

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	11/06/2022 09:49 (SGT)
Date of Accident	10/06/2022 17:45 (SGT)
Exact Location of Accident	Near Yishun Ave 1, Singapore
Additional Location Information	ALONG YISHUN AVENUE 1 TOWARDS LENTOR AVENUE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBA2714G
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	PRIME EMPLOYMENT AGENCY
Company Reg No	52912130A
Email Address	RYCP8888@GMAIL.COM
Mobile Phone No	(Phone) +65-90017608
Alternative Phone No	+65-90017608

VEHICLE PARTICULARS

Manufacturer	Fiat
Model	Doblo
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Manual
CC	1910

INSURANCE COMPANY

Name of Insurance Company	Tokio Marine Insurance Singapore Ltd
Type of Coverage	ThirdPartyFireTheft
Fleet Policy	No
Policy Number	MP001859
Cover Note Number	27/04/2022-26/04/2023

DRIVER

Name of Driver	YONG CHEE PING RAYMAN
NRIC No	S1346713G

Date Of Birth	20/06/1959
Occupation	Outdoor
Date Of Driving Pass	21/01/1978
Driving experience	44 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90017608
Alt. Phone Number	-
Email Address	RYCP8888@GMAIL.COM
Address	BLK 10B BEDOK SOUTH AVENUE 2
Address complement	#10-554
Postcode	461010
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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?	Yes
Number of vehicles involved in the accident	3
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)	2
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?	No

FOREIGN VEHICLE 1

Vehicle Registration Number	JSN1170
Vehicle Category	Private car

PASSENGER 1

Name	AU KIM ENG
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

I, RAYMAN YONG CHEE PING (HANDPHONE 90017608), NRIC S1346713/G WISH TO MAKE A TRAFFICE POLICE REPORT INVOLVING AN ACCIDENT WHICH OCCURRED ON 10TH JUNE 2022 AT 1745 HRS INVOLVING MY VEHICLE GBA2714G AND BEHIND ME, NAMELY JSN1170 (A MALAYSIAN CAR DRIVEN BY MS.NUR FAIQA BINTI HOOD, MALAYSIAN IC 90116015386, TEL:84970598, METALLIC BROWN COLOUR) WHICH COLLIDED DIRECTLY ONTO THE REAR OF MY VEHICLE. I WAS DRIVING MY VEHICLE GBA2714G WITH PASSENGER MS.AU KIM ENG NRIC S0153011I SITTING BESIDE ME AT THE FRONT SEAT AND WAS TRAVELLING ALONG YISHUN AVE 1 ON LANE 1 SLOWING DOWN WHILST APPROACHING THE TRAFFIC LIGHT JUNCTION QUEUE OF YISHUN AVE 2 AND LENTOR AVE AT A SLOW SPEED OF APPROXIMATELY 20KH/HRS WHEN SUDDENLY THE VEHICLE BEHIND ME, JSN1170 SLAMMED DIRECTLY ONTO THE REAR END OF MY VEHICLE. I STOPPED MY VEHICLE AND UPON STEPPING OUTSIDE, I DISCOVERED THAT BEHIND ME WAS A MALAYSIAN REGISTERED VEHICLE JSN1170 THAT HAD BADLY RAMMED THE REAR END OF MY VEHICLE. I ASKED THE LADY DRIVER OF THE CAR BEHIND ME WHAT HAD HAPPENED AND SHE TOLD ME THAT THE VEHICLE BEHIND HER CAR (SMV6871T, A WHITE COLOUR SINGAPORE CAR DRIVEN BY MR.TAN SOO CHUANG, S1588525D, TEL:81832567) HAD SLAMMED ONTO HER REAR AND THEN DUE TO THE FORCE HER CAR SLAMMED ONTO MY VEHICLE'S REAR. I THEN CALLED THE POLICE FOR ASSISTANCE AS THIS ACCIDENT HAD INVOLVED A FOREIGN VEHICLE. THE TRAFFIC POLICE TP395P THEN CAME TO THE SCENE AND ADVISED ME TO LODGE A FORMAL POLICE REPORT AND TO STATE CASE CARD REPORT NUMBER L/20220610/0080 WITH I/O REF: IC FAIZ TEL: 6547 6437. AT THE TIME OF THE ACCIDENT THE WEATHER WAS CLEAR, FINE AND NOT RAINING, IT THEN STARTED TO RAIN HEAVILY AFTER 10 TO 15 MINUTES OF THE ACCIDENT. THE REAR OF MY VEHICLE WAS BADLY DAMAGED WITH BITH HER REAR DOORS CAVED IN, STRUCTURES BENT AND UNABLE TO BE OPENED. AS WELL BADLY DAMAGED REAR BUMPER, NUMBER PLATE AND ASSOCIATED REAR LIGHTS AND REFLECTORS. MY IN-VEHICLE CAR CAM SIM CARD WAS GIVEN TO THE ATTENDING TRAFFIC POLICE OFFICER SSS T091061 MR.KHAIN (TP395P).

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	SD CARD WITH TRAFFIC POLICE
Was there any audio recorded?	No

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	JSN1170
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	VEHICLE B
No. Of Passenger (Including Driver)	1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMV6871T
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	VEHICLE C
No. Of Passenger (Including Driver)	1

SKETCH PLAN

IMPORTANT NOTICE

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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

Vehicle A = GBA 2714G

Vehicle B = JSN 1170

Vehicle C = 3MV 6871T



Yishun Avenue 1 Towards Lorong Avenue

Describe Circumstances of the Accident

REFER TO GIA REPORT

You had been advised by workshop that in the event that you wish to claim against your own policy (OD claim), there is a Fourteen (14) days clause whereby the claim must be made within the stipulated time-frame from the day of occurrence.

Reporting Only

Claim OD

Claim TP

☒ Claim OD/TP at other workshop

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

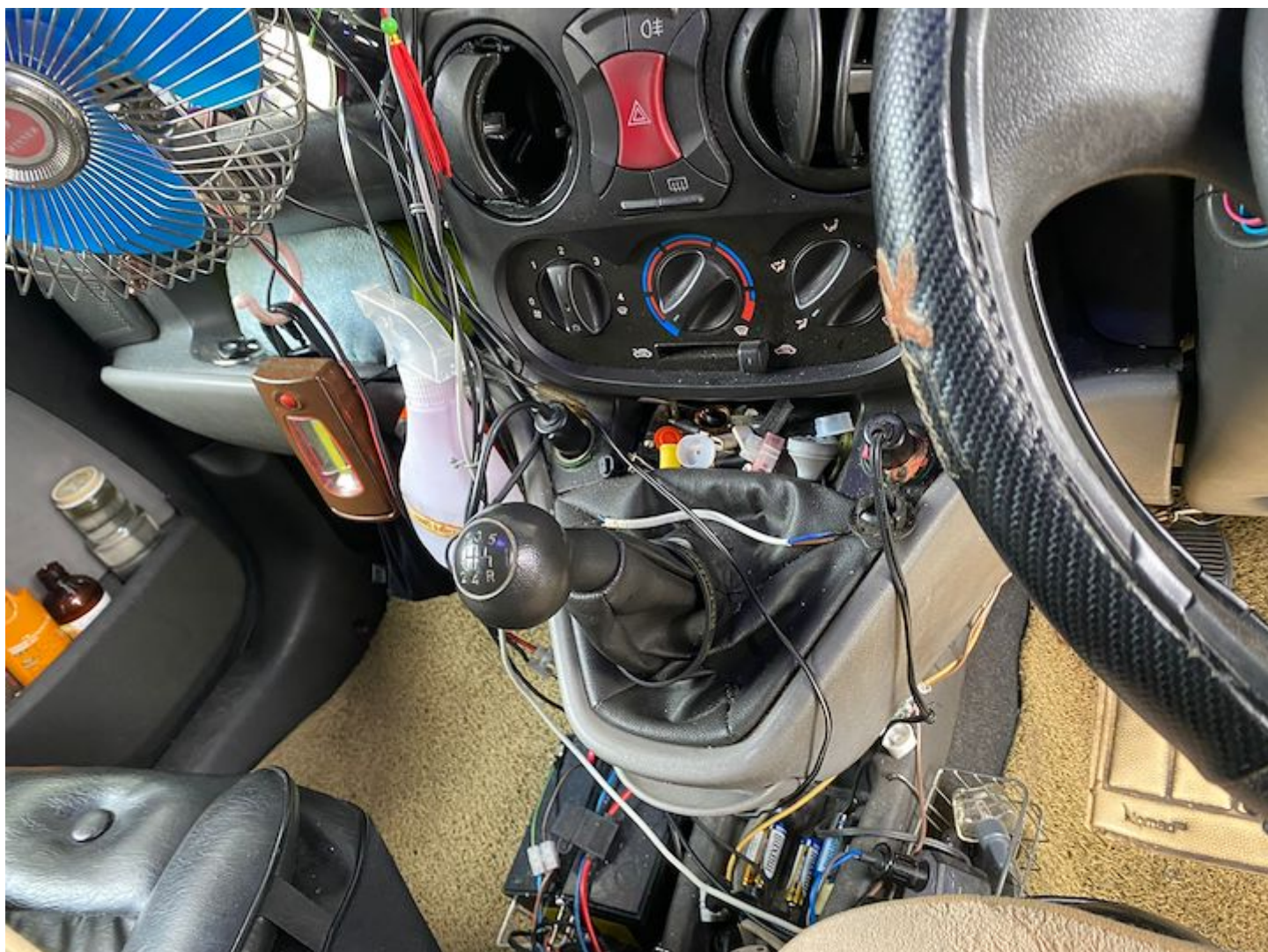


Witnessed by Reporting Centre Personnel



















**SINGAPORE
POLICE FORCE**



T/20220611/7003

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20220611/7003

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 11/06/2022 05:00	Vide Report No.: L/20220610/0080	Station Diary No.:
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Informant's Particulars

Name of Informant: YONG CHEE PING RAYMAN			Address: 10B BEDOK SOUTH AVENUE 2 #10-554 SINGAPORE 461010	
ID Type / ID No.: NRIC NO / S1346713G			Contact No.: Home/Office:	Mobile: 90017608
Nationality: SINGAPORE CITIZEN			Email: RYCP8888@GMAIL.COM	
Sex: Male	Age: 62	Date of Birth: 20/06/1959	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation:			Driving Licence Information: Class:	Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 10/06/2022 17:45	Type of Location: Straight Road
Location: YISHUN AVENUE 1				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 60 Km/h
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of
GBA2714G	Van	FIAT	DUBLO	Grey	Seriously Damaged	1
JSN1170	Car	OTHERS		Brown	Seriously Damaged	0



**SINGAPORE
POLICE FORCE**



T/20220611/7003

Police Station Of Origin:
Traffic Police
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Tel No: 65470000

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Report No. T/20220611/7003

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of
SMV6871T	Car	HYUNDAI	TUCSON	White	Seriously Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
GBA2714G	TOKIO MARINE INSURANCE SINGAPORE LTD.	MP001859	27/04/2022	26/04/2023

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	YONG CHEE PING RAYMAN		ID No.	S1346713G
Related Vehicle	GBA2714G (Van)		Contact No.	90017608
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave		NIL	Degree of	NIL
Passenger				
Name	AU KIM ENG		ID No.	S0153011I
Related Vehicle	GBA2714G (Van)		Contact No.	90713348
Hospital/Clinic	NIL		Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL		Date	NIL
No. of Days granted Medical Leave		NIL	Degree of	NIL



**SINGAPORE
POLICE FORCE**



T/20220611/7003

Police Station Of Origin:
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Tel No: 65470000

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Report No. T/20220611/7003

CONTINUATION OF REPORT

Driver			
Name	NUR FAIQAH BINTI HOOD		ID No. 90116015386
Related Vehicle	JSN1170 (Car)		Contact No. 84970598
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Class: NIL Date of Expiry: NIL
Date	NIL		Date NIL
No. of Days granted Medical Leave	NIL		Degree of NIL
Driver			
Name	TAN SOO CHUANG		ID No. S1588525D
Related Vehicle	SMV6871T (Car)		Contact No. 81832567
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Class: NIL Date of Expiry: NIL
Date	NIL		Date NIL
No. of Days granted Medical Leave	NIL		Degree of NIL

Brief Details.

I, RAYMAN YONG CHEE PING (handphone 90017608), NRIC S1346713/G wish to make a traffic police report involving an accident which occurred on 10th June 2022 at 1745 hrs involving my vehicle GBA2714G and behind me, namely JSN1170 (a Malaysian car driven by Ms. NUR FAIQAH BINTI HOOD, Malaysian IC 90116015386, Tel: 84970598, metallic brown colour) which collided directly onto the rear of my vehicle.

I was driving my vehicle GBA2714G with passenger Ms. Au Kim Eng NRIC S0153011i sitting beside me at the front seat and was travelling along Yishun Ave 1 on lane 1 slowing down whilst approaching the traffic light junction queue of Yishun Ave 2 and Lontor Ave at a slow speed of approximately 20 km/hr when suddenly the vehicle behind me, JSN1170 slammed directly onto the rear end of my vehicle.

I stopped my vehicle and upon stepping outside, I discovered that behind me was a Malaysian registered vehicle JSN1170 that had badly rammed the rear end of my vehicle.

I asked the lady driver of the car behind me what had happened and she told me that the vehicle behind her car (SMV6871T, a white colour Singapore car driven by Mr. Tan Soo Chuang, S1588525D, Tel: 81832567) had slammed onto her rear and then due to the force her car slammed onto my vehicle's rear.

I then called the police for assistance as this accident had involved a foreign vehicle.

The traffic police TP395P then came to the scene and advised me to lodge a formal police report and to state case card report number L/20220610/0080 with I/O ref: IC FAIZ tel: 6547 6437.



**SINGAPORE
POLICE FORCE**



T/20220611/7003

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Report No. T/20220611/7003

CONTINUATION OF REPORT

At the time of the accident the weather was clear, fine and not raining, it then started to rain heavily after 10 to 15 minutes of the accident.

The rear of my vehicle was badly damaged with both rear doors caved in, structures bent and unable to be opened, as well badly damaged rear bumper, number plate and associated rear lights and reflectors.

My In-vehicle Car Cam SIM Card was given to the attending Traffic Police Officer SSS T091061 Mr. Khain (TP395P)

I wish to claim for damages and repairs to my vehicle suffered as a result from this unfortunate accident which I am not responsible for, nor have negligently caused in any way.



**SINGAPORE
POLICE FORCE**



T/20220611/7003

Police Station Of Origin:
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Tel No: 65470000

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Report No. T/20220611/7003

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
ABDUL RAHIM BIN SALIM
Contact No.: 65476433

NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
11/06/2022 05:00

Classification Of Case:

