

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 05/07/2022 14:35 (SGT)
Reported by Driver
Date of Accident 04/07/2022 16:50 (SGT)
Exact Location of Accident Singapore
Additional Location Information JUNCTION OF ANG MO KIO AVENUE 4 AND ANG MO KIO
AVENUEUE(TOWARDS YIO CHU KANG ROAD)
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SJA2384E

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner PARADIGM AUTO PTE LTD
Company Reg No 201943139H
Email Address AUBURNAUTO.INSURANCE@GMAIL.COM
Mobile Phone No (Phone) +65-91772142
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Toyota
Model Vios
Variant -
Exact purpose for which vehicle was being used at time of
accident Private hire
Are you claiming under your own insurance policy for repair to
your vehicle? No - Claiming third party
Vehicle Category Private hire
Transmission Auto
CC 1500

INSURANCE COMPANY

Name of Insurance Company NTUC Income Insurance Co-operative Ltd
Policy Number / Cover Note Number 5125953312

DRIVER

Name of Driver SIAU WUI SEONG
NRIC No S7132139H
Date Of Birth 17/09/1971

Occupation	Outdoor
Date Of Driving Pass	28/12/1992
Driving experience	29 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-94766631
Alt. Phone Number	-
Email Address	AUBURNAUTO.INSURANCE@GMAIL.COM
Address	207 ANG MO KIO AVENUE 1 #09-1023
Address complement	-
Postcode	560207
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	Raining
Road Surface	Wet

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	ADRINA KAY
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Ang Mo Kio Division Headquarters
Police Station Phone No	(Phone) +65-18002180000
Alt. Police Station Phone No	(Fax) +65-64814246
Police Station Address	51 Ang Mo Kio Avenue 9 Singapore 569784
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT

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	GX298Z
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	Yellow
Vehicle Category	Commercial vehicle
Name of Driver	HE XIAOFEI
Passport No/FIN	G2774737Q
Contact Number	(Phone) +65-84197944
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

INJURED PERSONS DETAILS


INJURED 1

Name of injured person	SIAU WUI SEONG
Gender	Male
Phone No	(Phone) +65-94766631
Address	207 ANG MO KIO AVENUE 1 #09-1023
Address Complement	-
Post Code	560207
Approximate Age Years Old	50
Injuries Sustained	WHIPLASH NECK INJURY
Injured person in which vehicle?	SJA2384E
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

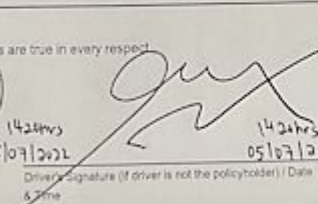
Describe Circumstance of the Accident

REFER TO GEARS


Declaration
I/We declare the foregoing particulars are true in every respect

 1424hrs 05/07/2022

Policyholder's Signature / Date & Time

 1424hrs 05/07/2022

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

 1424hrs 05/07/2022

Witnessed by Reporting Centre Personnel
(Name as in NRIC card)


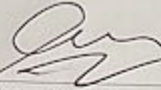

TION TON KAT HERN

2

SKETCH PLAN

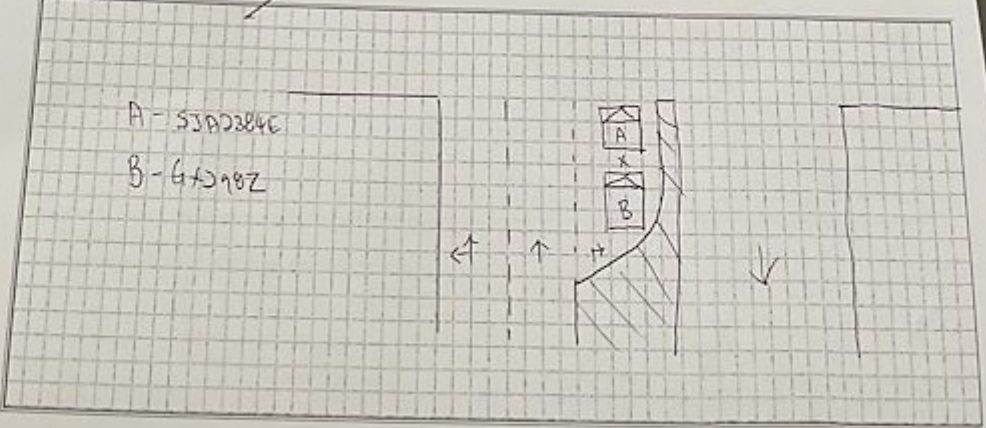
IMPORTANT NOTICE

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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/email 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.


 1420hrs 05/07/2022
 
 1420hrs 05/07/2022
 
 TIEW JIH KIAT HENRY


Policyholder's Signature / Date & Time
 Driver's Signature (If driver is not the policyholder) / Date & Time
 Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

Sketch Plan




1

Signature Of Officer Recording The Report: Not applicable		Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.	
Signature Of Interpreter: Not applicable		Date/Time: 05/07/2022 09:55	
Officer In-Charge Of Case:		Classification Of Case:	



**SINGAPORE
POLICE FORCE**

POLICE REPORT (NP299)



2 of 2

CONTINUATION OF REPORT

Report No. F7022207057019

Subjects Involved			
Victim			
Person Name	SIAU WUI SEONG		
ID Type	NRIC NO	ID No	S7132139H
Gender	Male	Age	50
Race	Chinese	Language	English
Occupation	Taxi driver	Address	207 ANG MO KIO AVENUE 1 #09-1223 SINGAPORE 600207
Mobile No	94786631	Is Informant A Victim?	Yes
Person Name: SIAU WUI SEONG (Informant)			

Signature Of Officer Recording The Report: Not applicable		Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.	
Signature Of Interpreter: Not applicable		Date/Time: 05/07/2022 09:55	
Officer In-Charge Of Case:		Classification Of Case:	

SINGAPORE POLICE FORCE		1 of 2	
POLICE REPORT (NP299)		Report No. F/20220705/7019	
Police Station Of Origin Ang Mo Kio Division HQ 51 Ang Mo Kio Avenue 9 SINGAPORE 569784 Tel No 1800-2180000			
Date/Time Report Made 04/07/2022 09:55	Video Report No.	Station Diary No.	
Name Of Informant SIAU WUI SEONG	Address 207 ANG MO KIO AVENUE 1 #09-1023 SINGAPORE 560207		
ID Type / ID No. NRIC NO / S7132139H	Contact No. Home/Office	Mobile: 94766631	
Nationality SINGAPORE CITIZEN	Email Address SIAUWVS@YAHOO.COM		
Occupation Taxi driver	Sex Male	Age 50	Date of Birth 17/09/1971
Institution/School Name	Language English	Race Chinese	
Date/Time Of Incident 04/07/2022 04:50 - 04/07/2022 16:55	Location Of Incident 207 ANG MO KIO AVENUE 1 #09-1023 SINGAPORE 560207		
Brief details			
On the 04 July 2022, 4.50pm, I was driving Car plate bearing SJA2384E Toyota Vios at along Cross Junction of Ang Mo Kio Ave 4 towards Yio Chu Kang Road. My car was at a complete stop as the traffic light was red. About a few seconds later, there was a van car plate bearing GX266Z suddenly came at a high speed and collided into the rear of my vehicle. This caused severe damages to my vehicle and I was also given 5 days MC with strong medication.			
Signature Of Officer Recording The Report Not applicable		Signature Of Informant The identity of the person making this report has been authenticated by Singapore. No signature is required.	
Signature Of Interpreter Not applicable		Date/Time 05/07/2022 09:55	
Officer In Charge Of Case:		Classification Of Case:	
SINGAPORE POLICE FORCE		2 of 2	
POLICE REPORT (NP299)		CONTINUATION OF REPORT	
		Report No. F/20220705/7019	