

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	28/06/2022 16:05 (SGT)
Reported by	Driver
Date of Accident	26/06/2022 11:55 (SGT)
Exact Location of Accident	CTE, Singapore
Additional Location Information	NEAR BALESTIER ROAD EXIT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNC3042C
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	TODOROKI LEASING
Company Reg No	5XXXX251K
Email Address	yuenmunheng6@gmail.com
Mobile Phone No	(Phone) +65-91285353
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Noah
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Auto
CC	1797

INSURANCE COMPANY

Name of Insurance Company	India International Insurance Pte Ltd
Policy Number / Cover Note Number	D21MFL0007697

DRIVER

Name of Driver	YUEN MUN HONG
NRIC No	SXXXX660H
Date Of Birth	02/11/1981
Occupation	Outdoor

Date Of Driving Pass	02/06/2019
Driving experience	3 YEARS
Gender	Male
Mobile Number	(Phone) +65-87898116
Alt. Phone Number	-
Email Address	yuenmunheng6@gmail.com
Address	BLK 349 CORPORATION DRIVE #02-514
Address complement	-
Postcode	610349
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
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

PASSENGER 1

Name	UNKNOWN
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Jurong West Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002689999
Alt. Police Station Phone No	(Fax) +65-62672438
Police Station Address	700 Corporation Road Singapore 649818
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT T/20220626/2065

ATTACHMENT(S)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SH9778M
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	AXA Insurance Pte Ltd
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	YUEN MUN HONG
Gender	Male
Phone No	(Phone) +65-87898116
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SNC3042C
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 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.



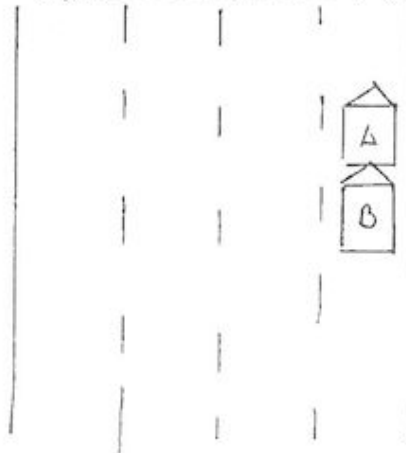
Policyholder's Signature / Date & Time

Sketch Plan

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

Witnessed by Reporting Centre Personnel

Along CTR NEAR BACKSTAIR ROAD EXIT



A - SNC 3042C

B - SH9778M

Describe Circumstances of the Accident

- 45 P&R police report - 7/2022 0626/2065

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





















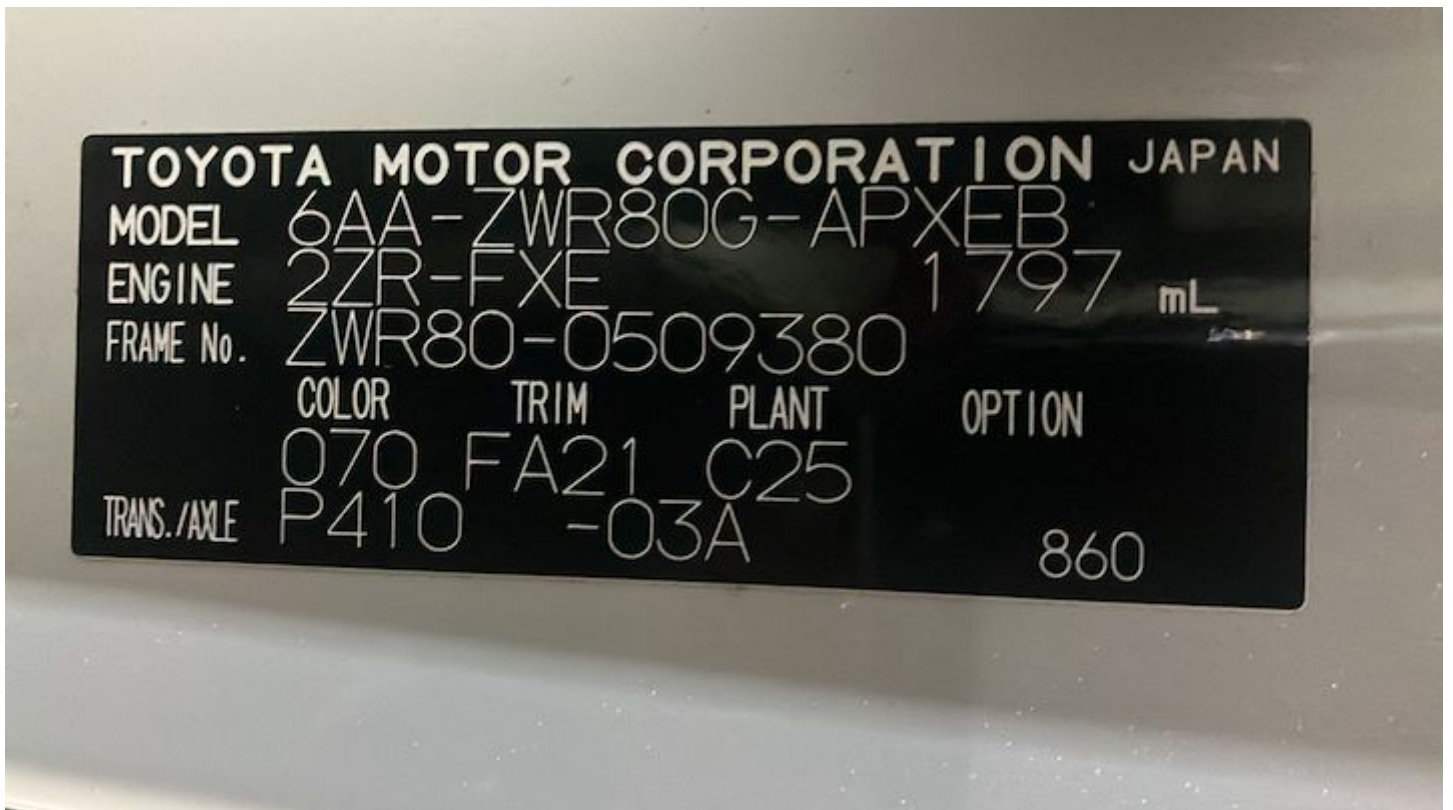
















**SINGAPORE
POLICE FORCE**



T/20220626/2065

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

1 of 3

Report No. T/20220626/2065

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/06/2022 20:44		Vide Report No.:		Station Diary No.: 125	
Informant's Particulars					
Name of Informant: YUEN MUN HONG		Address: APT BLK 349 CORPORATION DRIVE #02-514 SINGAPORE 610349			
ID Type / ID No.: NRIC NO / S8136660H		Contact No.:		Mobile: 87898116	
Nationality: SINGAPORE CITIZEN		Email:			
Sex: Male	Age: 40	Date of Birth: 02/11/1981	Type of Informant: Driver		
Race: Chinese		Language:		Institution / School Name:	
Occupation: PRIVATE HIRE DRIVER		Driving Licence Information: Class: 3		Date of Expiry:	

General Information of the Accident					
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 26/06/2022 12:00	Type of Location: Straight Road	
Location: CENTRAL EXPRESSWAY					
Weather: Clear		Road Surface: Dry		Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Heavy	
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 Passenger
SH9778M	Car	HYUNDAI	I40 1.7 CRDI F/L AT ABS AIRBAG 4DR			3
SNC3042C	Car	TOYOTA	NOAH 1.8X HYBRID CVT	White		1



**SINGAPORE
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700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999



T/20220626/2065

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Report No. T/20220626/2065

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	YUEN MUN HONG	ID No.	S8136660H
Related Vehicle	SNC3042C (Car)	Contact No.	87898116
Hospital/Clinic	PROHEALTH MEDICAL GROUP @ TAMAN JURONG PTE LTD	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	26/06/2022	Date Discharge	26/06/2022
No. of Days granted Medical Leave	03	Degree of Injury	Slight

Brief Details.

On 26/6/2022 at around 1155hrs, I was driving my car (SNC3042C) on the first lane of Central Expressway near exit 7D (Balestier Road). Suddenly, I felt an impact on the rear of my car. I then realized that a taxi (SH9778M) had hit the rear of my car. The front of the taxi hit onto the rear of my car. We then stopped our vehicles and I wanted to settle the matter. However, the taxi driver refused to exchange particulars. He told me just to take a picture of his taxi plate number and that would be enough for any insurance claim. He then left. I do not have an in-car camera. My car suffered some dents on the rear. I am unsure of the estimated cost of damages incurred. I went to the doctor and managed to receive a 3 days MC for injuries sustained. I was then told by my insurance company to lodge a traffic accident report.



SINGAPORE POLICE FORCE

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999



T/20220626/2065

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Report No. T/20220626/2065

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/

Other ASHRAF BIN ISHAK

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

26/06/2022 20:44

Officer In Charge Of Case:

TP / AEIT /

INSP (1) BOON YEN KIAN

Contact No.: 65476172

Classification Of Case:

NP168



IMPORTANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: SN09226S0005 Vehicle Registration No: SNC3042C
 Name (as shown in NRIC): YUEN KIU HONG NRIC/FIN/Passport No: Sxxxxx6604
 (*Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate
 Address: _____ Singapore ()
 Contact (Tel): _____ Mobile No.: 8789 8116
 Email Address: _____
 Date of Accident: 26/06/2022 Time of Accident: 11:15
 Place of Accident: C/E NEAR RAUSTUB ROAD EXIT
 Insurance Company: INDIA INSURANCE

(B) ADDITIONAL INFORMATION /AMENDMENTS:

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

DRIVER NAME to YUEN KIU HONG

Policyholder / Driver's Signature
Date:

20/07/2022
Reporting Centre Personnel's Signature
Name: Reg. 1. W. H. H.
NRIC/FIN No.:
Date:

TODOROKI LEASING

Todoroki Leasing (PTE) LTD. 5346251K
21 Tan Guan Road East, Tan Guan Centre, #05-10, S606609
Mobile: 8777 8998

VEHICLE RENTAL AGREEMENT

HIRER'S PARTICULAR

Name: (as in IIC) YUEN MUN HONG (YUEN)
NRIC/PASSPORT No: S81366601
Address (Res): BLK 349 CORPORATION DRIVE
#02-514 S610349

Name & Address of Employer:

Occupation: Driver Driving Exp: 2 years
Driving Licence No: S81366601 D/L Type: Local / International
Issue Date: 02 Jun 2019 Date of Birth: 02 NOV 1981
Tel: (O) _____ (R) _____ HP/PG 8789 8116
87402050

Name: (as in IIC)

NRIC/PASSPORT No:

Address (Res):

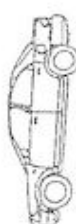
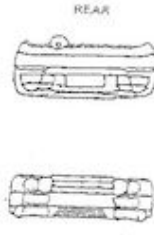
Driving License No: _____ D/L Type: Local / International

Issue Date: _____ Date of Birth: _____

Occupation: _____ Driving Exp: _____

VEHICLE CHECKLIST

INDICATE:
D - DENTS
S - SCRATCHES
A - ACCIDENTS



RIGHT

FRONT

TOP

LEFT

ACCESSORIES CHECK

- ☐ Ashtray ☒ Cig Lighter ☐ S/Tyre
☒ STD Tools ☒ Jack ☐ Sport Limb
☒ Radio / Cass ☒ GPS ☐ Hub-Caps
Android Player Camera ☐ Cartridges

