

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 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 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 06/09/2022 15:28 (SGT)
Reported by Both
Date of Accident 05/09/2022 18:10 (SGT)
Exact Location of Accident Punggol Dr., Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMR355C

INSURED/POLICYHOLDER

Is company? No
Name Of Registered Owner HO CHOR HAN (HE CHULTAN)
NRIC No SXXXX012B
Email Address desmond.hch@gmail.com
Mobile Phone No (Phone) +65-98627135
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Honda
Model Fit
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 1495

INSURANCE COMPANY

Name of Insurance Company AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number 7210081736-01

DRIVER

Name of Driver HO CHOR HAN (HE CHULTAN)
NRIC No SXXXX012B
Date Of Birth 10/07/1981
Occupation Outdoor

Date Of Driving Pass	23/05/2007
Driving experience	15 YEARS AND 4 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98627135
Alt. Phone Number	-
Email Address	desmond.hch@gmail.com
Address	98 EDGEDALE PLAINS #14-40
Address complement	-
Postcode	828689
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	Collision - Head to Rear
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?	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	Ang Mo Kio North Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004849999
Alt. Police Station Phone No	(Fax) +65-62181399
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

PLEASE REFER TO POLICE REPORT T/20220906/2037

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	GBD9000X
Vehicle Manufacturer	Nissan
Vehicle Model	Nv200
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	LEE PENG SOON
NRIC No	SXXXX446C
Contact Number	(Phone) +65-97707058
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	HO CHOR HAN (HE CHULTAN)
Gender	Male
Phone No	(Phone) +65-98627135
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SMR355C
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

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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.

[Signature]

Policyholder's Signature / Date & Time

Sketch Plan

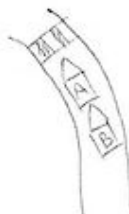
[Signature]

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

[Signature] 06/09/2022

Witnessed by Reporting Centre Personnel

Punggol Drive



A : SMR 255C

B : ABD900DX

Describe Circumstances of the Accident

Refer to Police Report NO. T/20220906/2037

Declaration

We declare the foregoing particulars are true in every respect.

[Signature]

Policyholder's Signature Date & Time

[Signature]

Driver's Signature / I deliver a non-re policyholder Date & Time

[Signature] 06/09/2022

Witnessed by Reporting Centre Personnel







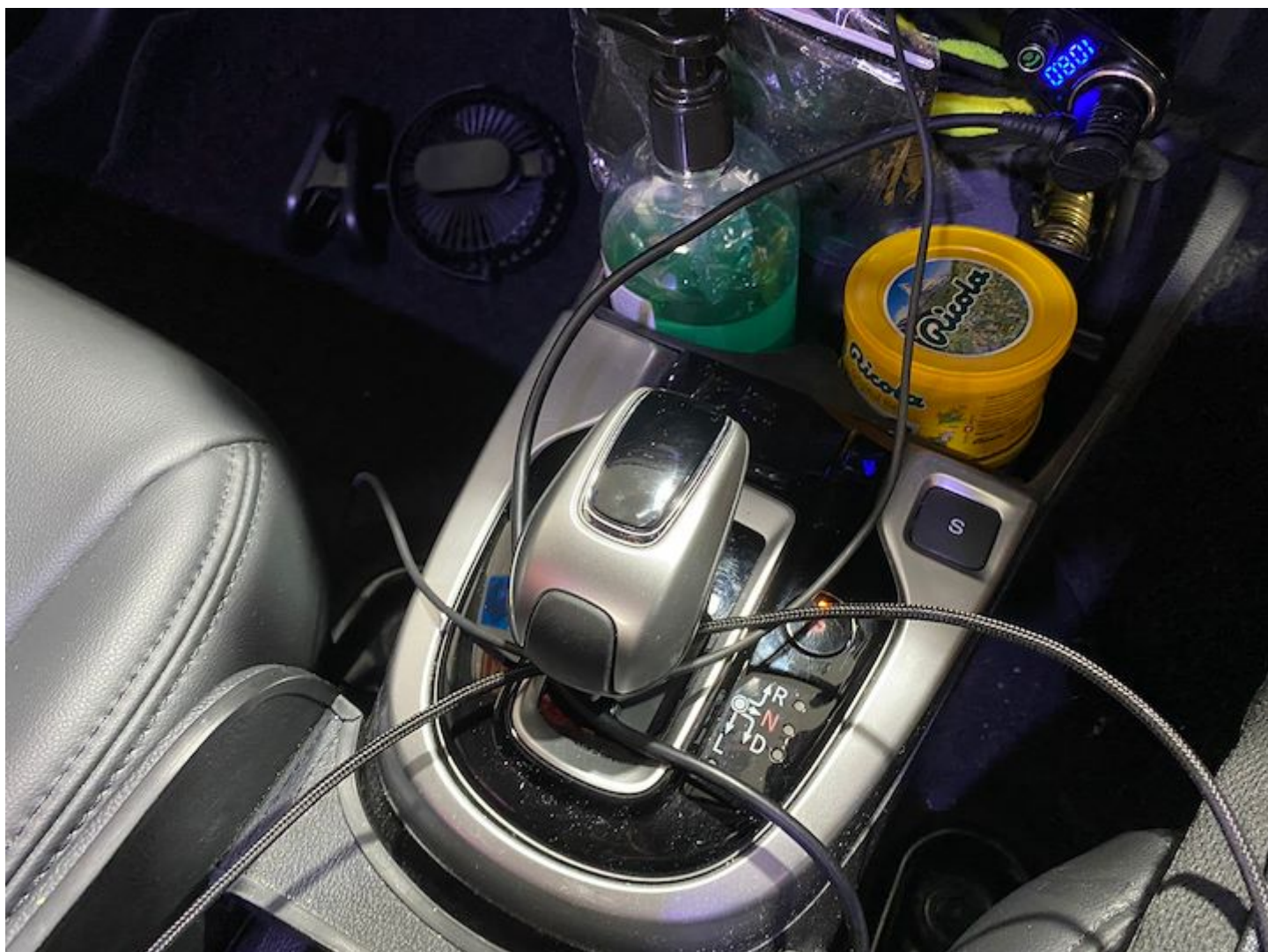















**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Ang Mo Kio North N.P.C
51 Ang Mo Kio Avenue 9 SINGAPORE
569784
Tel No: 1800-4849999



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Report No. T/20220906/2037

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 06/09/2022 12:59	Vide Report No.:	Station Diary No.: 40
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Informant's Particulars

Name of Informant: HO CHOR HAN	Address: 98 EDGE DALE PLAINS #14-40 SINGAPORE 828689		
ID Type / ID No.: NRIC NO / S8120012B	Contact No.: Home/Office: 98627135 Mobile:		
Nationality: SINGAPORE CITIZEN	Email:		
Sex: Male	Age: 41	Date of Birth: 10/07/1981	Type of Informant: Driver
Race: Chinese	Language:		Institution / School Name:
Occupation: PRIVATE HIRE DRIVER	Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 05/09/2022 18:10	Type of Location: Slip Road
Location: PUNGGOL DRIVE				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Pedestrian Crossing		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 Passenger
GBD9000X	Van	NISSAN	NV200 1.5 MT ABS AIRBAG 2WD 6DR E5 W/RC		Slightly Damaged	1
SMR355C	Car	HONDA	FIT HYBRID 1.5 AUTO	White	Slightly Damaged	1

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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Report No. T/20220906/2037

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMR355C	AIG ASIA PACIFIC INSURANCE PTE. LTD.	7210081736-01	06/08/2022	15/06/2023

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	LEE PENG SOON		ID No.	S0053446C
Related Vehicle	GBD9000X (Van)		Contact No.	97707058
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	HO CHOR HAN		ID No.	S8120012B
Related Vehicle	SMR355C (Car)		Contact No.	98627135
Hospital/Clinic	CENTRAL 24HR CLINIC (HOUGANG)		Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	05/09/2022		Date Discharge	05/09/2022
No. of Days granted Medical Leave	03		Degree of Injury	Serious

Brief Details.

On 05/09/2022 at about 1810hrs, I'm the driver bearing vehicle number SMR355C. I was driving along on the right lane of Punggol Dr as I was on my way home. I checked the left lane and it was clear so I signaled to the left and change lane. When I was reaching the slip road, I saw a bicycle approaching the zebra crossing. Hence, I slow down using engine break and did not engage throttle. The speed should be around 20-30km/h. When bicycle start to turn right toward zebra crossing, I start to brake and stop my vehicle.

Subsequently, the driver bearing NRIC Lee Peng Soon, S0053446C, bearing vehicle number GBD9000X, didn't managed to react on time and hit my rear vehicle. No ambulance was called to the scene. We exchanged particulars after the incident happened. I also went Central 24hr Clinic (Hougang) to get myself checked and I received 3 days of MC from 05/09/2022 to 07/09/2022.

I'm lodging this report for traffic police's actions and insurance purposes.



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Report No. T/20220906/2037

CONTINUATION OF REPORT



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Report No. T/20220906/2037

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:
F /

SC AKMAL HAKIM BIN HAIRI

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
06/09/2022 12:59

Officer In Charge Of Case:
TP / AEIT /
SR STAFF SGT FAHKRUL RAZI BIN SUHAIME
Contact No.: 65470000

Classification Of Case:

NP168