

# 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 ..... 23/05/2022 13:35 (SGT)  
Date of Accident ..... 17/04/2022 03:00 (SGT)  
Exact Location of Accident ..... Prinsep St, Singapore  
Additional Location Information ..... -  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SGY6627M

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... TAN TECK WOON (CHEN DE'EN)  
NRIC No ..... SXXXX671J  
Email Address ..... chendeenn@hotmail.com  
Mobile Phone No ..... (Phone) +65-92288246  
Alternative Phone No ..... +65-92288246

### VEHICLE PARTICULARS

Manufacturer ..... Honda  
Model ..... Civic  
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 - Reporting only  
Vehicle Category ..... Private car  
Transmission ..... Auto  
CC ..... 1799

### INSURANCE COMPANY

Name of Insurance Company ..... China Taiping Insurance (Singapore) Pte. Ltd.  
Type of Coverage ..... Comprehensive  
Fleet Policy ..... No  
Policy Number ..... DMPCSNW00197712100  
Cover Note Number ..... -

### DRIVER

Name of Driver ..... TAN TECK WOON (CHEN DE'EN)  
NRIC No ..... SXXXX671J

Date Of Birth .....	16/06/1990
Occupation .....	Indoor
Date Of Driving Pass .....	21/08/2017
Driving experience .....	4 YEARS AND 8 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-92288246
Alt. Phone Number .....	+65-92288246
Email Address .....	chendeenn@hotmail.com
Address .....	BLK 448 BUKIT PANJANG RING ROAD #05-543
Address complement .....	-
Postcode .....	670448
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 .....	No 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 .....	2
Was anybody injured in the Accident? .....	No
Was any injured conveyed to hospital by ambulance? .....	-
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 .....	Bukit Panjang Neighbourhood Police Centre
Police Station Address .....	No.1 Segar Road #01-05 Singapore 677738
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT T/20220418/2107

#### 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 .....	SMU9433K
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) ..... -

**SKETCH PLAN****IMPORTANT NOTICE**

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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.
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.

*CLP*  
Policyholder's Signature / Date & Time

Sketch Plan

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

*PRINSEK STREET?*

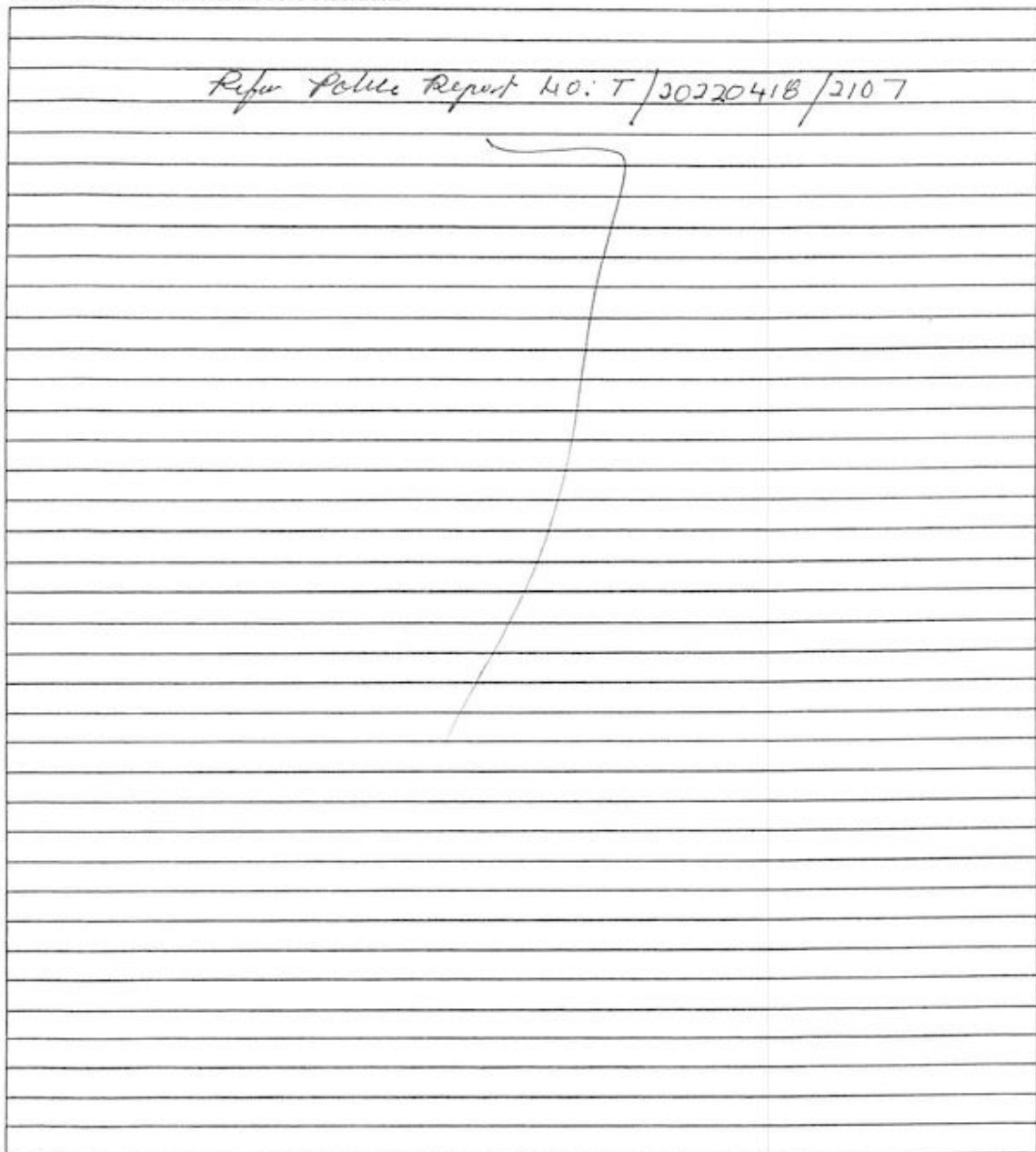


*28/05/2022*  
Witnessed by Reporting Centre Personnel

*A - SGY 6627M*  
*B - SMU 9433K*

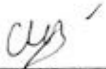
## Describe Circumstances of the Accident

Refer Police Report No: T/30220418/2107




## 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

  
Witnessed by Reporting Centre  
Personnel














**SINGAPORE  
POLICE FORCE**


T/20220418/2107

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Report No. T/20220418/2107

Police Station Of Origin:  
Bukit Panjang N.P.C  
1 Segar Road #01-05 SINGAPORE 677738  
Tel No: 1800-8929999

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 18/04/2022 20:16		Vide Report No.:		Station Diary No.: 85	
<b>Informant's Particulars</b>					
Name of Informant: TAN TECK WOON		Address: APT BLK 448 BUKIT PANJANG RING ROAD #05-543 SINGAPORE 670448			
ID Type / ID No.: NRIC NO / S9020671J		Contact No.: Home/Office: Mobile: 92288246			
Nationality: SINGAPORE CITIZEN		Email: chendeenn@hotmail.com			
Sex: Male	Age: 31	Date of Birth: 16/06/1990	Type of Informant: Driver		
Race: Chinese		Language:		Institution / School Name:	
Occupation: SALES ASSOCIATE		Driving Licence Information: Class: 2B,2A,3		Date of Expiry:	

<b>General Information of the Accident</b>				
Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 17/04/2022 03:00	Type of Location: Straight Road
Location:  PRINSEP STREET				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control:		Traffic Volume: No Traffic
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGY6627M	Car	HONDA	CIVIC 1.8L A	Grey	Slightly Damaged	0
SMU9433K	Car				Slightly Damaged	0

<b>Details of Vehicle Insurance</b>				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SGY6627M	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSNW001977 12100	04/10/2021	03/10/2022



**SINGAPORE  
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T/20220418/2107

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Report No. T/20220418/2107

**CONTINUATION OF REPORT**

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	TAN TECK WOON	ID No.	S9020671J
Related Vehicle	SGY6627M (Car)	Contact No.	92288246
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 18/04/2022 at around 1400hrs, I received an WhatsApp message from Traffic Police (TP) IO named Justin. IO Justin informed me that I was involved with an accident on 17/04/2022 at around 0300hrs along Prinsep Street. I was travelling along Prinsep Street at that time after having supper with friends, I was at Prinsep street from around 2300hrs (16/04/2022) to 0300hrs(17/04/2022) . However, I have no recollection of being involved in any accident nor colliding with any other vehicle, as I did not feel any collision with anything. As I was exiting Prinsep Street I heard a commotion behind me but did not think much of it and carried on. IO Justin instructed me to take pictures of my car and send it to him which I did, I have a habit of taking photos of my car and I coincidentally took a picture of my car on 17/04/2022 at around 0400hrs, the picture of which I have also sent to IO Justin. I inspected my vehicle and did not spot any damages, only some minor chipping of paint on the left side lower bumper which was already present prior to the supposed accident. I have a in car camera, but did not capture the incident due to its limited memory space. I am lodging this report as per IO Justin's instructions.



**SINGAPORE  
POLICE FORCE**

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T/20220418/2107

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Report No. T/20220418/2107

**CONTINUATION OF REPORT**

**Sketch Plan**

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature of Officer Recording The Report:

J /

SGT 2 NAZRUL CHIN

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

18/04/2022 20:16

Officer In Charge Of Case:

TP / GIA /

Other MUHAMMAD NOOR BIN ABDUL  
RAHMAN

Contact No.: 65476201

Classification Of Case:

NP168