

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	31/10/2022 17:30 (SGT)
Reported by	Driver
Date of Accident	31/10/2022 11:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ALONG BEDOK SOUTH ROAD TOWARDS PIE BESIDE TEMASEK JUNIOR COLLEGE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC5721J
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	TRANS-CAB SERVICES PTE LTD
Company Reg No	2XXXXXX78K
Email Address	claims@transcab.com.sg
Mobile Phone No	(Phone) +65-62876666
Alternative Phone No	(Office) +65-62876666

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	PRIUS 5DR HATCHBACK (AUTO)
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Taxi
Transmission	Auto
CC	1798

INSURANCE COMPANY

Name of Insurance Company	AXA Insurance Pte Ltd
Policy Number / Cover Note Number	VFX/P2413997

DRIVER

Name of Driver	YAP CHIN GUAN
NRIC No	SXXXX332J
Date Of Birth	07/01/1966

Occupation
Date Of Driving Pass
Driving experience
Gender
Mobile Number
Alt. Phone Number
Email Address
Address
Address complement
Postcode
Is the driver the policyholder?
If No, Relationship of the Driver with the Insured
Does Driver Own Other Vehicles?
Vehicle Registration Number of Other Vehicle Owned by Driver
Insurance Company of Other Vehicle Owned by Driver

Outdoor
19/12/1983
38 YEARS AND 10 MONTHS
Male
(Phone) +65-98070374
-
Claims@transcab.com.sg
HDB Woodlands, 843 Woodlands Street 82
#06-83
730843
No
Hirer
No
-
-

GENERAL INFORMATION OF THE ACCIDENT

Type of Accident
Weather Conditions
Road Surface

Collision - Change/cross lane
Clear
Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?
Number of vehicles involved in the accident
Was anybody injured in the Accident?
Was any injured conveyed to hospital by ambulance?
Was any other vehicle or property damaged?
Number of Passengers (Including Driver)
Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance?
Translator's name
Translator's ID
Translator's phone number
Translator's email
Original language used in the statement

No
2
No
-
Yes
1
No
-
-
-
-
-

DETAILS OF POLICE ACTION

Was the accident reported to the police?
Police Station Name
Police Station Phone No
Alt. Police Station Phone No
Police Station Address
Was notice of intended Prosecution given?
If yes, against whom?

Yes
Woodlands West Neighbourhood Police Centre
(Phone) +65-18003639999
(Fax) +65-63640997
1 Woodlands St 12 Singapore 738622
No
-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT : T/20221101/2081 LODGED AT WPPDLANDS WEST NPC

ATTACHMENT(S)

Are accident photos available for attachment?
Was there any video captured by Car Camera?
Reasons for not uploading a video of the accident

Yes
Yes
WITH TRANSCAB

DETAILS OF OTHER VEHICLE PROPERTY 1

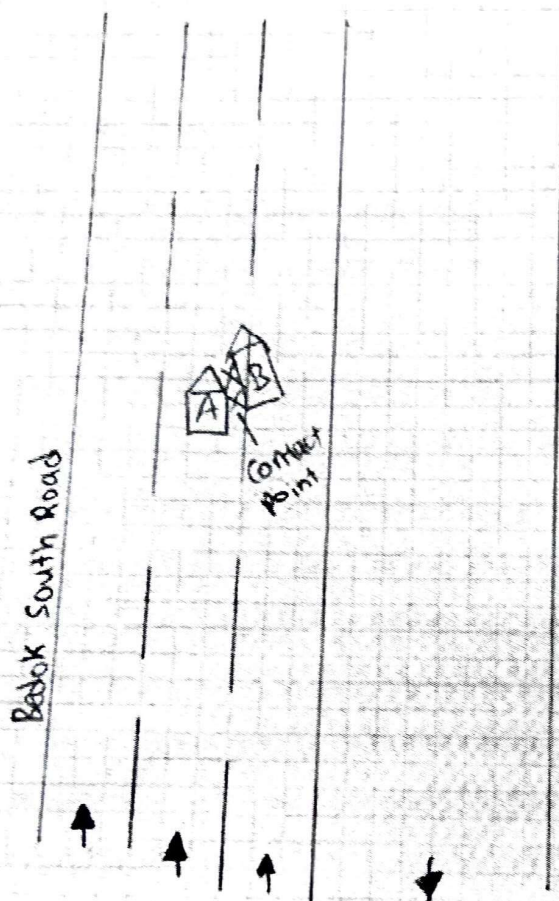
Vehicle Registration Number
Vehicle Manufacturer

SLS8950M
Toyota



ACCIDENT DIAGRAM

Ver. 30042021



veh A: SHCS 7213

veh B: SLS 8950M

VERIFIED BY AJAX MARS (ARC)
REPORTING OFFICER
ANG QI HAO, VICTOR

Policyholder's Signature
 Date & Time:

[Signature]
 Driver's Signature
 (If driver is not the policyholder)
 Date & Time:

Reporting Centre Personnel's Signature
 Name:
 NRIC/FIN No.:



**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Woodlands West N.P.C.
1 Woodlands Street 12 SINGAPORE 738622
Tel No: 1800-363 9999



T/20221101/2081

1 of 3

Report No: T/20221101/2081

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:
01/11/2022 17.42

Vide Report No.:
G/20221031/0100

Station Diary No.:
89

Informant's Particulars

Name of Informant:
KAP LAM QUAN

Address:
APT BLK 843 WOODLANDS STREET 82 #06-83 SINGAPORE
730843

Police ID No.:
SG NO / S-742332J

Contact No.:
Home/Office Mobile: 98070374

Nationality:
SINGAPORE CITIZEN

Email:

Sex: Male Age: 56 Date of Birth: 07/01/1966

Type of Informant:
Driver

Race:
Chinese

Language:
English

Institution / School Name:

Occupation:
Taxi driver

Driving Licence Information:
Class:

Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 31/10/2022 11:30	Type of Location: Straight Road
-------------------	---------------	-----------------	---	---------------------------------

Location:

BEDOK SOUTH ROAD

Weather: Clear	Road Surface: Dry	Road Speed Limit: 60 Km/h
----------------	-------------------	---------------------------

Traffic Flow: One Way	Traffic Control: Not Controlled	Traffic Volume: Moderate
-----------------------	---------------------------------	--------------------------

Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction	Anyone conveyed by ambulance: No
--	----------------------------------

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passeng
SHC5721J	Taxi	TOYOTA	Prius	Red	Slightly Damaged	0
SLS8950M	Car	TOYOTA	Sienta	Blue	Slightly Damaged	3

Details of Person Involved

Any Pedestrian Involved: No

No. of Pedestrians Injured: NIL

Use of Pedestrian Crossing: NA



Police Station Of Origin:
Woodlands West N.P.C.
1 Woodlands Street 12 SINGAPORE 738622
Tel No. 1500-333 9999

CONTINUATION OF REPORT

Name	YAP CHIN GUAN	ID No.	S1742332J
Related Vehicle	SHC5721J (Taxi)	Contact No.	98070374
Hospital/Clinic	TEMASEK MEDICAL CENTRE	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	01/11/2022	Date Discharge	01/11/2022
No. of Days granted Medical Leave	02	Degree of Injury	Slight

Brief Details.

On the 31st Oct 2022, I was driving my taxi bearing vehicle number SHC 5721J (Red/Toyota Prius) on lane 2 of the 3 lane along 22 Bedok South just outside of Temasek Junior College when I noticed 01 Singapore Vehicle number SLS 8950M (Blue/Toyota Sienta) which was travelling on lane 1 started to drift onto my lane causing it to side swipe and hit onto my right side of the vehicle. I then stopped at the side of the road to make a check and discover there were some scratches and slight dent across the front side fender all the way to my driver seat door. I also noticed there were some slight dent on the other vehicle however before I could exchange the particulars, the other driver started to throw a punch on my right ear causing me to called for police(G/20221031/0100) however before the police arrive, the said driver fled the scene. I was issued with 2days of MC from Temasek Medical (0000104626).
I am lodging this report for the purpose of claiming insurance as per directed by my company "Transcab"