

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	14/09/2022 12:51 (SGT)
Reported by	Both
Date of Accident	13/09/2022 18:30 (SGT)
Exact Location of Accident	Buangkok Green, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMD2502E
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	YEO CHUAN HOCK JOSEPH
NRIC No	SXXXX286E
Email Address	jyeoch@gmail.com
Mobile Phone No	(Phone) +65-97994275
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Mitsubishi
Model	Eclipse cross
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	1499

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	1800093882-03

DRIVER

Name of Driver	YEO CHUAN HOCK JOSEPH
NRIC No	SXXXX286E
Date Of Birth	23/02/1969
Occupation	Indoor

Date Of Driving Pass	23/06/1994
Driving experience	28 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97994275
Alt. Phone Number	-
Email Address	jyeoch@gmail.com
Address	BLK 290A COMPASVALE CRESCENT
Address complement	#04-08
Postcode	541290
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	4
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	Traffic Police
Police Station Phone No	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Address	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLS REFER TO THE ATTACHED STATEMENT.

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	SKG2537M
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SJY9280Z
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	GBH8653Y
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	YEO CHUAN HOCK JOSEPH
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT
Injured person in which vehicle?	SMD2502E
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 lawyer/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

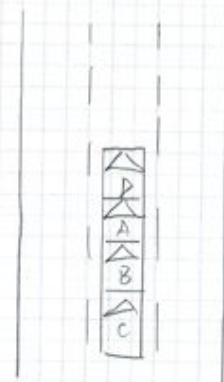

Policyholder's Signature / Date & Time

Sketch Plan


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

BUANGKOK GREEN

 14/09/12
Witnessed by Reporting Centre Personnel



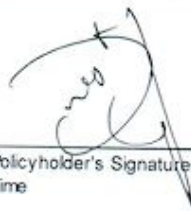
A - SMD 2502E
B - SKG 7537M
C - SJY 9280Z
D - GBH 8653Y


Describe Circumstances of the Accident


I was travelling on bangkok green, as the traffic is Jam, my vehicle was stationary waiting for the traffic to be cleared. Suddenly I felt an huge impact on the rear portion of my vehicle, and that impact thrust my vehicle forward, and make me collided to the vehicle in front of me at the point of accident.

Declaration

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

 14/09/12
Witnessed by Reporting Centre Personnel



**SINGAPORE
POLICE FORCE**



T/20220914/7011

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

2 of 3

Report No. T/20220914/7011

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SMD2502E	Car	MITSUBISHI	ECLIPSE CROSS 1.5 CVT SUNROOF	Red		0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMD2502E	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1800093882-03	10/08/2022	09/08/2023

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	YEO CHUAN HOCK JOSEPH		ID No. S6906286E
Related Vehicle	SMD2502E (Car)		Contact No. 97994275
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Class: 3 Date of Expiry: NIL
Date	13/09/2022		Date 13/09/2022
No. of Days granted Medical Leave	03	Degree of	Slight

Brief Details.

I was travelling on Buangkok Green, as there is a heavy traffic jam at the T-junction, my vehicle (SMD2502E) was stationary waiting for the traffic to be cleared. Suddenly i felt huge impact from the rear portion of my vehicle (SMD2502E), and the impact thrush my vehicle forward and collide to vehicle (GBH8653Y). After assessing the situation, it was discover that vehicle(SJY9280Z) hit onto Vehicle (SKG2537M) and then impact into my rear portion of my vehicle. This is a chain collision involving 4 vehicle in total.

After the accident i went to consult a doctor and was given 3 day of mc.



























**SINGAPORE
POLICE FORCE**



T/20220914/7011

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

1 of 3

Report No. T/20220914/7011

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 14/09/2022 09:45		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: YEO CHUAN HOCK JOSEPH			Address: 290A COMPASSVALE CRESCENT #04-08 SINGAPORE 541290		
ID Type / ID No.: NRIC NO / S6906286E			Contact No.: Home/Office: Mobile: 97994275		
Nationality: SINGAPORE CITIZEN			Email: JYEOCH@GMAIL.COM		
Sex: Male	Age: 53	Date of Birth: 23/02/1969	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: PD			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: 13/09/2022 18:30	Type of Location: T-Junction
Location: BUANGKOK GREEN				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 60 Km/h
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
GBH8653Y	Van					0
SJY9280Z	Car					0
SKG2537M	Car					0



**SINGAPORE
POLICE FORCE**



T/20220914/7011

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

2 of 3

Report No. T/20220914/7011

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SMD2502E	Car	MITSUBISHI	ECLIPSE CROSS 1.5 CVT SUNROOF	Red		0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMD2502E	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1800093882-03	10/08/2022	09/08/2023

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	YEO CHUAN HOCK JOSEPH		ID No. S6906286E
Related Vehicle	SMD2502E (Car)		Contact No. 97994275
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Class: 3 Date of Expiry: NIL
Date	13/09/2022		Date 13/09/2022
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Brief Details.

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POLICE FORCE**

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Traffic Police
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Tel No: 65470000



T/20220914/7011

3 of 3

Report No. T/20220914/7011

CONTINUATION OF REPORTSketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPB /
MUHAMMAD NOOR BIN ABDUL RAHMAN
Contact No.: 65476219

NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
14/09/2022 09:45

Classification Of Case: