

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 27/06/2022 14:49 (SGT)
Reported by Both
Date of Accident 25/06/2022 23:52 (SGT)
Exact Location of Accident PIE, Singapore
Additional Location Information PIE (TOWARDS JURONG) LAMP POST 1055F
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMV9501S

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner CHENG THIAM SIEW THOMAS
NRIC No SXXXX546B
Email Address OHVEEPEE@GMAIL.COM
Mobile Phone No (Phone) +65-96176557
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Mercedes
Model 230ce
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 - Claiming third party
Vehicle Category Private car
Transmission Auto
CC 2299

INSURANCE COMPANY

Name of Insurance Company Direct Asia Insurance (Singapore) Pte Ltd
Policy Number / Cover Note Number S1306546B

DRIVER

Name of Driver CHENG THIAM SIEW THOMAS
NRIC No SXXXX546B
Date Of Birth 03/08/1958
Occupation Indoor

Date Of Driving Pass	08/11/1983
Driving experience	38 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96176557
Alt. Phone Number	-
Email Address	OHVEEPEE@GMAIL.COM
Address	10D BRADDELL HILL #22-13
Address complement	-
Postcode	579723
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
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
Translator's name	-
Translator's ID	-
Translator's phone number	-
Translator's email	-
Original language used in the statement	-

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Bishan Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18005529999
Alt. Police Station Phone No	(Fax) +65-65561905
Police Station Address	20 Bishan Street 23 Singapore 579757
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN AND POLICE REPORT

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHD4750B
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Taxi
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMK7855S
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	CHENG THIAM SIEW THOMAS
Gender	Male
Phone No	(Phone) +65-96176557
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	PAIN IN THE NECK AREA AND WAS GIVEN 4 DAYS MC
Injured person in which vehicle?	SMV9501S
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 2

Name of injured person	TAXI DRIVER OF VEHICLE SHD4750B
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	UNKNOWN
Injured person in which vehicle?	SHD4750B
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	-

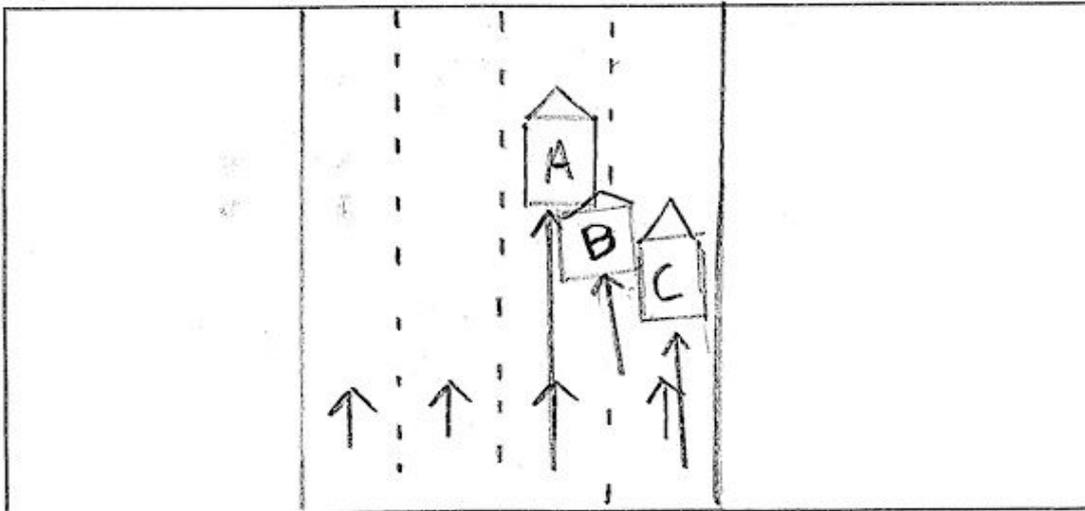
Direct Asig
Vehicle: SMV95015

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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- 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.

Sketch Plan



Cherithiamien

Policyholder's Signature / Date & Time

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

[Signature]
Witnessed by Reporting Centre Personnel

ANILIN MOTOR COMPANY

Date of accident: 25/06/2022 Time: 23:52 Location: Cheng Thiam Siew Thomas
My Vehicle A: SMV 95015 Vehicle B: SHD47508 Vehicle C: SMK 78555

SKETCH PLAN
Describe Circumstances of the Accident.

Refer to sketch plan and police report.

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under you own policy. Kindly check with your own insurer for more information.

Claim OD/TP at Ah Lim Motor Claim OD/TP at other workshop Reporting Only

We declare the foregoing particulars are true in every respect.

Cheng Thiam Siew

Policyholder's Signature / Date & Time

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



[Signature]

Witnessed by Reporting Centre Personnel

AH LIM MOTOR COMPANY



















T/20220627/2046

1 of 3

Report No. T/20220627/2046

Case Summary Form (CSF For NP168)

Manual NP168 Form Serial No 01

Report Number T/20220627/2046

Vide Report Number T/20220626/2041

Date/Time of Report Made 27/06/2022 13:51

Place Report Lodged Traffic Police

Type of Informant Driver

Name of Informant Cheng Thiam Siew Thomas

ID Type / ID No. NRIC NO / S1306546B

Home/Office

Mobile 96176557

Email

Type of Accident Injury / Drink & Drive

Drink Drive Yes

Anyone conveyed by ambulance No

Date/Time of Accident 25/06/2022 23:50

Accident Location PAN-ISLAND EXPRESSWAY


 THOMSON NPP
 BLK 25 SIN MING ROAD
 #01-80
 SINGAPORE 570025
 TEL: 1800-4529999

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHD4750B	Taxi				Slightly Damaged	1
SMK7855S	Car				Slightly Damaged	0
SMV9501S	Car	MERCEDES BENZ	230CE AUTO	Blue	Slightly Damaged	0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



T/20220627/2046

2 of 3

Report No. T/20220627/2046

Continuation of CSF For NP168

Driver			
Name	Unknown Driver	ID No.	NIL
Related Vehicle	SHD4750B (Taxi)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	Sim Wei Ming	ID No.	NIL
Related Vehicle	SMK7855S (Car)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Driver			
Name	Cheng Thiam Siew Thomas	ID No.	S1306546B
Related Vehicle	SMV9501S (Car)	Contact No.	96176557
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	27/06/2022	Date Discharge	27/06/2022
No. of Days granted Medical Leave	04	Degree of Injury	NIL

Brief Facts.

Vide T/20220626/2041.

I wish to add on that after the accident I felt pains on the right side of my neck. As such on 27/06/2022, I went to Mount Alvernia to seek treatment and was given 4 days medical leave.



T/20220627/2046

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Report No. T/20220627/2046

Continuation of CSF For NP168

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.

Case Sensitivity	No
Officer-In-Charge of Case	TP / DDGVT / YUS MASTARI I KHAZALI
Classification of Case	1) INJURY / DRINK & DRIVE



**SINGAPORE
POLICE FORCE**



T/20220626/2041

1 of 4

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

Report No. T/20220626/2041

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 26/06/2022 15:26	Vide Report No.: E/20220625/0185	Station Diary No.: 25
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Informant's Particulars

Name of Informant: CHENG THIAM SIEW THOMAS			Address: 10D BRADDELL HILL #22-13 SINGAPORE 579723		
ID Type / ID No.: NRIC NO / S1306546B			Contact No.: Home/Office: Mobile: 96176557		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 63	Date of Birth: 03/08/1958	Type of Informant: Driver		
Race: Chinese			Language:	Institution / School Name:	
Occupation: Retiree			Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:		

General Information of the Accident

Type of Accident: Injury Drink & Drive	Drink Drive: No	Date/Time of Accident: 25/06/2022 23:50	Type of Location: Straight Road
Location: PAN-ISLAND EXPRESSWAY			
Weather: Clear	Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way	Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Chain Collision		Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHD4750B	Car				Seriously Damaged	1
SMK7855S	Car				Seriously Damaged	0
SMV9501S	Car	MERCEDES BENZ	230CE AUTO	Blue	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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**SINGAPORE
POLICE FORCE**



T/20220626/2041

2 of 4

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

Report No. T/20220626/2041

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMV9501S	DIRECT ASIA INSURANCE (SINGAPORE) PTE. LTD.	MT/00865716/01	01/11/2020	31/10/2022

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	Unknown Driver		ID No.	NIL
Related Vehicle	SHD4750B (Car)		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL
Driver				
Name	SIM WEI MING		ID No.	S8617368I
Related Vehicle	SMK7855S (Car)		Contact No.	NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL
Driver				
Name	CHENG THIAM SIEW THOMAS		ID No.	S1306546B
Related Vehicle	SMV9501S (Car)		Contact No.	96176557
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL



SINGAPORE
POLICE FORCE



T/20220626/2041

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

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Report No. T/20220626/2041

CONTINUATION OF REPORT

Brief Details.

On 25/06/2022 at about 2352hrs, I was driving my vehicle (SMV9501S) on the middle lane along PIE Lampost 1055F towards Jurong.

Later, I heard a impact sound from the rear of my vehicle but I did not see anything. Suddenly, I felt the impact on the rear of my vehicle which a taxi (SHD4750B) collided onto the rear of my vehicle from 2nd extreme right lane. I then made a check and discovered that a vehicle (SMK7855S) collided onto the taxi (SHD4750B) which caused the taxi to lose control of his vehicle and hit onto the rear of my vehicle. Due to this, my vehicle sustained dents, scratches, dislodged parts, damaged paintworks and broken lens. I then exchanged particulars with the driver of (SMK7855S) which I observed that he was drunk. As such, I called for police assistance. I did not take down the taxi driver particulars.

Subsequently, the traffic police and SCDF was at scene. The driver of (SMK7855S) was arrested by the traffic police. I was then advised by the traffic police to lodge a traffic report.

I am lodging this report for insurance claims and as advised by the traffic police.



**SINGAPORE
POLICE FORCE**



T/20220626/2041

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

4 of 4

Report No. T/20220626/2041

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:
E /
SGT 3 PANG XIU KANG

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
26/06/2022 15:26

Officer In Charge Of Case:
TP / DDGVT /
SR STAFF SGT YUS MASTARI I KHAZALI
Contact No.: 65476347

Classification Of Case:

NP168