

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	09/07/2022 16:55 (SGT)
Reported by	Both
Date of Accident	09/07/2022 08:13 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	SLIP ROAD OF TPE TOWARDS PASIR RIS DRIVE 8
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMU7255X
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	LIN BOON CHEE
NRIC No	S1264363B
Email Address	linboonchee@gmail.com
Mobile Phone No	(Phone) +65-87993208
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	PRIUS HYBRID 1.8E CVT
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	1797

INSURANCE COMPANY

Name of Insurance Company	Tokio Marine Insurance Singapore Ltd
Policy Number / Cover Note Number	21-MR004883-R01

DRIVER

Name of Driver	LIN BOON CHEE
NRIC No	S1264363B
Date Of Birth	15/12/1957
Occupation	Outdoor

Date Of Driving Pass
Driving experience
Gender
Mobile Number
Alt. Phone Number
Email Address
Address
Address complement
Postcode
Is the driver the policyholder?
If No, Relationship of the Driver with the Insured
Does Driver Own Other Vehicles?
Vehicle Registration Number of Other Vehicle Owned by Driver
Insurance Company of Other Vehicle Owned by Driver

24/02/1977
45 YEARS AND 5 MONTHS
Male
(Phone) +65-87993208
-
linboonchee@gmail.com
BLK 617 ANG MO KIO AVE 4, #11-1053, S560617
-
-
Yes
-
No
-
-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident
Weather Conditions
Road Surface

Collision - Head to Rear
Clear
Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?
Number of vehicles involved in the accident
Was anybody injured in the Accident?
Was any injured conveyed to hospital by ambulance?
Was any other vehicle or property damaged?
Number of Passengers (Including Driver)
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?
Translator's name
Translator's ID
Translator's phone number
Translator's email
Original language used in the statement

No
2
No
-
Yes
4
No
-
-
-
-

PASSENGER 1

Name
Gender

unknown passenger
Male

PASSENGER 2

Name
Gender

unknown passenger
Male

PASSENGER 3

Name
Gender

unknown passenger
Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?
Was notice of intended Prosecution given?
If yes, against whom?

No
No
-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO ATTACHED REPORT

ATTACHMENT(S)

Are accident photos available for attachment?

Yes

Was there any video captured by Car Camera?
Reasons for not uploading a video of the accident

Yes
THE VIDEO IS WITH THE INSURED

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SMF2742T
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) 2

PASSENGER 1

Name UNKNOWN PASSENGER
Gender Female

SKON2279000 B

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8. Consent under the Personal Data Protection Act (PDPA)

(a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may be 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' lawyer/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of :

(collectively the "Purposes")

(c) My Personal Information may also be disclosed by any of the Insurers and/or GIA to their third party service providers or agents (including their law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Phan

Policyholder's Signature / Date &
Time:

10.20 AM
+ 9.07.22

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

Witnessing by Reporting Centre
Baroncel

Sketch Plan


Describe Circumstances of the Accident

On 07/07/2012 at about 08:30hrs I was driving my vehicle (A 5001234X) along the slip road of TPL towards the bus lane. I slowed down and stopped to give way for the main road traffic. Suddenly I felt an impact on my vehicle's rear bumper and discovered that a vehicle (A 5001234T) had hit the rear of my vehicle.

Declaration

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


Policyholder's Signature / Date & Time

 10.20 am.
090722
Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel