

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	04/10/2022 16:30 (SGT)
Reported by	Driver
Date of Accident	04/10/2022 10:05 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	AYE TOWARDS TUAS BEFORE PORTSDOWN
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SND6005K
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	ROSET LIMOUSINE SERVICES PTE LTD
Company Reg No	200406722Z
Email Address	KHIERTHII@ROSETLIMO.COM
Mobile Phone No	(Phone) +65-93278688
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Fit
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	1317

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5124295679-000149

DRIVER

Name of Driver	KIM ZHUO YIJIN
NRIC No	S7381663G
Date Of Birth	05/04/1973
Occupation	Outdoor

Date Of Driving Pass	13/05/2005
Driving experience	17 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-93278688
Alt. Phone Number	-
Email Address	KHIERTHII@ROSETLIMO.COM
Address	BLK 682D WOODLANDS DR 73 #08-227 S734682
Address complement	-
Postcode	-
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	Chain Collision
Weather Conditions	Raining
Road Surface	Wet

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)	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 - GRAB PASSENGER
Gender	Male

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

REFER POLICE REPORT ATTACHED

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	SHA6221P
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
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	SHB1778C
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	SJH5888L
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	KIM ZHUO YIJIN
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	REFER DETAILS IN POLICE REPORT
Injured person in which vehicle?	SND6005K

Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

Describe Circumstances of the Accident

Refer to police report

Declaration

We declare the foregoing particulars are true in every respect.



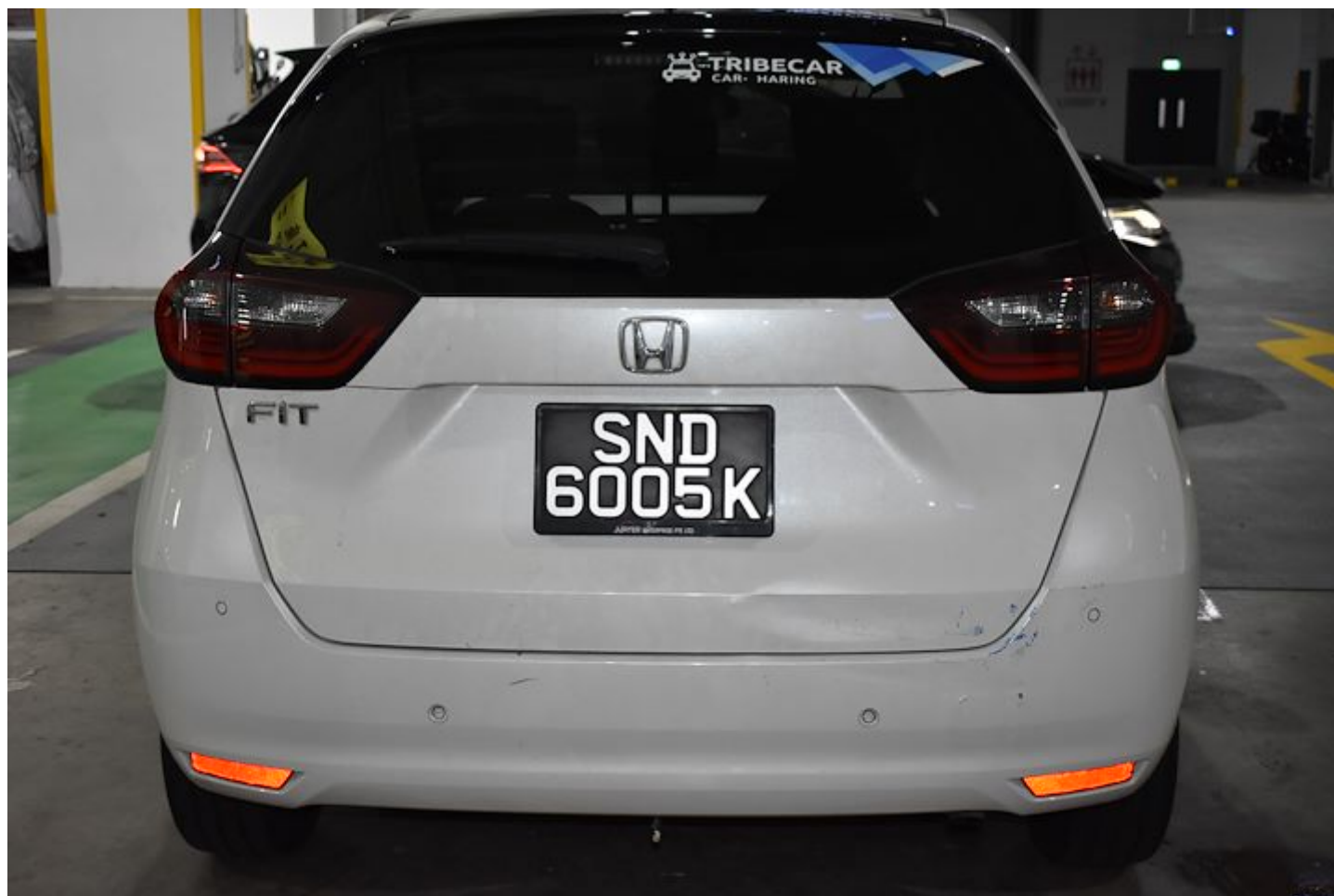
Policy holder's Signature / Date & Time

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

4/10/2022
1515



Witnessed by Reporting Centre Personnel



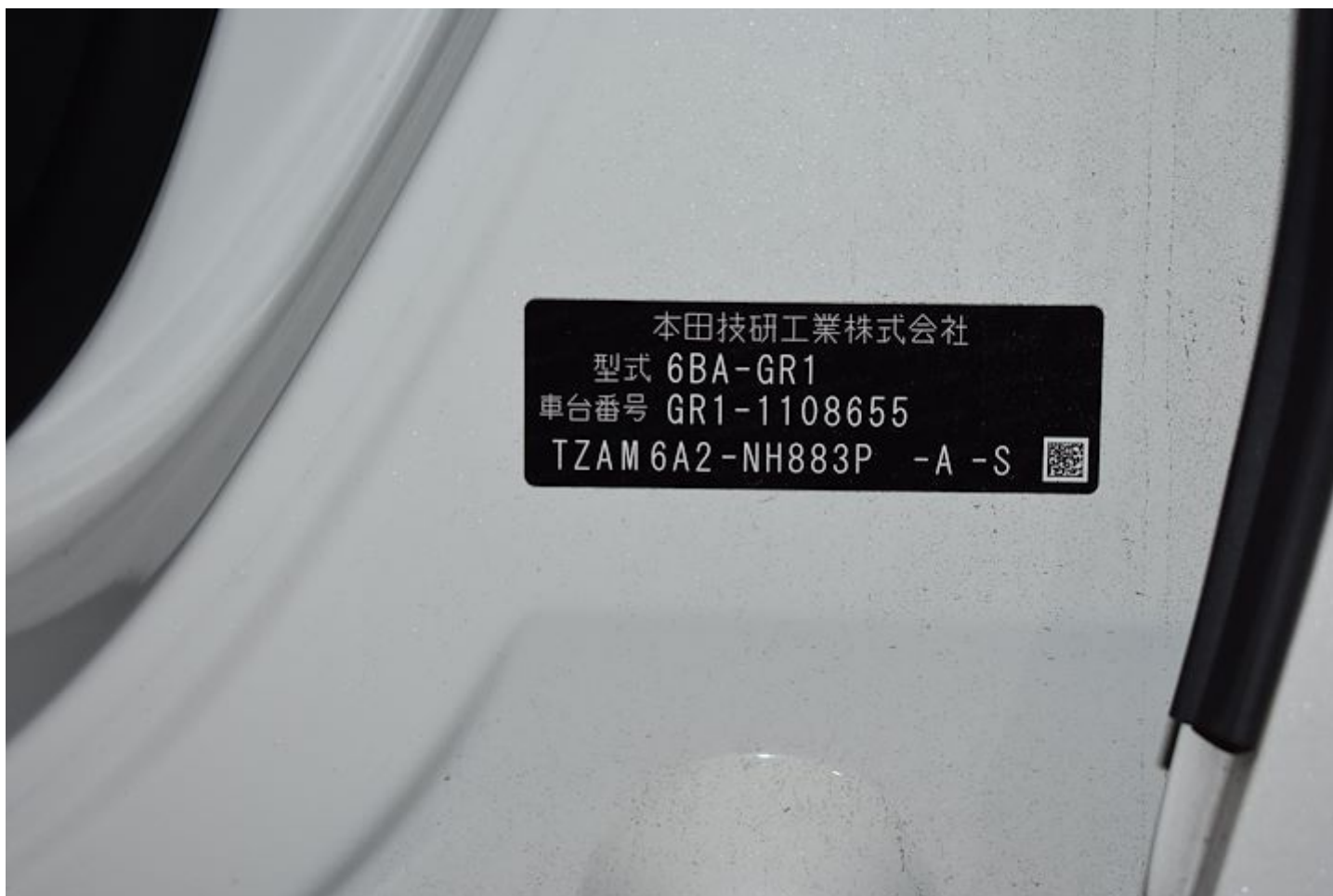










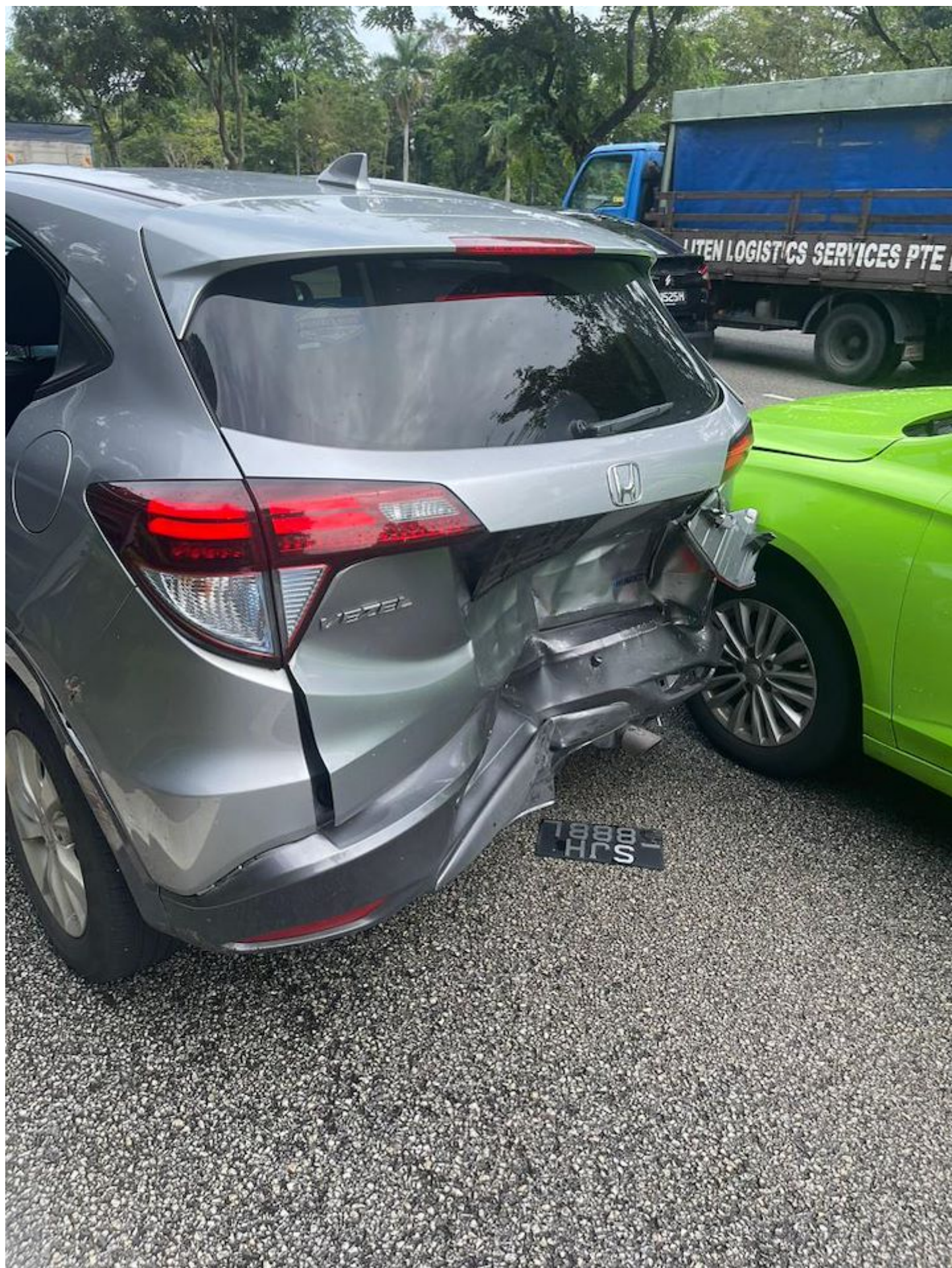












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SINGAPORE
POLICE FORCE

T/202210047028

1 of 3

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

Report No: T/202210047028

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/10/2022 13:02		Vide Report No.:	Station Diary No.:
Informant's Particulars			
Name of Informant: KIM ZHUO YUJIN		Address: 682D WOODLANDS DRIVE 73 #08-227 SINGAPORE 734682	
ID Type / ID No.: NRIC NO / S7381663G		Contact No.:	Mobile: 93278688
Nationality: SINGAPORE CITIZEN		Email: KIMZHUO73@GMAIL.COM	
Sex: Male	Age: 49	Date of Birth: 05/04/1973	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation:		Driving Licence Information: Class: 2B.3	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 04/10/2022 10:05	Type of Location: Straight Road
