

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 11/02/2022 15:51 (SGT)
Date of Accident 09/02/2022 22:00 (SGT)
Exact Location of Accident PIE, Singapore
Additional Location Information TOWARDS TUAS AFTER CLEMENTI EXIT
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SNC7468G

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner MR KOH CHIN HUAT (XU ZHENFA)
NRIC No SXXXX617I
Email Address jacko6606@hotmail.com
Mobile Phone No (Phone) +65-96666606
Alternative Phone No +65-96666606

VEHICLE PARTICULARS

Manufacturer Toyota
Model Wish
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 1798

INSURANCE COMPANY

Name of Insurance Company Tokio Marine Insurance Singapore Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number 21-MM000988-R00
Cover Note Number -

DRIVER

Name of Driver MR KOH CHIN HUAT (XU ZHENFA)
NRIC No SXXXX617I

Date Of Birth	18/04/1975
Occupation	Outdoor
Date Of Driving Pass	20/11/1996
Driving experience	25 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96666606
Alt. Phone Number	+65-96666606
Email Address	jacko6606@hotmail.com
Address	BLK 274D JURONG WEST AVENUE 3
Address complement	#12-103
Postcode	644274
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	Side Swipe
Weather Conditions	Raining
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)	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	Clementi Division Headquarters
Police Station Phone No	(Phone) +65-18007740000
Alt. Police Station Phone No	(Fax) +65-67741705
Police Station Address	20 Clementi Avenue 5 Singapore 129858
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE ATTACHED STATEMENT AND POLICE REPORT : D/20220211/7001

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	SMU9183G
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	MR KOH CHIN HUAT (XU ZHENFA)
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT
Injured person in which vehicle?	SNC7468G
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

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

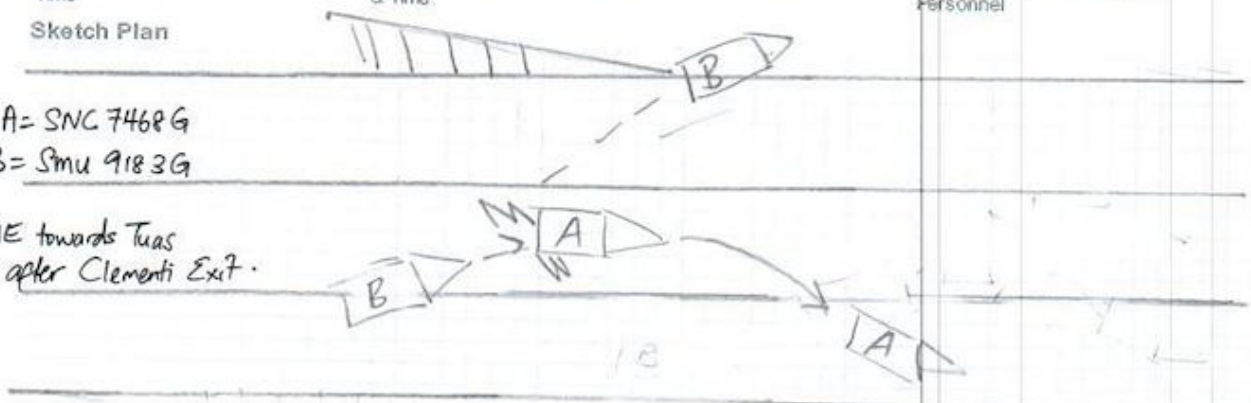
Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Sketch Plan

A = SNC 7468 G
B = Smu 9183 G

PIE towards Tuas
after Clementi Exit.



Describe Circumstances of the Accident


On the above date and time of accident I was driving my car on P1E toward tuas just after Clementi Exit I was on the second lane suddenly a car GMY 9183G lose control of his car skidded and hit onto my car on the rear right side portion due to the impact my car was badly damage.

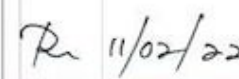
— Refer to the police report: D/20220211/7001 —

Declaration

We declare the foregoing particulars are true in every respect.


Policyholder's Signature / Date & Time
10/2/22 1345hrs


Driver's Signature (If driver is not the policyholder) / Date & Time
10/2/22 1345hrs


Witnessed by Reporting Centre Personnel
11/02/22
























**SINGAPORE
POLICE FORCE**


D/20220211/7001

1 of 1

POLICE REPORT (NP299)

Report No. D/20220211/7001

Police Station Of Origin
Clementi Division HQ
20 Clementi Avenue 5 SINGAPORE 129858
Tel No:1800-7740000

Date/Time Report Made 11/02/2022 02:01	Vide Report No.	Station Diary No.
Name Of Informant KOH CHIN HUAT	Address APT BLK 274D JURONG WEST AVENUE 3 #12-103 SINGAPORE 644274	
ID Type / ID No. NRIC NO / S7511617I	Contact No. Home/Office: Mobile: 96666606	
Nationality SINGAPORE CITIZEN	Email Address jacko6606@hotmail.com	
Occupation Delivery	Sex Male	Age 46
Institution/School Name	Date of Birth 18/04/1975	Race Chinese
Date/Time Of Incident 09/02/2022 21:55 - 09/02/2022 22:00	Location Of Incident PAN ISLAND EXPRESSWAY	

Brief details.

On 09/02/22 2200hrs, I was driving my car on PIE towards Tuas just after Clementi exit. I was on the 2nd lane, suddenly a car SMU9183G lose control of his car skidded and hit onto my car rear right portion. Due to the impact, my car was badly damaged.

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: 11/02/2022 02:01
Officer In-Charge Of Case:	Classification Of Case: