

# 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 ..... 24/02/2022 14:55 (SGT)  
Date of Accident ..... 22/02/2022 18:09 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... WOODLANDS AVE 3 TWDS WOODLANDS AVE 5  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SLH8369A

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... PHEY CHONG PAU  
NRIC No ..... SXXXX968C  
Email Address ..... chongpau76@gmail.com  
Mobile Phone No ..... (Phone) +65-90212749  
Alternative Phone No ..... +65-90212749

### VEHICLE PARTICULARS

Manufacturer ..... Honda  
Model ..... Shuttle  
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 ..... 1496

### INSURANCE COMPANY

Name of Insurance Company ..... AIG Asia Pacific Insurance Pte. Ltd.  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... 2070138082-01  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... PHEY CHONG PAU  
NRIC No ..... SXXXX968C

Date Of Birth .....	20/10/1976
Occupation .....	Outdoor
Date Of Driving Pass .....	11/10/2010
Driving experience .....	11 YEARS AND 4 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-90212749
Alt. Phone Number .....	+65-90212749
Email Address .....	chongpau76@gmail.com
Address .....	BLK 573C WOODLANDS DRIVE
Address complement .....	#11-672
Postcode .....	733573
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 .....	LAU MING JUI
Gender .....	Male

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Woodlands Division Headquarters
Police Station Phone No .....	(Phone) +65-18004660000
Police Station Address .....	1 Woodlands St 12 Singapore 738622
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE ATTACHED STATEMENT.

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	Yes
Reasons for not uploading a video of the accident .....	WITH WORKSHOP
Was there any audio recorded? .....	No

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	GBC6921M
Vehicle Manufacturer .....	-

Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle
Name of Driver .....	ABDUL RAHMAN BIN MOHAMMED KAPI
NRIC No .....	SXXXX033G
Contact Number .....	(Phone) +65-81479517
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 .....	SMF8184P
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 .....	PHEY CHONG PAU
Gender .....	Male
Phone No .....	-
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	NECK,BACK & CHEST
Injured person in which vehicle? .....	SLH8369A
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No

## SKETCH PLAN

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  5. Any false reporting may be referred to the Police for investigation.
  6. The 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.
- 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

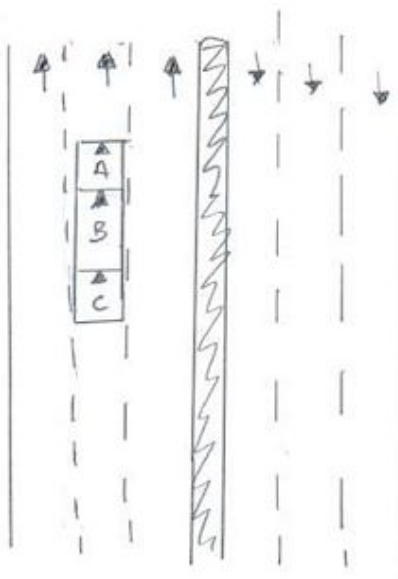
Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

Veh A: SLA 8369 A

Veh B: GBC 6921 M

Veh C: SMF 8184 P



Woodland Ave 3 towards Woodland Ave 5

Describe Circumstances of the Accident


On the mention date and time, 22/02/2022 around 1809 hours, I was travelling straight on land two woodlands ave 3 towards woodlands ave 5 my vehicle (SLH8369M) was travelling straight, out of sudden my vehicle got hit from the rear by vehicle (ABC6921M) because his vehicle got hit by the rear from vehicle (SMF8184P) and cause chain collision.

After the accident I was unwell and felt pain at my neck, back and chest so I went to Healthway medical Bk 888 woodlands drive bo #02-737 and was given 3 day MC from 23/02/2022 - 25/02/2022 inclusive

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

 24/02/22  
Witnessed by Reporting Centre Personnel















































**SINGAPORE  
POLICE FORCE**



L/20220223/7036

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**POLICE REPORT (NP299)**

Report No. L/20220223/7036

Police Station Of Origin  
Woodlands Division HQ  
1 Woodlands Street 12 SINGAPORE 738622  
Tel No:1800-4660000

Date/Time Report Made 23/02/2022 17:31	Vide Report No.	Station Diary No.
Name Of Informant PHEY CHONG PAU	Address 573C WOODLANDS DRIVE 16 #11-672 SINGAPORE 733573	
ID Type / ID No. NRIC NO / S7671968C	Contact No. Home/Office: Mobile: 90212749	
Nationality SINGAPORE CITIZEN	Email Address CHONGPAU76@GMAIL.COM	
Occupation Electrical engineer (general)	Sex Male	Age 45
Institution/School Name	Date of Birth 20/10/1976	Race Chinese
Date/Time Of Incident 22/02/2022 18:05 - 22/02/2022 18:30	Location Of Incident 573C WOODLANDS DRIVE 16 #11-672 SINGAPORE 733573	

**Brief details.**

On the mention date and time , 22/02/2022 around 1809 hours , I was travelling straight on lane two Woodlands ave 3 towards Woodlands ave 5 My vehicle (SLH8369A ) was travelling straight out of sudden my vehicle got hit from the rear by vehicle(GBC6921M) because his vehicle got hit by the the rear from vehicle(SMF8184P) and cause chain collision.

I was unwell and felt pain on my neck, back and chest so I went to Healthway Medical Blk 888

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: 23/02/2022 17:31
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE  
POLICE FORCE**



L/20220223/7036

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. L/20220223/7036

Woodlands drive 60 #02-737 and was given 3days MC from 23/02/2022-25/02/2022 inclusive.

Subjects Involved			
Victim			
Person Name	PHEY CHONG PAU		
ID Type	NRIC NO	ID No	S7671968C
Gender	Male	Age	45
Race	Chinese	Language	English
Occupation	Electrical engineer (general)	Address	573C WOODLANDS DRIVE 16 #11-672 SINGAPORE 733573
Mobile No	90212749	Is Informant A Victim?	Yes
Person Name	PHEY CHONG PAU (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: 23/02/2022 17:31
Officer In-Charge Of Case:	Classification Of Case: