



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	01/03/2022 13:54 (SGT)
Date of Accident	28/02/2022 14:30 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	PIE exit Paya Lebar Road
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMP2232X
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	HYMS Car Leasing Pte Ltd
Company Reg No	201320561K
Email Address	hyms@live.com.sg
Mobile Phone No	(Phone) +65-83336725
Alternative Phone No	+65-83336725

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	Auto
CC	1800

INSURANCE COMPANY

Name of Insurance Company	Etika Insurance Pte Ltd
Type of Coverage	Comprehensive
Fleet Policy	No
Policy Number	M0016848
Cover Note Number	-

DRIVER

Name of Driver	Ng Yi Hong
NRIC No	S9426443Z

Date Of Birth	25/07/1994
Occupation	Outdoor
Date Of Driving Pass	30/07/2016
Driving experience	5 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98895419
Alt. Phone Number	-
Email Address	hymys@live.com.sg
Address	132 Ang Mo Kio Avenue 3 #09-1633
Address complement	-
Postcode	560132
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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	Dry

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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

PASSENGER 1

Name	Grab Passenger (H: 8821608)
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Bedok Division Headquarters
Police Station Phone No	(Phone) +65-18002440000
Alt. Police Station Phone No	(Fax) +65-64443009
Police Station Address	30 Bedok North Road Singapore 469676
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

Please refer to the sketch plan/police report no: G/20220228/7083.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBE6246T
Vehicle Manufacturer	-

Vehicle Model	-
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	Ng Yi Hong
Gender	Male
Phone No	(Phone) +65-98895419
Address	132 Ang Mo Kio Avenue 3 #09-1633
Address Complement	-
Post Code	560132
Approximate Age Years Old	27
Injuries Sustained	-
Injured person in which vehicle?	SMP2232X
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No


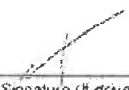

SKETCH PLAN

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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 making 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 - 1 MAR 2022	 Driver's Signature (If driver is not the policyholder) / Date & Time - 1 MAR 2022	 Witnessed by Reporting Centre Personnel Jenny Lim
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Veh A - SMP 22321

Veh B - GBE 62467

PKB B

Payo letter Road

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Describe Circumstances of the Accident

Refer rather to the attached Polar report.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time
- 1 MAR 2022

Driver's Signature (if driver is not the policyholder) / Date & Time
- 1 MAR 2022

DN

Witnessed by Reporting Centre
Personnel

Jenny Lim



**SINGAPORE
POLICE FORCE**



G/20220228/7083

1 of 2

POLICE REPORT (NP299)

Report No. G/20220228/7083

Police Station Of Origin
Bedok Division HQ
30 Bedok North Road SINGAPORE 469676
Tel No: 1800-2440000

Date/Time Report Made 28/02/2022 19:45	Vide Report No.	Station Diary No.
Name Of Informant NG YI HONG	Address 132 ANG MO KIO AVENUE 3 #09-1633 SINGAPORE 560132	
ID Type / ID No. NRIC NO / S9426443Z	Contact No. Home/Office:	Mobile: 98895419
Nationality SINGAPORE CITIZEN	Email Address ngyihong@hotmail.com	
Occupation Self employed	Sex Male	Age 27
Institution/School Name	Date of Birth 25/07/1994	Race Chinese
Date/Time Of Incident 28/02/2022 14:35	Location Of Incident PAN ISLAND EXPRESSWAY	
Brief details.		

On the stated date and time I was driving a female passenger (Vicki) on board vehicle SMP2232X. I was on the slip road of PIE Changi exiting to Paya Lebar Road. As I approached the zebra crossing I came to a stop. All of a sudden I felt a great impact from behind. The impact causes my right hand to slip and hit onto my steering wheel. I immediately felt pain on my right wrist. I then alighted and realised that vehicle GBE6246T had hit onto my vehicle's rear portion. After a while I felt pain on my neck, shoulder and lower back areas.

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: 28/02/2022 19:45
Officer In-Charge Of Case:	Classification Of Case:

**SINGAPORE
POLICE FORCE**

G/20220228/7083

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20220228/7083

I then proceeded to Pow Family Clinic and Surgery to seek treatment and I was given 4 days MC.

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: 28/02/2022 19:45
Officer In-Charge Of Case:	Classification Of Case: