

Send/Fax to: _____

Submitted: _____

SINGAPORE ACCIDENT STATEMENT

BASIC INFORMATION	
Date of Accident:	15/07/2022
Time of Accident:	1115hrs
Exact Location:	Cliff road from Uishun Ave 7 to Sembawang Rd

DETAILS OF OWN VEHICLE	
Vehicle Registration No.	SLM4094L
NRIC / FIN / Passport no:	875086361
Name of Registered Owner:	TAN KIAN BENQ
Owner's Email:	jason.tan.033@hotmail.com
Owner's Address:	Blk 151 Rivervale Crescent #06-95 15154015
Vehicle Make:	TOYOTA
Vehicle Model:	SIENNA
Engine Capacity (cc):	1496
Transmission:	Auto / Manual
Type of Claim:	Own Damage / Third Party / Reporting Only
Vehicle Category:	Private / Commercial / Motorcycle / Private Hire
Name of Insurance Co:	EQ Ins
Type of Policy:	Comprehensive / Third Party / Third Party, Fire & Theft
Policy Number:	DMPPH022-001817

DRIVER	
Name of Driver:	TAN KIAN BENQ
NRIC / FIN / Passport no:	875086361
Date of Birth:	31-03-1975
Occupation:	Indoor / Outdoor
Driving Pass Date:	14-03-2001
Contact Number:	9825 3250
Gender:	Male / Female
Address:	AS OWNER
Relationship with Owner:	Owner / Employee / Spouse / Child / Hirer / Other:
Translator Name:	
Translator NRIC:	
Translator Contact no:	
Translator email:	

GENERAL INFORMATION - DATE OF ACCIDENT	
Type of Collision:	Chain collision / Side Swipe / Front to Rear / Others:
Weather Condition:	Clear / Raining / Others:
Road Surface:	Dry / Wet
Video available:	Yes / No
Was anybody injured?	Yes / No
Police Report Made?	Yes / No
No. of passenger onboard (including driver):	01

DETAILS OF OTHER VEHICLE			
	Vehicle 1	Vehicle 2	Vehicle 3
Vehicle Registration No:	22100 MID		
Vehicle Make / Model:			
Name of Driver:	CONRAD LEE ZHON RONG		
NRIC / FIN / Passport no:	899414491		
Contact Number:			
Name of insurance Co:			

DETAILS OF WITNESS	
Name:	
Contact Info:	

DETAILS OF INJURED PERSON			
	Person 1	Person 2	Person 3
Name / in which vehicle?:			

Driver's Declaration: I declare that the information given in this report are true and accurate to the best of my collection and I bear full responsibility for any consequences arising from incomplete or inaccurate information that are submitted.

Signature of Driver

Date and time

15/7/22 14:15

Describe Circumstance of the Accident

I was travelling along Yishun Ave 7. I stopped my car at the slip road to Sembawang Rd.

After a few seconds, a military truck came from behind and rammed onto the rear of my car. Due to the strong impact, my vehicle was pushed out of the stop line.

I was alone at the time of accident. The other vehicle had 01 passenger with the driver.

AS PER ATTACHED POLICE REPORT #T20220715/7624

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

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

IMPORTANT NOTICE

SKETCH PLAN

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 Actual 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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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.

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

I understand, acknowledge, agree and consent that:

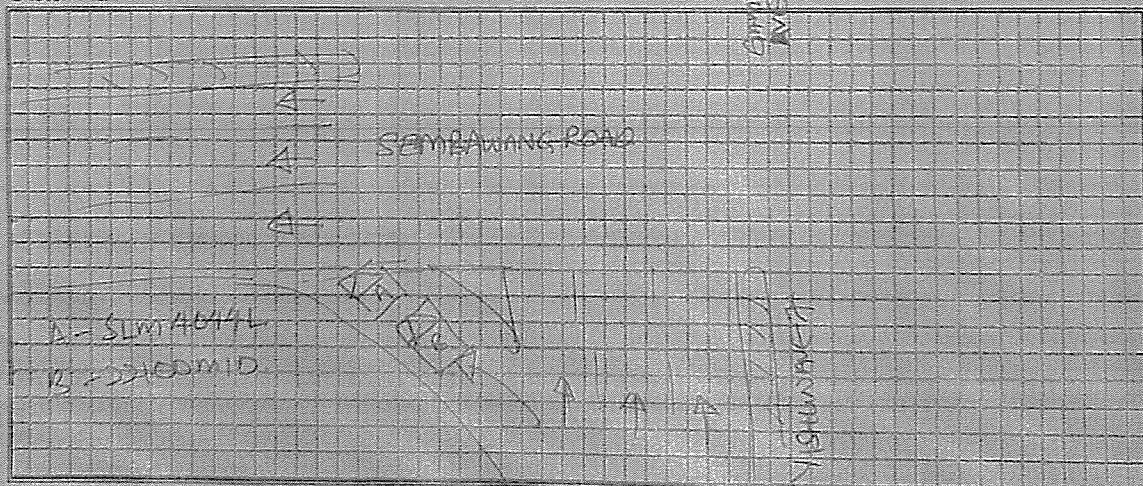
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this (form) and any other personal information provided by me or possessed by my insurer (collectively the "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

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

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

Sketch Plan





SINGAPORE POLICE FORCE



T/20220715/7024

1 of 3

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20220715/7024

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 15/07/2022 14:13	Vide Report No.:	Station Diary No.:
Informant's Particulars		
Name of Informant: TAN KIAN BENG	Address: 151 RIVERVALE CRESCENT #06-92 SINGAPORE 540151	
ID Type / ID No.: NRIC NO / S7508636I	Contact No.: Home/Office:	Mobile: 98255250
Nationality: SINGAPORE CITIZEN	Email: JASONTAN033@HOTMAIL.COM	
Sex: Male	Age: 47	Date of Birth: 31/03/1975
Type of Informant: Driver		
Race: Chinese	Language: English	Institution / School Name:
Occupation:	Driving Licence Information: Class: 3	Date of Expiry:

General Information of the Accident				
Type of Accident: Non-Injury Government Vehicle	Drink Drive: No	Date/Time of Accident: 15/07/2022 11:05	Type of Location: X-Junction	
Location: YISHUN AVENUE 7				
Weather: Clear	Road Surface: Dry	Road Speed Limit: 50 Km/h		
Traffic Flow: Dual Carriage Way	Traffic Control: Not Controlled	Traffic Volume: Light		
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
22100MID	Lorry					1
SLM4044L	Car	TOYOTA	SIENTA 1.5 CVT ELEGANCE	Brown	Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date



**SINGAPORE
POLICE FORCE**



T/20220715/7024

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Report No. T/20220715/7024

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLM4044L	EQ INSURANCE COMPANY LTD.	DMPPHQ22-001817	29/03/2022	28/03/2023

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	GONRAD LEE ZHEN RONG	ID No.	S99414491
Related Vehicle	22100MID (Lorry)	Contact No.	86612948
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL
Driver			
Name	TAN KIAN BENG	ID No.	S75086361
Related Vehicle	SLM4044L (Car)	Contact No.	98255250
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details:

ON 15.07.2022 AT AROUND 1105HRS, I WAS DRIVING MY MOTORCAR SLM4044L ALONG YISHUN AVE 7 TOWARDS SEMBAWANG ROAD. I STOPPED MY CAR AT THE SLIP ROAD TO SEMBAWANG ROAD TO CHECK FOR TRAFFIC CLEARANCE. AFTER A FEW SECONDS, A MILITARY TRUCK (22100MID) CAME FROM BEHIND AND RAMMED ONTO THE REAR OF MY VEHICLE. DUE TO THE STRONG IMPACT, MY VEHICLE WAS PUSHED OUT OF THE STOP LINE. MY VEHICLE SUSTAINED SERIOUS DAMAGES ON THE REAR PORTION.

I WAS ALONE AT THE TIME OF ACCIDENT. THE OTHER DRIVER HAD 1 PASSENGER ON HIS VEHICLE.