto
CC 1797

INSURANCE COMPANY

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd.
Type of Coverage Comprehensive
Fleet Policy No
Policy Number DMHCSNA00002632101
Cover Note Number -

DRIVER

Name of Driver ESTHER TAN MING CHOO
NRIC No SXXXX496A

Date Of Birth	30/11/1987
Occupation	Indoor
Date Of Driving Pass	01/01/2012
Driving experience	10 YEARS
Gender	Female
Mobile Number	(Phone) +65-96667116
Alt. Phone Number	-
Email Address	esther@layauto.com
Address	27 ROSEWOOD DRIVE
Address complement	#05-21
Postcode	737920
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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?	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	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

PLS REFER TO THE POLICE REPORT : T/20220115/7034

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	GBF5577P
Vehicle Manufacturer	Toyota
Vehicle Model	Dyna
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	UNKNOWN
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	ESTHER TAN MING CHOO
Gender	Female
Phone No	(Phone) +65-96667116
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT
Injured person in which vehicle?	SLQ7694U
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.

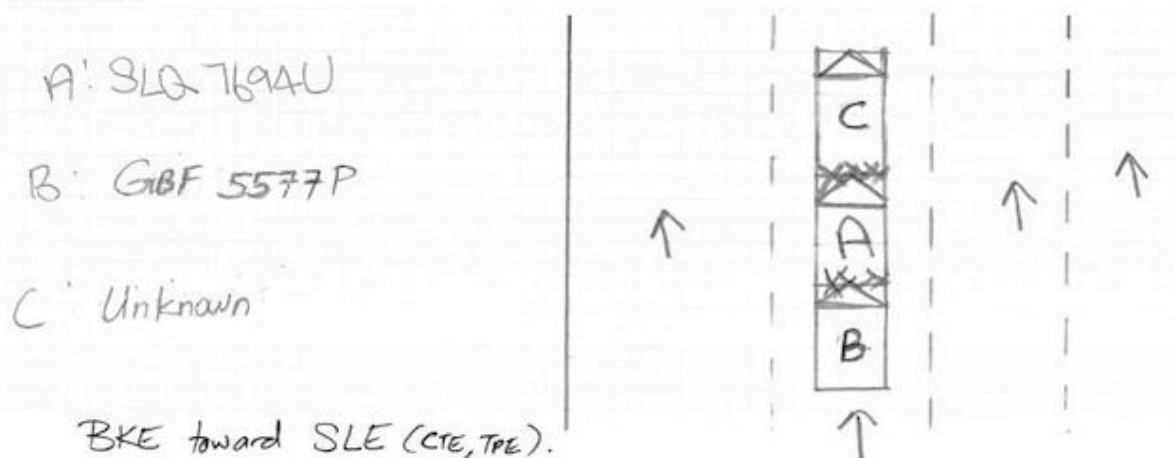


 Policyholder's Signature / Date & Time _____

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

 Witnessed by Reporting Centre Personnel 17/01/2022

Sketch Plan




Describe Circumstances of the Accident


With Police Report.
T/ 2022 01/5/ 7034.

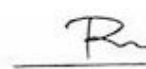
Declaration

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

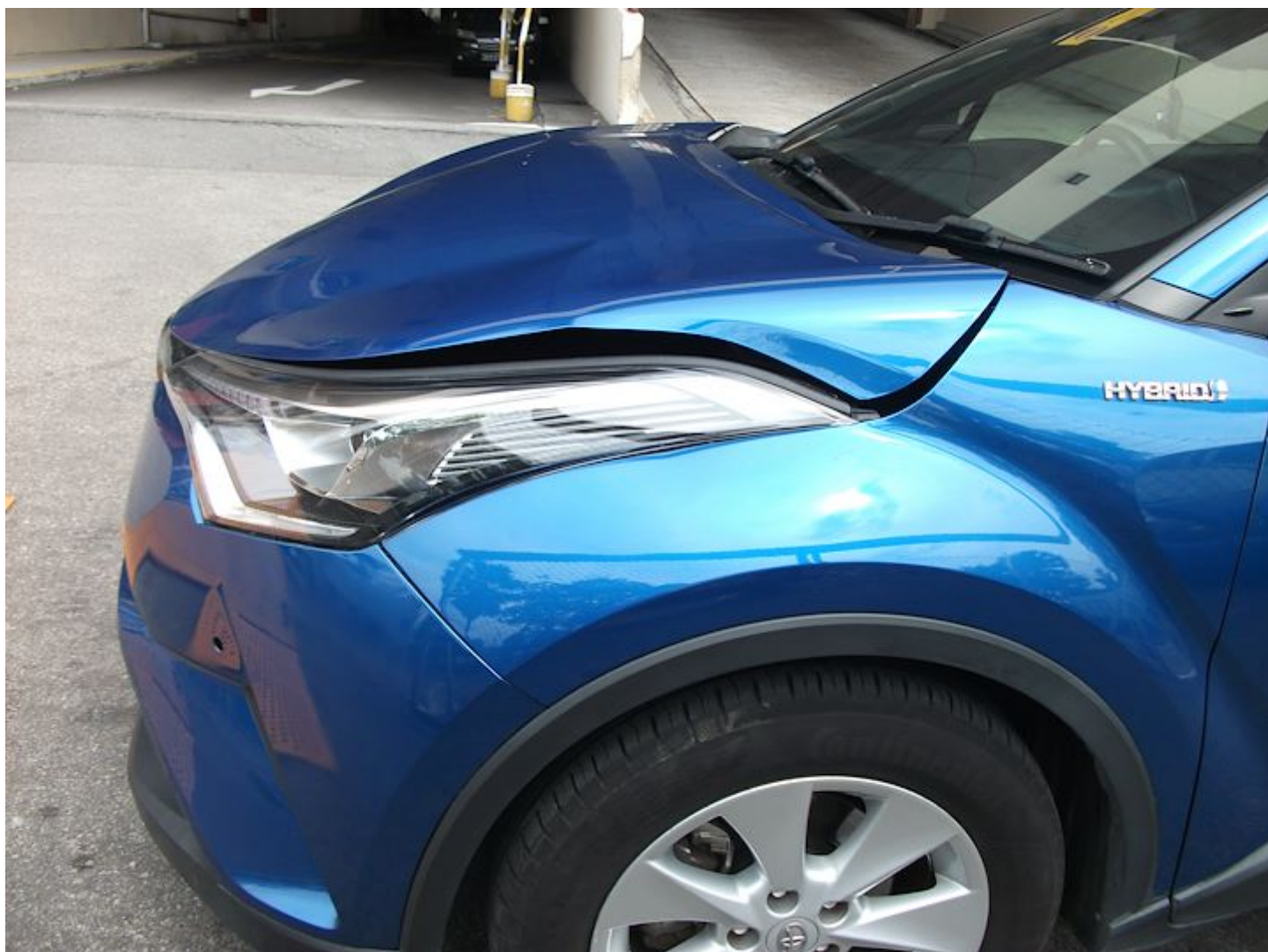
 17/01/2022
Witnessed by Reporting Centre Personnel