Location: WINCHESTER ROAD				
Weather: Cloudy		Road Surface: Wet	Road Speed Limit: 90 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
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
SHA6221P	Car				Seriously Damaged	0
SHB1778C	Car				Seriously Damaged	0

SINGAPORE
POLICE FORCE

T/202210047028

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

Report No: T/202210047028

CONTINUATION OF REPORT



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Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of
SHA6221P	Car				Seriously Damaged	0
SHB1778C	Car				Seriously Damaged	0


**SINGAPORE
POLICE FORCE**


T/20221004/7028

2 of 3

Report No. T/20221004/7028

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408665
Tel No: 65470000

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of
SJH5888L	Car				Seriously Damaged	0
SND6005K	Car				Slightly Damaged	1

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	KIM ZHUO YIJIN		ID No. S7381663G
Related Vehicle	SND6005K (Car)		Contact No. 93278688
Hospital/Clinic	ALEXANDRA HOSPITAL		Class of Driving Licence & Expiry Class: 2B,3 Date of Expiry: NIL
Date	04/10/2022		Date 04/10/2022
No. of Days granted Medical Leave	02		Degree of Slight

Brief Details.

I was travelling along AYE towards Tuas before Portsdown exit. The vehicle in front of me came to a stop. I followed.
Suddenly I felt a few impact from the rear of my vehicle. I got off and found out I was involved in a four vehicle chain collision accident.

I visited Alexandra Hospital after the accident and was given 2 days MC.
I feel pain in my neck and upper back.



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**SINGAPORE
POLICE FORCE**



T/20221004/7028

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Report No. T/20221004/7028

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

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 / TPIB /
TAN JEOK LENG
Contact No.: 65476151

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

Date/Time:
04/10/2022 13:02

Classification Of Case:

NP168

