

# 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 ..... 09/09/2022 08:41 (SGT)  
Reported by ..... Driver  
Date of Accident ..... 07/09/2022 15:45 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... PANDAN VALLEY  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SLS2823L

### INSURED/POLICYHOLDER

Is company? ..... No  
Name Of Registered Owner ..... TAN CHIANG HOONG (CHEN ZHANGXUN)  
NRIC No ..... S6926651G  
Email Address ..... Clarencetanlk@gmail.com  
Mobile Phone No ..... (Phone) +65-91150486  
Alternative Phone No ..... -

### VEHICLE PARTICULARS

Manufacturer ..... Mazda  
Model ..... 3  
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 ..... 1500

### INSURANCE COMPANY

Name of Insurance Company ..... Income Insurance Limited  
Policy Number / Cover Note Number ..... 5122377945

### DRIVER

Name of Driver ..... TAN LI KIAT CLARENCE  
NRIC No ..... S9805225I  
Date Of Birth ..... 16/02/1998  
Occupation ..... Indoor

Date Of Driving Pass .....	22/03/2019
Driving experience .....	3 YEARS AND 6 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-91150486
Alt. Phone Number .....	-
Email Address .....	Clarencetank@gmail.com
Address .....	BLK 18A #13-272 CIRCUIT ROAD
Address complement .....	-
Postcode .....	371018
Is the driver the policyholder? .....	No
If No, Relationship of the Driver with the Insured .....	Child
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 - Major/Minor Rd
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 .....	Passenger
Gender .....	Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Bedok Division Headquarters
Police Station Phone No .....	(Phone) +65-18002440000
Alt. Police Station Phone No .....	(Fax) +65-64443009
Police Station Address .....	30 Bedok North Road Singapore 469676
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO SKETCH PLAN / POLICE REPORT

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	Yes
Reasons for not uploading a video of the accident .....	FILE SIZE TOO BIG TO BE UPLOADED

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	SHB6300P
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Taxi
Name of Driver .....	CHUA HOCK SIAH
NRIC No .....	S0119280I
Contact Number .....	(Phone) +65-96690298
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 .....	Passenger
Gender .....	Female

### INJURED PERSONS DETAILS

INJURED 1

Name of injured person .....	TAN LI KIAT CLARENCE
Gender .....	Male
Phone No .....	-
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	-
Injured person in which vehicle? .....	SLS2823L
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No

INJURED 2

Name of injured person .....	PASSENGER
Gender .....	Female
Phone No .....	-
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	-
Injured person in which vehicle? .....	SLS2823L
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No

INCOME MOTOR SERVICE CENTRE

Report Date & Start Time: 08/09/2022 / 12:40

Report No: MT/ \_\_\_\_\_

D.O.A: 07/09/2022  
Time: 15:45 hrs

Vehicle No: SLS2823L

Reporting Type: \_\_\_\_\_

**SKETCH PLAN**

**IMPORTANT NOTICE**

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**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

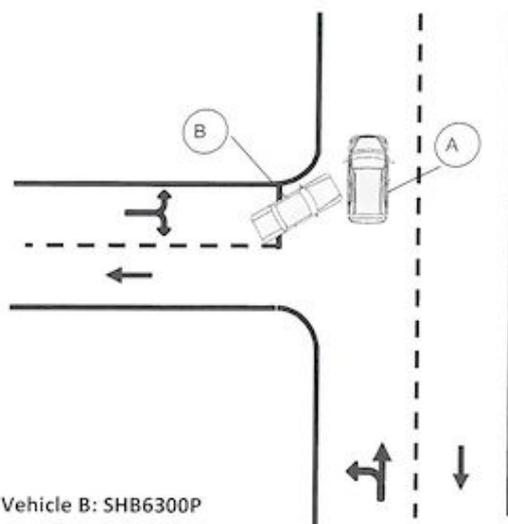
(c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third-party service providers or agents (including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

08/09/22 / 12:40  
Policyholder's Signature / Date & Time

08/09/22 / 12:40  
Driver's Signature (If driver is not the policyholder) / Date & Time

Tang Chun Kiet (S098825)  
Customer Care Executive  
Motor Service Centre  
Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)

**Sketch Plan**



Vehicle A: SLS2823L

Vehicle B: SHB6300P

**Describe Circumstances of the Accident**

Refer to Police Report

**Declaration**

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

08/09/22 / 12:40

Policyholder's Signature / Date & Time



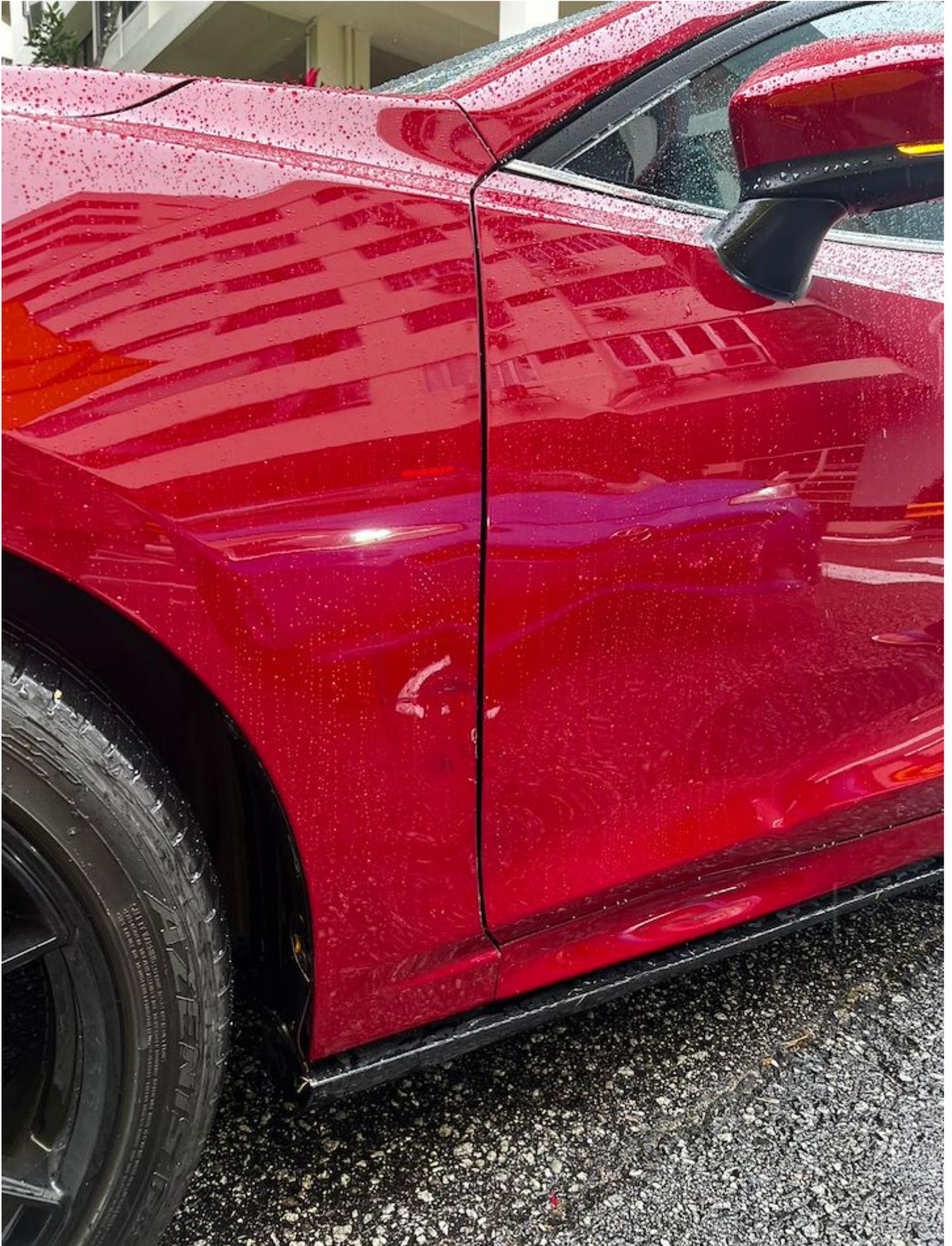
08/09/22 / 12:40

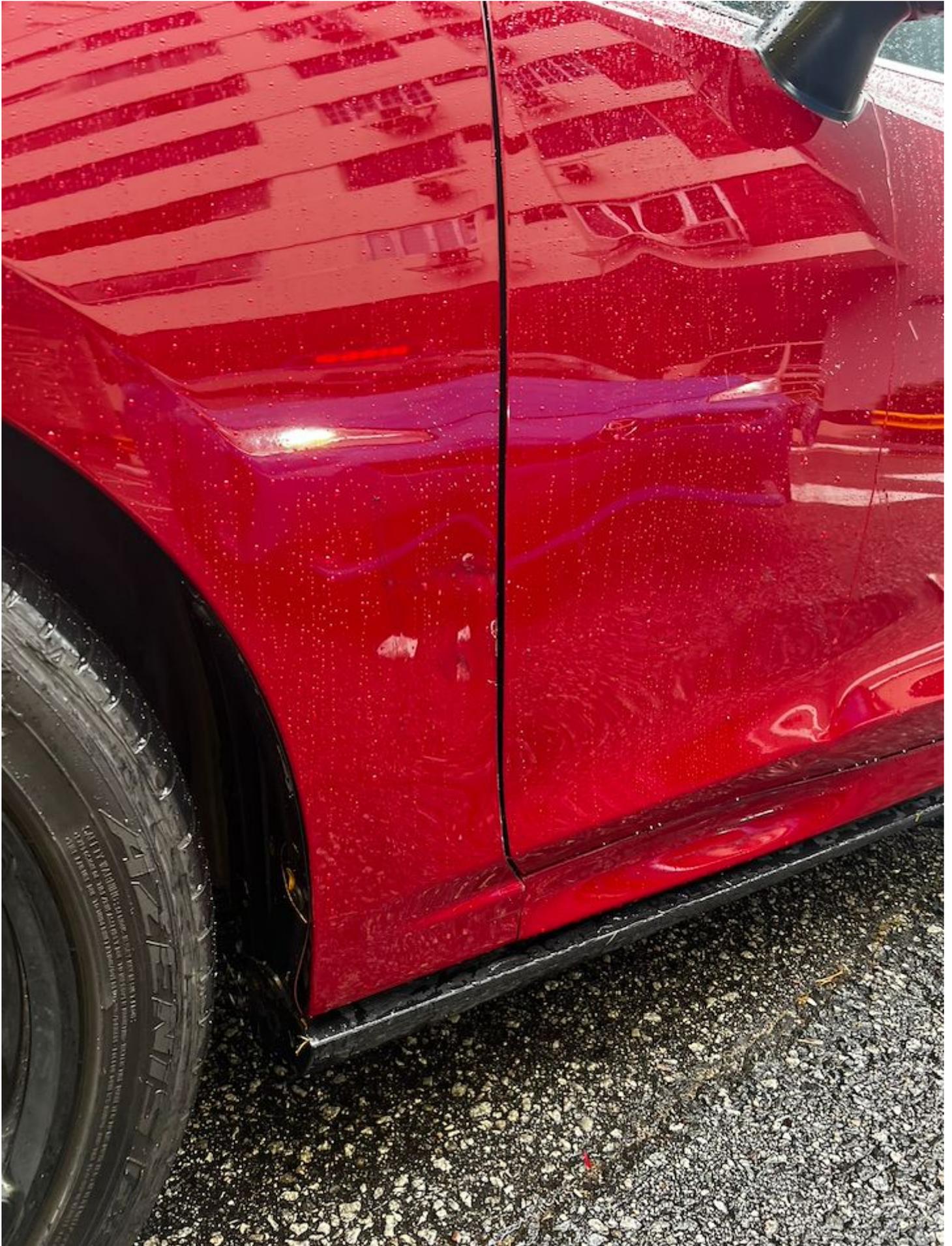
Driver's Signature (If driver is not the policyholder) / Date & Time

Tang Chun Kiet (S098825)  
Customer Care Executive  
Motor Service Centre



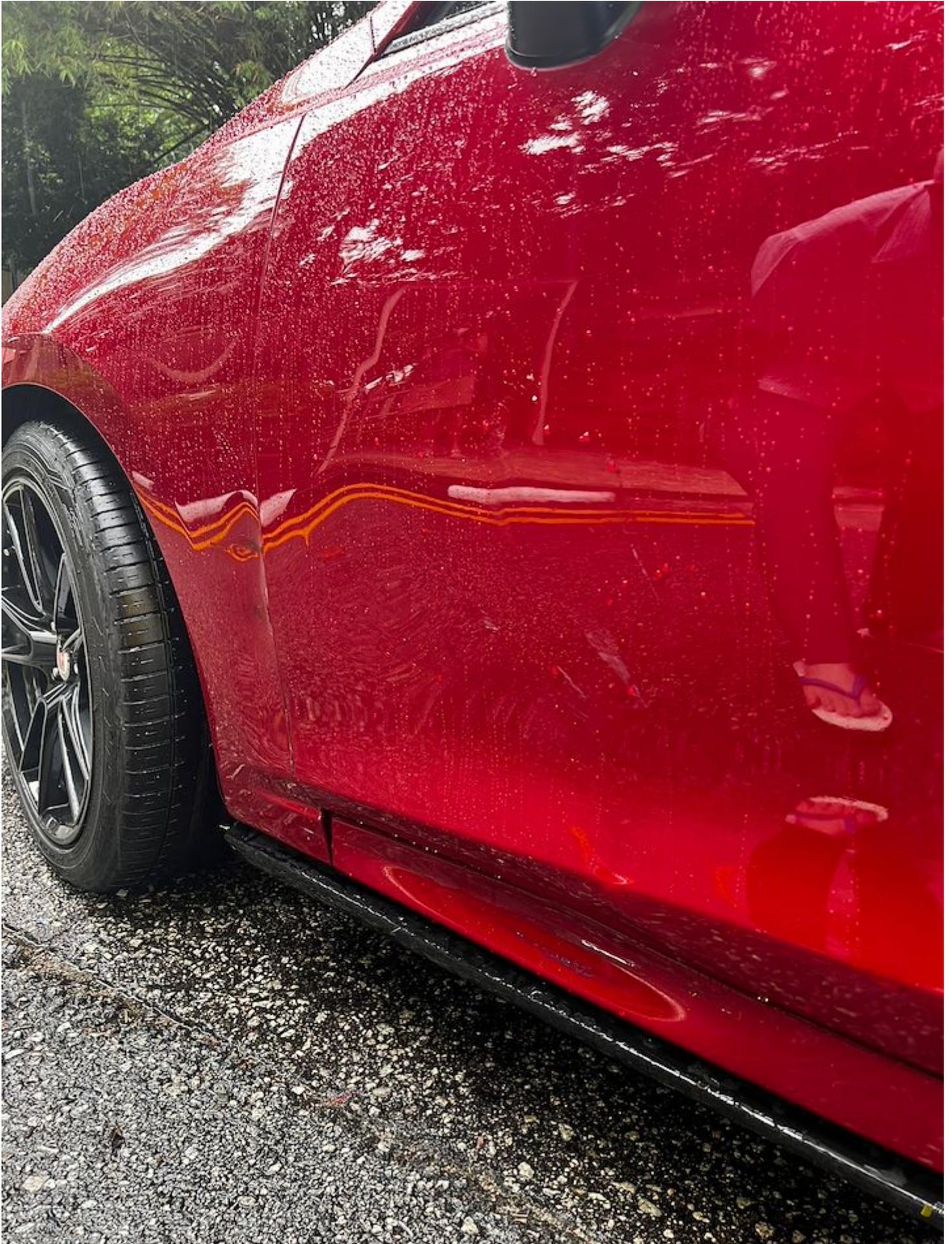
Witnessed by Reporting Centre Personnel  
(Name as in NRIC/ID card)

















**SINGAPORE  
POLICE FORCE**



G/20220908/7130

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20220908/7130

the repairs. Looking at the in car camera, the taxi driver did not adhere to the road marking even though there is a white stop line and zebra crossing at the juncture on the road that he is on. He was supposed to come to a stop and wait but he did not brake from the video evidence. I tried to honk and swerve out of the way but i did not manage to avoid the collision. The taxi got his number plate stuck in between my passenger door and front fender. We exchanged particulars, took pictures and left the scene. During the accident there was a passenger, Teh Zi-Chun that was on the passenger side. After the incident, she felt giddy and we both went to see a doctor as i had a deep cut and sore neck. This is just for record purposes as i was issued with a 3 day mc and the passenger a 2 day mc for the accident.

Subjects Involved			
Victim			
Person Name	TAN LI KIAT, CLARENCE		
ID Type	NRIC NO	ID No	S9805225I
Gender	Male	Age	24
Race	Chinese	Language	English
Occupation	Student	Address	18A CIRCUIT ROAD #13-272 SINGAPORE 371018
Mobile No	91150486	Is Informant A Victim?	Yes
Person Name	Teh Zi-Chun		
ID Type	NRIC NO	ID No	T0138948Z
Gender	Female	Age	21
Race	Chinese	Language	English

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: 08/09/2022 22:55
Officer In-Charge Of Case:	Classification Of Case:



**SINGAPORE  
POLICE FORCE**



G/20220908/7130

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20220908/7130

Occupation	Student	Address	132 Lorong L Telok Kurau #02-11 Pinehurst SINGAPORE 425569
Mobile No	91273883	Relation To Informant	Friend
Person Name	TAN LI KIAT, CLARENCE (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: 08/09/2022 22:55
Officer In-Charge Of Case:	Classification Of Case:

