

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 10/10/2022 12:29 (SGT)
Reported by Both
Date of Accident 07/10/2022 19:25 (SGT)
Exact Location of Accident Vanda Rd, Singapore
Additional Location Information TOWARDS DUNEARN ROAD
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SMZ295A

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner HUA YANG CREDIT PTE LTD
Company Reg No 1XXXXX112G
Email Address deantan30@gmail.com
Mobile Phone No (Phone) +65-81386364
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Honda
Model Jazz
Variant -
Exact purpose for which vehicle was being used at time of accident Employment
Are you claiming under your own insurance policy for repair to your vehicle? No - Claiming third party
Vehicle Category Private car
Transmission Auto
CC 1497

INSURANCE COMPANY

Name of Insurance Company MSIG Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number A 300290798 MTR

DRIVER

Name of Driver TAN YOU SHENG DEAN
NRIC No TXXXX576G
Date Of Birth 29/08/2000
Occupation Indoor

Date Of Driving Pass	24/10/2019
Driving experience	3 YEARS
Gender	Male
Mobile Number	(Phone) +65-81386364
Alt. Phone Number	-
Email Address	deantan30@gmail.com
Address	BLK 152 BUKIT BATOK STREET 11 #02-276
Address complement	-
Postcode	650152
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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	AFTER RAIN
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?	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	NG CHUN KIAT
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

PLEASE REFER TO POLICE REPORT T/20221008/7047

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	FBQ9636T
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Motorcycle
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)	-

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' law firms/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/net 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' law firms/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 law firms/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

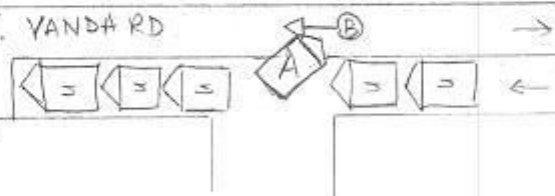
Witnessed by Reporting Centre Personnel

VEH(A) SMZ 295A

ETON-SCHOOLHOUSE

VEH(B) FBQ 9636T. VANDAR D

(U) Unknown Vehicle.



ESSO
DUNEARN

Describe Circumstances of the Accident

Refer to Police Report : 7/2022 1008 / 7097

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


Witnessed by Reporting Centre Personnel




















**SINGAPORE
POLICE FORCE**

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



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Report No. T/20221008/7047

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/10/2022 17:39		Vide Report No.: E/20221007/0132		Station Diary No.:	
Informant's Particulars					
Name of Informant: TAN YOU SHENG DEAN			Address: 152 BUKIT BATOK STREET 11 #02-276 SINGAPORE 650152		
ID Type / ID No.: NRIC NO / T0029576G			Contact No.: Home/Office: Mobile: 81386364		
Nationality: SINGAPORE CITIZEN			Email: deantan30@gmail.com		
Sex: Male	Age: 22	Date of Birth: 29/08/2000	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Sales			Driving Licence Information: Class:		Date of Expiry:

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 07/10/2022 19:25	Type of Location:
Location: DUNEARN ROAD				
Weather:		Road Surface:	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision:				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SMZ295A	Car					0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



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Report No. T/20221008/7047

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

CONTINUATION OF REPORT

Driver			
Name	TAN YOU SHENG DEAN		ID No. T0029576G
Related Vehicle	SMZ295A (Car)		Contact No. 81386364
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Class: NIL Date of Expiry: NIL
Date	NIL		Date NIL
No. of Days granted Medical Leave	NIL		Degree of NIL
Rider			
Name	AMIRUL		ID No. S9732440I
Related Vehicle	NIL		Contact No. NIL
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Class: NIL Date of Expiry: NIL
Date	NIL		Date NIL
No. of Days granted Medical Leave	NIL		Degree of Slight

Brief Details.

On the stated date and time, I was driving SMZ295A exiting Esso Dunearn Petrol Station via the exit towards Vanda Road.

There was a long queue of vehicles stationary along Vanda Road towards Dunearn Road due to the peak hour jam along Dunearn Road.

I was stationary at the hump at the exit waiting for the opportunity to turn right onto Vanda Road when a vehicle on my right came to a stop before the exit to give way to me.

As such, I slowly moved off and wanted to make a right turn onto Vanda Road towards Vanda Ave direction.

As I was slowly inching out, I also noticed that the lane of Vanda Road towards Dunearn Road was only wide enough for 1 vehicle to pass through, leaving absolutely no space even for a bike to squeeze through without travelling against the flow.

Nonetheless, I still moved very cautiously, executing my right turn onto Vanda Road towards Vanda Ave.

The front portion of my vehicle had passed the single continuous white line separating both directions of Vanda Road, when a motorbike FBQ9636T, which was travelling against the flow of traffic, suddenly appeared at high speed and collided into the front left portion of my vehicle.



**SINGAPORE
POLICE FORCE**

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



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CONTINUATION OF REPORT

The rider lost his balance and fell only after making contact with my vehicle.

I was in a state of shock as I would never have expected said rider to travel against the flow of traffic, furthermore, at fast speed. There was no way I could have reacted in time to avoid the collision.

Ambulance and traffic police arrived and the rider was conveyed by ambulance.



SINGAPORE POLICE FORCE

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



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Report No. T/20221008/7047

CONTINUATION OF REPORT

Sketch 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 / TP1B /
LEE GUANG HUI
Contact No.: 65476423

NP168

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

Date/Time:
08/10/2022 17:39

Classification Of Case:



IMPORTANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: SN10922 Vehicle Registration No: SNZ295A
 Name (as shown in NRIC): TAN YU SHENG DENI NRIC/FIN/Passport No: *XXXX576G
 (*Vehicle Driver/Policyholder) (*) Please delete as appropriate
 Address: _____ Singapore ()
 Contact (Tel): _____ Mobile No.: 8138 6364
 Email Address: _____
 Date of Accident: 07/10/2022 Time of Accident: 19:25
 Place of Accident: VENIDA ROAD TOWARDS DUNHORN ROAD
 Insurance Company: M816

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

INSURAD XIANG TO HUA YONG CREDIT PTE LTD

Policyholder / Actual Driver's Signature
Date:

gum 10/10/2022
 Reporting Centre Personnel's Signature
 Name (as in NRIC/ID card):
 Date:

SL002022