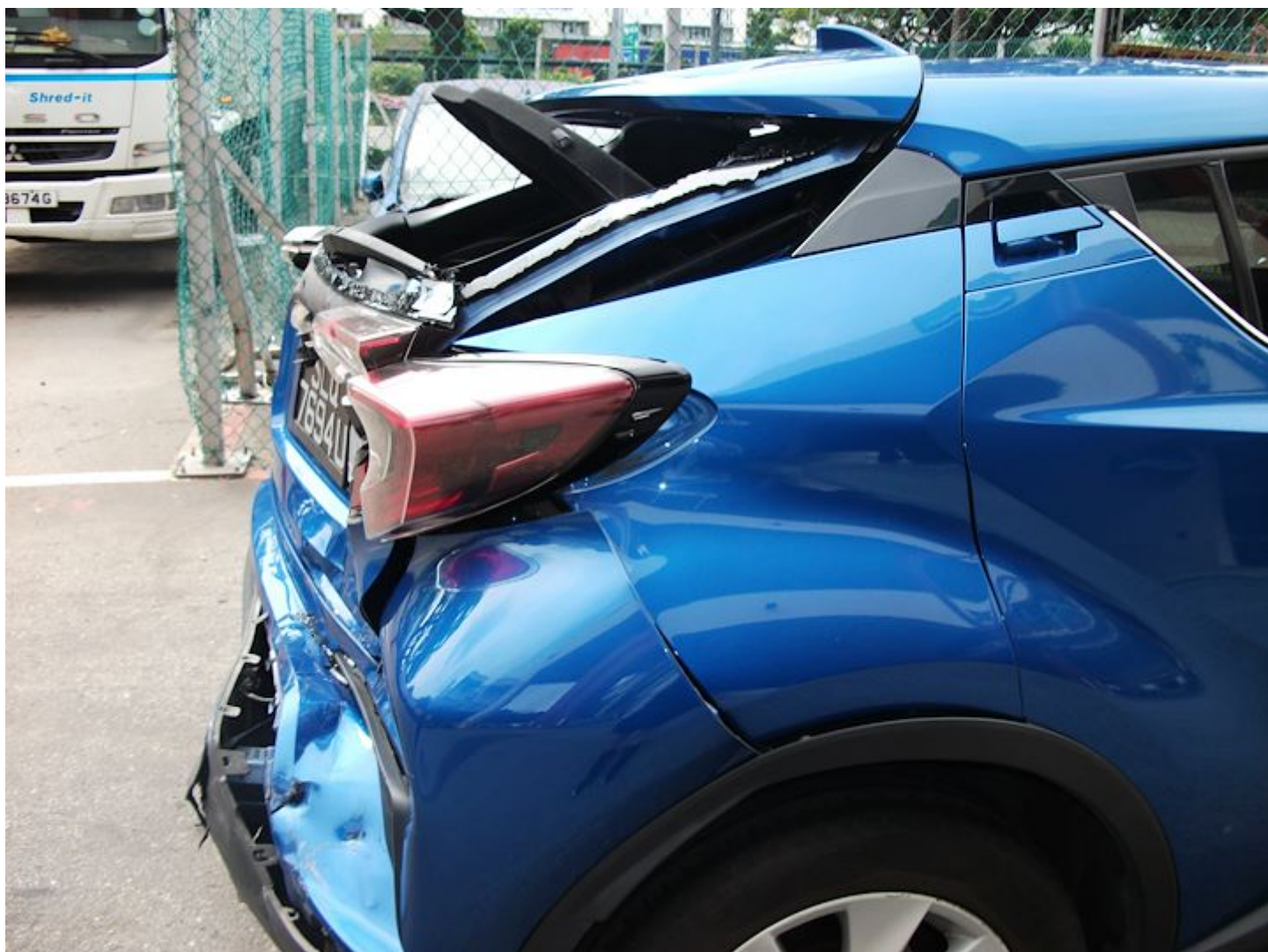
























**SINGAPORE
POLICE FORCE**



T/20220115/7034

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

1 of 3

Report No. T/20220115/7034

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 15/01/2022 21:02		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: ESTHER TAN MING CHOO			Address: 27 ROSEWOOD DRIVE #05-21 SINGAPORE 737920		
ID Type / ID No.: NRIC NO / S8777496A			Contact No.: Home/Office: Mobile: 96667116		
Nationality: MALAYSIAN			Email: esther@layauto.com		
Sex: Female	Age: 34	Date of Birth: 30/11/1987	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Accountant			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 14/01/2022 19:50	Type of Location: Straight Road
Location: BUKIT TIMAH EXPRESSWAY				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 90 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: No	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
GBF5577P	Lorry	TOYOTA	Dyna	Silver		1
SLQ7694U	Car	TOYOTA	CHR			0
	Car					0



**SINGAPORE
POLICE FORCE**



T/20220115/7034

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

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Report No. T/20220115/7034

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	ESTHER TAN MING CHOO	ID No.	S8777496A
Related Vehicle	SLQ7694U (Car)	Contact No.	96667116
Hospital/Clinic	KHOO TECK PUAT HOSPITAL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	14/01/2022	Date	14/01/2022
No. of Days granted Medical Leave	04	Degree of	Slight

Brief Details.

14/1/22 around 7:50 evening time I was driving on 3rd lane at at BKE expressways when about towards SLE(CTE, TPE) all vehicles slow down due to heavy traffic. Suddenly I heard a loud breaking sound behind and saw a lorry lost control and hit onto my rear portion , due to the bad impact my vehicle hit toward the front vehicle .the front vehicle drove off without stopping when Lorry drive and me come down from our vehicle.



**SINGAPORE
POLICE FORCE**



T/20220115/7034

3 of 3

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

Report No. T/20220115/7034

CONTINUATION OF REPORTSketch 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 /
MUHAMMAD SYAKIR BIN ADANAN
Contact No.: 65476236

NP168

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

Date/Time:
15/01/2022 21:02

Classification Of Case:

