

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 21/06/2022 11:17 (SGT)
Date of Accident 21/06/2022 08:38 (SGT)
Exact Location of Accident PIE, Singapore
Additional Location Information TOWARDS CHANGI
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SLU1939H

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner GOH JIE MIN
NRIC No S9032690B
Email Address gohjimmy1990@hotmail.com
Mobile Phone No (Phone) +65-81814700
Alternative Phone No +65-81814700

VEHICLE PARTICULARS

Manufacturer Toyota
Model Harrier
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? Yes
Vehicle Category Private car
Transmission Auto
CC 1998

INSURANCE COMPANY

Name of Insurance Company India International Insurance Pte Ltd
Type of Coverage Comprehensive
Fleet Policy No
Policy Number D18MC0002392_03
Cover Note Number -

DRIVER

Name of Driver GOH JIE MIN
NRIC No S9032690B

Date Of Birth	25/08/1990
Occupation	Indoor
Date Of Driving Pass	12/03/2010
Driving experience	12 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81814700
Alt. Phone Number	+65-81814700
Email Address	gohjimmy1990@hotmail.com
Address	47 PAVILION VIEW
Address complement	-
Postcode	658461
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?	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

PASSENGER 1

Name	MADELINE CHOO
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

I WAS DRIVING ON LANE 1 OF PIE TOWARD CHANGI. INFRONT OF ME, VEHICLE NO. SLP 1231 S SUDDENLY E-BRAKE, I TOO QUICKLY STEPPED ON MY BRAKE, UNLUCKILY, MY VEHICLE STILL MOVE FORWARD AND HIT ONTO THE BACK OF VEHICLE NO. SLP 1231 S. UPON CHECKING, I REALISED THAT THERE IS ANOTHER VEHICLE NO. SHC 1600 B TOO INVOLVED IN THE ACCIDENT. BUT I HAVE NO IDEAL WHETHER VEHICLE NO. SLP 1231 S HIT ONTO VEHICLE NO. SHC 1600 S FIRST OR THIS IS A CHAIN COLLISION.

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

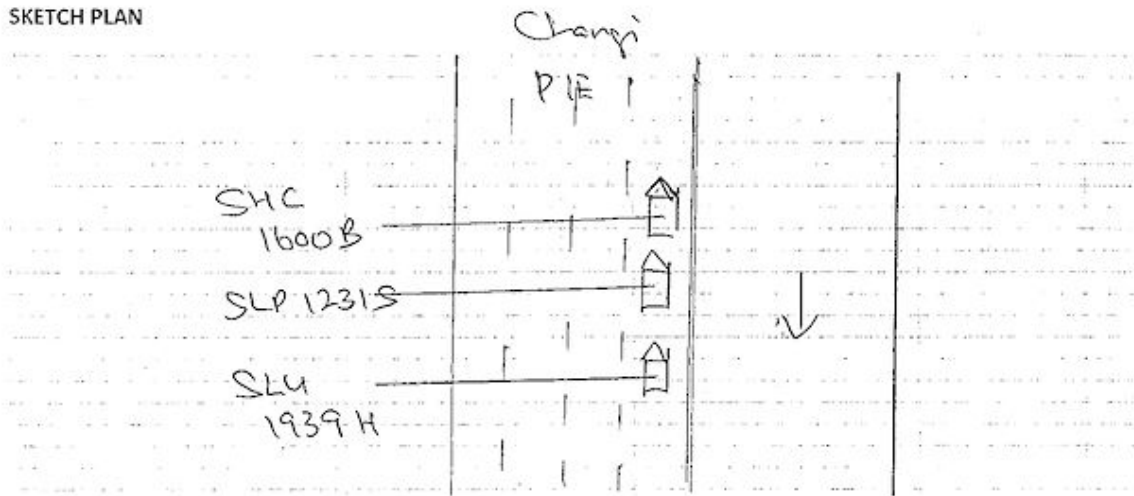
Vehicle Registration Number	SLP1231S
Vehicle Manufacturer	-
Vehicle Model	-

Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	HU ZHIHUA
NRIC No	S2675632D
Contact Number	(Phone) +65-98525409
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SHC1600B
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	NG TAW HIANG
NRIC No	S1600779Z
Contact Number	(Phone) +65-98239529
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving on lane 1 of PIE towards Changi. When Vch No SLP 1231 S e-brake, I do press on my brake, unluckily my vehicle still move forward & hit onto the back of SLP 1231 S. Upon checking, I realised that there was another vehicle Regn No. SHC 1600 B too involved in the accident. But I have no idea whether Vch No SLP 1231 S hit onto Vch No SHC 1600 B first or this is a chain collision.

DECLARATION

I/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:


Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:











