

# 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 ..... 19/07/2022 15:11 (SGT)  
Reported by ..... Driver  
Date of Accident ..... 13/07/2022 21:05 (SGT)  
Exact Location of Accident ..... AYE, Singapore  
Additional Location Information ..... -  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SNF8566J

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... GRAB RENTALS PTE LTD  
Company Reg No ..... 201617200G  
Email Address ..... gr.sg.accident@grab.com  
Mobile Phone No ..... (Phone) +65-97370525  
Alternative Phone No ..... (Office) +65-66550005

### VEHICLE PARTICULARS

Manufacturer ..... Toyota  
Model ..... Sienta  
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 ..... 1496

### INSURANCE COMPANY

Name of Insurance Company ..... India International Insurance Pte Ltd  
Policy Number / Cover Note Number ..... D21MFL0000447\_01

### DRIVER

Name of Driver ..... TAN KAY CHUNG  
NRIC No ..... S1830761H  
Date Of Birth ..... 01/10/1967  
Occupation ..... Outdoor

Date Of Driving Pass .....	01/08/1985
Driving experience .....	36 YEARS AND 11 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-97370525
Alt. Phone Number .....	-
Email Address .....	gr.sg.accident@grab.com
Address .....	BLK 240 BUKIT PANJANG RING ROAD #11-129
Address complement .....	-
Postcode .....	670240
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 .....	Hit and run / Vandalism / Damaged whilst parked
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? .....	No
Was any injured conveyed to hospital by ambulance? .....	-
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 .....	Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Bukit Panjang Neighbourhood Police Centre
Police Station Address .....	No.1 Segar Road #01-05 Singapore 677738
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

ON 13/07/2022 2105HRS, I WAS DRIVING VEHICLE A (SNF8566J) ALONG AYE TUAS ON THE MIDDPE LANE. SUDDENLY A VEHICLE WITHA TRAILER ATTACHED TO THE BACK SWERVED OUT INTO MY LANE. I WANTED TO AVOID COLLISION SO I SWERVED TO THE LANE ON MY RIGHT, SUDDENLY I FELT A COLLISION, I HAD COLLIDED WITH VEHICLE B (SMA8886Z) THAT WAS TRAVELLING ON THE FIRST LANE. NO INJURIES.

PLEASE REFER POLICE REPORT NO. T/20220714/2073

#### 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 .....	UNKNOWN
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle
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 .....	SMA8886Z
Vehicle Manufacturer .....	Subaru
Vehicle Model .....	Forester
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	YONG SHI WEI, OLIVIA (YANG SHIWEI, OLIVIA)
NRIC No .....	S8108501C
Contact Number .....	(Phone) +65-97453857
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

**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/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 *19/07/22* *1225*

Witnessed by Reporting Centre Personnel *Amin*

**Sketch Plan**



Describe Circumstances of the Accident

PLEASE REFER POLICE REPORT NO. T/20220714/2073

**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 19/07/22 1225

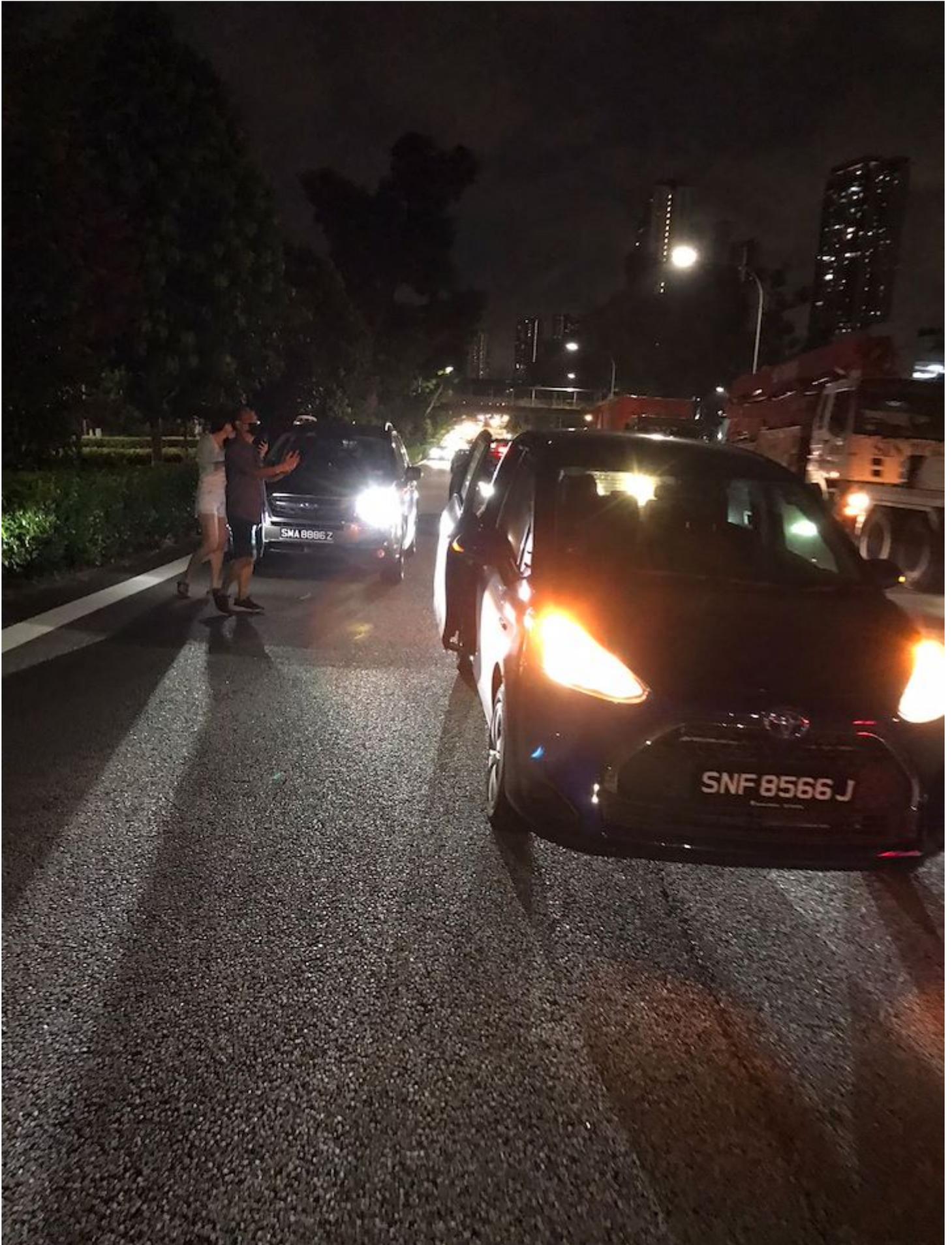
  
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Witnessed by Reporting Centre  
Personnel Amin

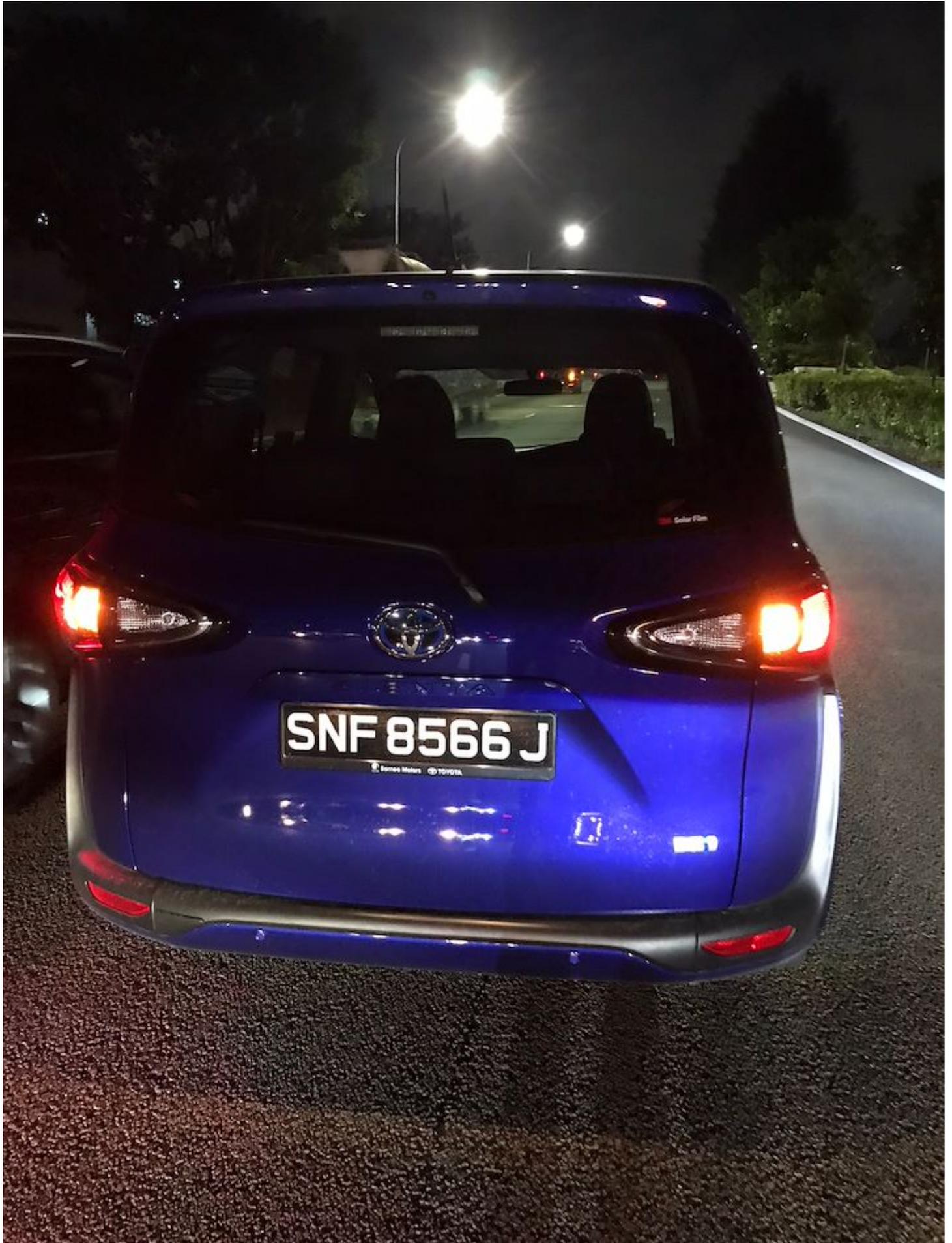


















**SINGAPORE  
POLICE FORCE**



T/20220714/2073

Police Station Of Origin:  
Bukit Panjang N.P.C  
1 Segar Road #01-05 SINGAPORE 677738  
Tel No: 1800-8929999

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Report No. T/20220714/2073

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 14/07/2022 18:49	Vide Report No.:	Station Diary No.: 65
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**Informant's Particulars**

Name of Informant: TAN KAY CHUNG		Address: APT BLK 240 BUKIT PANJANG RING ROAD #11-129 SINGAPORE 670240	
ID Type / ID No.: NRIC NO / S1830761H		Contact No.:	Mobile: 97370525
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 54	Date of Birth: 01/10/1967	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: GRAB DRIVER		Driving Licence Information: Class: 2B,3      Date of Expiry:	

**General Information of the Accident**

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 13/07/2022 21:10	Type of Location: Flyover
Location: AYER RAJAH EXPRESSWAY				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 80 Km/h	
Traffic Flow:		Traffic Control: Not Controlled	Traffic Volume: Light	
Type of Collision:				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SMA8886Z	Car				Slightly Damaged	0
SNF8566J	Car	TOYOTA	SIENTA HYBRID STANDARD (AUTO)	Blue	Slightly Damaged	1

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**SINGAPORE  
POLICE FORCE**



T/20220714/2073

Police Station Of Origin:  
Bukit Panjang N.P.C  
1 Segar Road #01-05 SINGAPORE 677738  
Tel No: 1800-8929999

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Report No. T/20220714/2073

## CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Name	YONG SHI WEI, OLIVIA	ID No.	NIL
Related Vehicle	SMA8886Z (Car)	Contact No.	97453857
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	TAN KAY CHUNG	ID No.	S1830761H
Related Vehicle	SNF8566J (Car)	Contact No.	97370525
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 13/07/2022 at about 9.10pm, I was driving along AYE towards Tuas after Jurong Town Hall exit. I was driving on the 2nd lane. Subsequently a container truck from the 3rd lane and wanted to overtake the vehicle in front of him. Suddenly he turn on the signal light and proceeded to overtake without checking the blindspot.

I then collided on the rear however the said truck did not stop. I manage to press the emergency brake however still collided on the trucks rear side. The vehicle behind me (SMA8886Z) collided with my vehicle after I emergency brake and the vehicle couldn't stop on time.

My vehicle suffered scratches and dents on the a right rear side (Wheel side). We then exchanged particulars and left the scene afterwards. No police and ambulance were called. No government property was damaged.

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**SINGAPORE  
POLICE FORCE**



T/20220714/2073

Police Station Of Origin:  
Bukit Panjang N.P.C  
1 Segar Road #01-05 SINGAPORE 677738  
Tel No: 1800-8929999

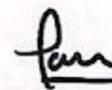
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Report No. T/20220714/2073

**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 / SGT 1 MUHAMMAD YUSRI BIN YUSOFF 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 14/07/2022 18:49
Officer In Charge Of Case: TP / HRT / SR STAFF SGT NEO ZHI YUAN Contact No.: 65476079	Classification Of Case:

NP168

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