

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	04/11/2022 09:39 (SGT)
Reported by	Driver
Date of Accident	02/11/2022 09:20 (SGT)
Exact Location of Accident	Airport Rd, Singapore
Additional Location Information	TOWARDS KPE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBH1591M
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	PAN PACIFIC VAN & TRUCK LEASING PTE LTD
Company Reg No	2XXXXX635R
Email Address	ppemclaims@gmail.com
Mobile Phone No	(Phone) +65-89516706
Alternative Phone No	(Office) +65-62840827

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Hiace
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	Commercial vehicle
Transmission	Manual
CC	2982

INSURANCE COMPANY

Name of Insurance Company	India International Insurance Pte Ltd
Policy Number / Cover Note Number	D19MFL0005549_02

DRIVER

Name of Driver	MARK ANTHONY HOWE PANG LEON
NRIC No	SXXXX180G
Date Of Birth	14/03/1991
Occupation	Outdoor

Date Of Driving Pass	25/08/2019
Driving experience	3 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-89516706
Alt. Phone Number	-
Email Address	ppemclaims@gmail.com
Address	BLK 999B BUANGKOK CRESCENT #16-747
Address complement	-
Postcode	532999
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	Collision - Change/cross lane
Weather Conditions	Clear
Road Surface	Dry

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)	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

REFER TO POLICE REPORT NUMBER No. T/20221103/7061 & NoT./20221104/7058

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBJ1328Y
Vehicle Manufacturer	Toyota
Vehicle Model	Dyna
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)	4

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	MARK ANTHONY HOWE PANG LEON
Gender	Male
Phone No	(Phone) +65-89516706
Address	BLK 999B BUANGKOK CRESCENT #16-747
Address Complement	-
Post Code	532999
Approximate Age Years Old	31
Injuries Sustained	UNCOMFORTABLE DUE TO IMPACT. 5DAYS MC
Injured person in which vehicle?	GBH1591M
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	-

SKETCH PLAN**IMPORTANT NOTICE**

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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 lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

**FLASH ACCIDENT
REPORTING OFFICER**

FRO SUFIYAN

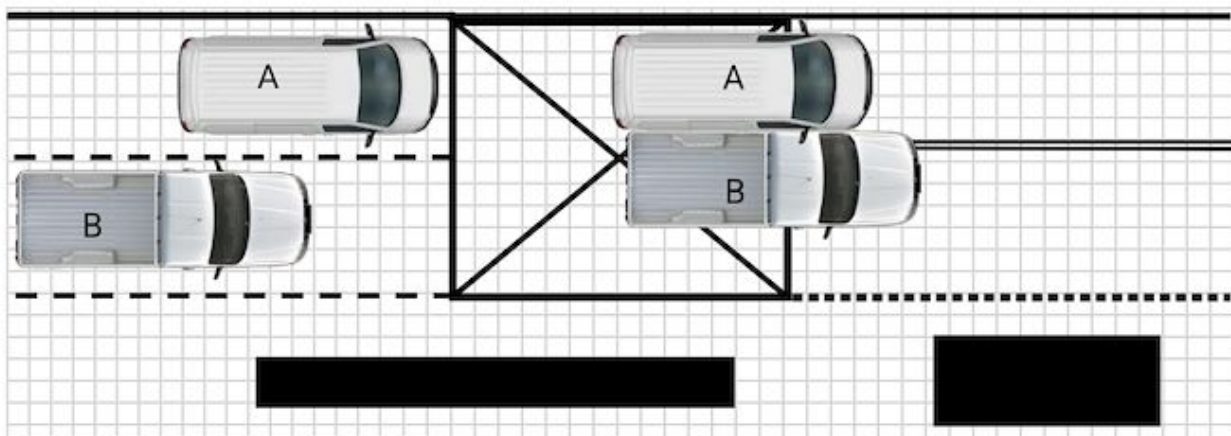


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

03/11/2022 2045HRS

Sketch Plan

Describe Circumstances of the Accident

REFER TO POLICE REPORT NUMBER T/20221103/7061

Declaration

I/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
03/11/2022 2045HRS

**FLASH ACCIDENT
REPORTING OFFICER**
FRO SUFIYAN



Witnessed by Reporting Centre
Personnel



**SINGAPORE
POLICE FORCE**



T/20221104/7058

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

1 of 3

Report No. T/20221104/7058

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/11/2022 21:05		Vide Report No.: T/20221103/7061		Station Diary No.:	
Informant's Particulars					
Name of Informant: MARK ANTHONY HOWE PANG LEON			Address: 999B BUANGKOK CRESCENT #16-747 SINGAPORE 532999		
ID Type / ID No.: NRIC NO / S9110180G			Contact No.: Home/Office: Mobile: 89516706		
Nationality: SINGAPORE CITIZEN			Email: leonhowe2810@gmail.com		
Sex: Male	Age: 31	Date of Birth: 14/03/1991	Type of Informant: Vehicle Owner		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Delivery driver			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 02/11/2022 09:20	Type of Location: Straight Road
Location: AIRPORT 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	Conditio	No of
GBH1591M	Van	TOYOTA	Hiace	White	Slightly Damaged	0
GBJ1328Y	Lorry	TOYOTA	Dyna	Silver	No Damage	3



**SINGAPORE
POLICE FORCE**



T/20221104/7058

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

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Report No. T/20221104/7058

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LING WEN BIN	ID No.	F18911355X
Related Vehicle	GBJ1328Y (Lorry)	Contact No.	83333785
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: 16/01/2027
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL
Vehicle Owner			
Name	MARK ANTHONY HOWE PANG LEON	ID No.	S9110180G
Related Vehicle	NIL	Contact No.	89516706
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

Brief Details.

ON 02/11/2022 AT ABOUT 0920HRS, I WAS DRIVING VEHICLE A (GBH1591M) ALONG AIRPORT ROAD TOWARDS KPE. I WAS DRIVING STRAIGHT ENTERING KPE, SUDDENLY VEHICLE B GBJ1328Y CUT INTO MY LANE DESPITE BEING DOUBLE WHITE LINE. I HAD TO JAM BRAKE. AND HE HAD SIDE SWIPE MY RIGHT SIDE MIRROR, AND FRONT RIGHT PORTION. VEHICLE B DRIVER DID NOT STOP HIS VEHICLE AND CONTIUNE DRIVING DESPITE ME HONKING HIM A LOT OF TIMES. AND GAVE A CHASE AS HE TRYING TO FLEE FROM THE SCENE. AFTER CHASING HIM UNTIL THE EXIST OF KPE, VEHICLE B DRIVER FINALLY STOPPED AND START ARGUING AND SHOUTING. AFTER MUCH COMMOTION, WE EXCHANGE PARTICULARS AND LEFT. AFTER THE ACCIDENT I FELT UNCOMFORT DUE TO THE IMPACT AND HAS SEEK MEDICAL TREATMENT. AND I WAS GIVEN 5 DAYS OF MC.



**SINGAPORE
POLICE FORCE**



T/20221104/7058

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

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Report No. T/20221104/7058

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 / TPB /
SUFIYAN BIN KHAIRI
Contact No.: 65476148

NP168

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

Date/Time:
04/11/2022 21:05

Classification Of Case: