

# 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 ..... 24/01/2022 18:50 (SGT)  
Date of Accident ..... 23/01/2022 13:00 (SGT)  
Exact Location of Accident ..... CTE, Singapore  
Additional Location Information ..... TWDS AYE B4 BRADDELL EXIT ON LANE 4  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SKT7626M

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... PAN HOCK SENG  
NRIC No ..... SXXXX722F  
Email Address ..... ezrapan@gmail.com  
Mobile Phone No ..... (Phone) +65-91516050  
Alternative Phone No ..... +65-91516050

### VEHICLE PARTICULARS

Manufacturer ..... Toyota  
Model ..... ALTIS  
Variant ..... -  
Exact purpose for which vehicle was being used at time of accident ..... Private use  
Are you claiming under your own insurance policy for repair to your vehicle? ..... No - Claiming third party  
Vehicle Category ..... Private car  
Transmission ..... Auto  
CC ..... 1598

### INSURANCE COMPANY

Name of Insurance Company ..... MSIG Insurance (Singapore) Pte. Ltd.  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... A 29144879 ATM  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... PAN HOCK SENG  
NRIC No ..... SXXXX722F

Date Of Birth .....	29/01/1960
Occupation .....	Indoor
Date Of Driving Pass .....	04/09/1984
Driving experience .....	37 YEARS AND 4 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-91516050
Alt. Phone Number .....	+65-91516050
Email Address .....	ezrapan@gmail.com
Address .....	BLK 173 BISHAN STREET 13
Address complement .....	#15-107
Postcode .....	570173
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 .....	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) .....	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? .....	No

#### PASSENGER 1

Name .....	TAN SUAY HUA
Gender .....	Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Tanglin Division Headquarters
Police Station Phone No .....	(Phone) +65-18003910000
Alt. Police Station Phone No .....	(Fax) +65-63964900
Police Station Address .....	21 Kampong Java Road Singapore 228892
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE POLICE REPORT:E/20220124/7014

#### 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 .....	SFS3608G
Vehicle Manufacturer .....	-

Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	RUTH
Contact Number .....	(Phone) +65-98292384
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 .....	SJG4977A
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	VINCENT
Contact Number .....	(Phone) +65-96261280
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 .....	PAN HOCK SENG
Gender .....	Male
Phone No .....	-
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	BODY
Injured person in which vehicle? .....	SKT7626M
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No

### INJURED 2

Name of injured person .....	TAN SUAY HUA
Gender .....	Female
Phone No .....	-
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	BODY
Injured person in which vehicle? .....	SKT7626M
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No





**SINGAPORE  
POLICE FORCE**



E/20220124/7014

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**POLICE REPORT (NP299)**

Report No. E/20220124/7014

Police Station Of Origin  
Tanglin Division HQ  
21 Kampong Java Road SINGAPORE  
228892  
Tel No:1800-3910000

Date/Time Report Made 24/01/2022 13:34	Vide Report No.		Station Diary No.	
Name Of Informant PAN HOCK SENG	Address 173 BISHAN STREET 13 #15-107 SINGAPORE 570173			
ID Type / ID No. NRIC NO / S1438722F	Contact No. Home/Office:		Mobile: 91516050	
Nationality SINGAPORE CITIZEN	Email Address ezrapan@gmail.com			
Occupation Estate Manager	Sex Male	Age 61	Date of Birth 29/01/1960	Race Chinese
Institution/School Name	Language English			
Date/Time Of Incident 23/01/2022 13:00	Location Of Incident CENTRAL EXPRESSWAY			

**Brief details.**

On the stated date and time, I was driving my vehicle SKT7626M along CTE(AYE) and I was gradually slowing down due to traffic conditions before Braddell Exit.

My wife Tan Suay Hua was my front passenger and both of us were belted.

I had come to a complete stop and had kept ample safety distance from the vehicle in front.

Moments after coming to a complete stop, a massive impact slammed into the rear of my vehicle,

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Signature Of Interpreter: Not applicable	Date/Time: 24/01/2022 13:34
Officer In-Charge Of Case:	Classification Of Case:



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**POLICE REPORT (NP299)**

**CONTINUATION OF REPORT**

Report No. E/20220124/7014

catching the both of us completely off guard.

The impact was so huge that our vehicle was propelled forward into the rear of the vehicle in front of us despite of the safety distance I had kept.

I alighted to realise that we were involved in a 3 car chain collision involving:

SJG4977A

SKT7626M

SFS3608G

where I was the 2nd vehicle.

After the accident, both my wife and I started feeling aches and soreness over our neck, shoulders and lower back areas.

We proceeded to Alexandra Hospital to seek treatment and were given 3 days MC each.

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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 \_\_\_\_\_  
Sketch Plan

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

Witnessed by Reporting Centre Personnel \_\_\_\_\_

(TE TWOS AYE BEFORE BRADDELL EXIT ON LANE 4.

→	5
→	4
→	3
→	2
→	1

A - SKT 7626M  
B - SFS 3608G  
C - SJG 4977A















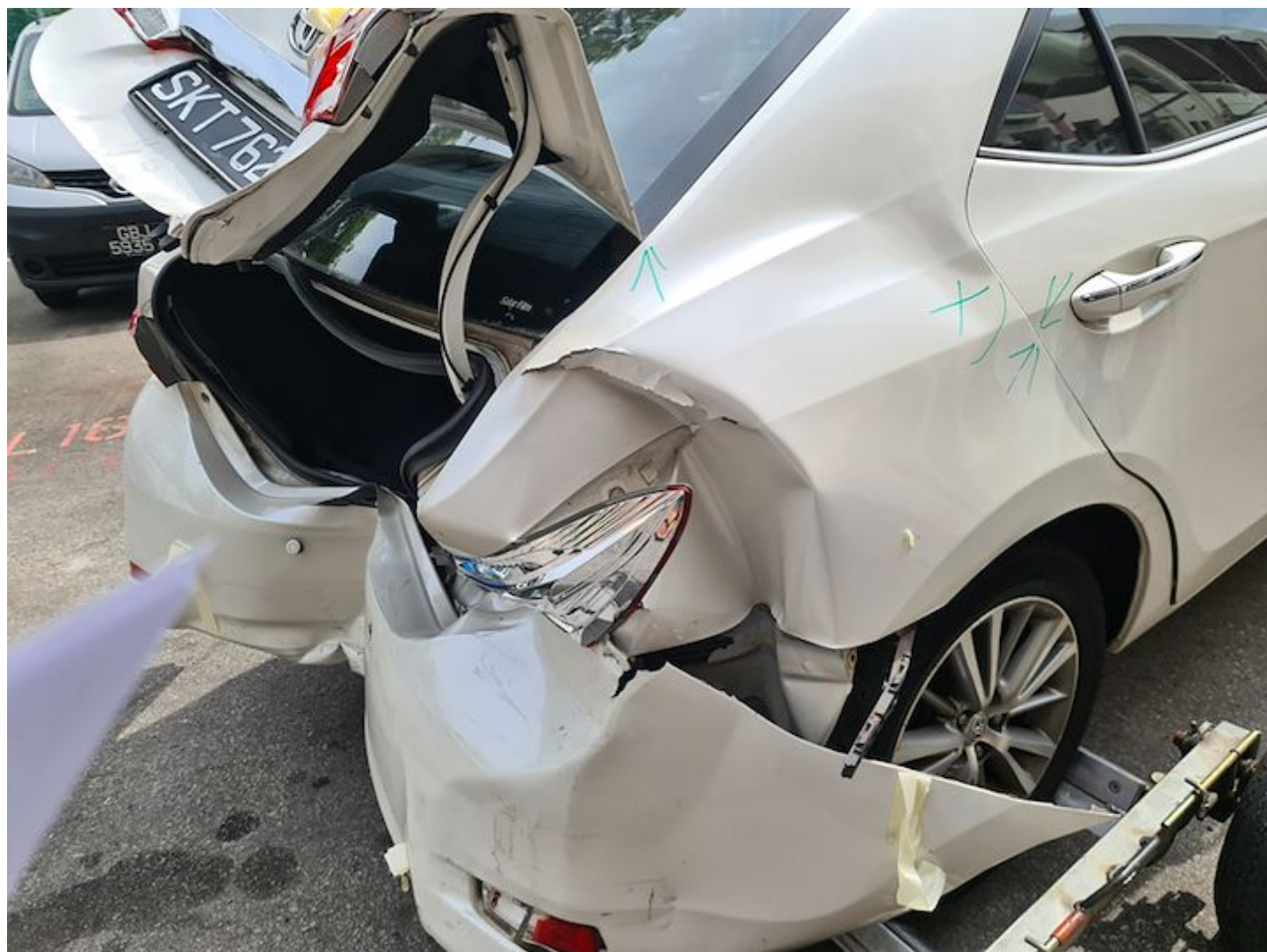






























































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**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

### ADDENDUM

**(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:**

Original Report No: SL0X22100002 Vehicle Registration No: SKT7626M  
 Name (as shown in NRIC): PAN HOCK SENG NRIC/FIN/Passport No: SXXXX722F  
 (\*Vehicle Driver/Vehicle Owner) (\*) Please delete as appropriate  
 Address: BLK 173 BISHAN ST 13 #15-107 Singapore ( 570173 )  
 Contact (Tel): \_\_\_\_\_ Mobile No.: 91516050  
 Email Address: \_\_\_\_\_  
 Date of Accident: 23/01/22 Time of Accident: 13:00  
 Place of Accident: CTE TWDS AYE BY BRADDELL EXIT ON LANE 4  
 Insurance Company: MSIG

**(B) ADDITIONAL INFORMATION /AMENDMENTS:**

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

AMEND VEH C PLATE NO: VEH NO: SJ44977A  
AMEND VEH C PLATE NO AT SKETCH PLAN  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

7-2-2022  
 Policyholder / Driver's Signature  
 Date:

07/02/22  
 Reporting Centre Personnel's Signature  
 Name:  
 NRIC/FIN No.:  
 Date:

GIARMC Addendum Form