Vehicle No: SNC 3042C Replace Veh No:
Mileage Out: 34km Mileage Out:
Make & Model: TOYOTA NOAH Auto / Manual

OUT Date: 19/10/2021 Time: 13:30pm

HIRE/PERIOD EXPIRY 7 years Lease to own 3/2

NON-WAIVER EXCESS: \$5000 / \$5000

EMERGENCY CONTACT

Name: LOM WAT YIN

Relationship: MOTHER Contact Numbers: 91102350

CHARGES

Daily @ \$125 per day \$875
Weekly @ \$ per week
Monthly @ \$ per month

Deposit \$500 \$500

Windscreen Excess \$300

Others

Remarks 2 day off for birthday

Delivery Service 02/11/21 to 03/11/21

SUB-TOTAL \$

Breach of contract fees \$136875

PETROL LEVEL

Out (E) 1/4 1/2 3/4 F
In (E) 1/4 1/2 3/4 F

EXTENSION

Collection Service

Misc.

TOTAL CHARGE \$

Signed for and on behalf of Todoroki Leasing

[Signature]

Hirer's signature

[Signature]

[Signature]

I have read and agree to the terms & condition on both sides of this agreement. If I have presented a charge/credit card for payment, I agree that all amounts payable under this agreement and for parking and traffic infringements may be billed to that account and my signature above will be considered to have been made on the charge/credit card voucher. All information I have given TODOROKI LEASING in connection with this agreement is true.

* IMPORTANT: UOB: 3693118245 EVERY MONDAY BEFORE 10.30PM

- ONLY PERSONS ABOVE 21 YEARS OF AGE WITH MORE THAN 2 YEARS DRIVING EXPERIENCE, AUTHORISED, LICENSED AND SIGNING THIS AGREEMENT MAY DRIVE OR UNDERTAKE OF Late
- ALL PARKING AND TRAFFIC VIOLATIONS ARE THE RESPONSIBILITY OF THE HIRER. AN ADMINISTRATIVE CHARGE WILL BE LEVIED ON ANY TRAFFIC VIOLATIONS INCURRED.
- THE HIRER SHALL BE LIABLE FOR EXCESS CHARGES FOR ANY LATE RETURN, AT THE RATE SHOWN PER HOUR OR PER DAY, INCLUSIVE OF CIVILIAN DAMAGE WHERE APPLICABLE.
- IN CASE OF ACCIDENT, THE HIRER SHALL REPORT TO RENTAL OFFICE IMMEDIATELY. IF THERE IS BODILY INJURIES, A POLICE REPORT MUST BE MADE WITHIN 24 HOURS.
- VEHICLE IS STRICTLY FOR SINGAPORE USE ONLY, AND MAY NOT BE DRIVEN OUT OF SINGAPORE WITHOUT PRIOR CONSENT OF THE COMPANY TODOROKI LEASING
- HIRER WHO OVERLOOK ON MAINTAINING THE ENGINE OIL & COOLANT THAT CAUSES DAMAGE TO THE ENGINE SHALL BEAR THE REPAIR COST.

RETURN OF VEHICLE - THE HIRER / DRIVER IS REQUIRED TO SIGN IN THE COLUMN "SIGNATURE OF HIRER / DRIVER" FAILING WHICH THE DAY AND TIME INSERTED BELOW SHALL BE DEEMED TO BE THE DAY AND TIME THE VEHICLE IS RETURNED TO OCEAN CAR2 LEASING PTE LTD AND THE SAME SHALL BE ACCEPTED AS CONCLUSIVE EVIDENCE OF THE SAME AND SHALL NOT BE CHALLENGED OR QUESTIONED ON ANY ACCOUNT WHATSOEVER.

DATE IN	TIME IN	MILEAGE	CHECKED BY	REMARKS	SIGNATURE OF HIRER/DRIVER