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 witholding 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 02/12/2022 17:02 (SGT)
Reported by Both
Date of Accident 01/12/2022 09:55 (SGT)
Exact Location of Accident Jurong West Street 61, Singapore
Additional Location Information JURONG WEST STREET 61 TOWARDS 63 JUNCTION
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Toyota

Vehicle Registration Number SML9139H

Manufacturer

INSURED/POLICYHOLDER

Is company?

Name Of Registered Owner

NRIC No

Email Address

Mobile Phone No

Alternative Phone No

NO

TAN KAY LEONG (CHEN JIALIANG)

SXXXX457E

AHLEONG08@YAHOO.COM.SG

(Phone) +65-98898431

VEHICLE PARTICULARS

Model C-hr
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 Private hire

Transmission Auto
CC 1800

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited Policy Number / Cover Note Number 5125760979

DRIVER

Name of Driver

NRIC No

Date Of Birth

Occupation

TAN KAY LEONG (CHEN JIALIANG)

SXXXX457E

09/08/1979

Outdoor

Accident report SA1822C20004

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Date Of Driving Pass	19/10/1999
Driving experience	23 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98898431
Alt. Phone Number	•
Email Address	AHLEONG08@YAHOO.COM.SG
Address	703 JURONG WEST STREET 71
Address complement	04-106
Postcode	640703
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	Collision - Cross Junction
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 in the Accident? Was any injured conveyed to hospital by ambulance?	Yes
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	
	GRAB PASSENGER
Name	The state of the s
Gender	Male
DETAILS OF POLICE ACTION	
Was the assident reported to the police?	Yes
Was the accident reported to the police?	Traffic Police
Police Station Name	(Phone) +65-65470000
Alt. Police Station Phone No	(Fax) +65-65474900
Police Station Phone No	10 Ubi Avenue 3 Singapore 408865
Was notice of intended Prosecution given?	No
If yes, against whom?	-
CIRCUMSTANCES OF ACCIDENT	
PLEASE REFER TO SKETCH PLAN AND POLICE REPORT AT	TTACHED
PLEASE REFER TO SKETCH PLAN AND POLICE REPORT A	TIACHED.
ATTACHMENT(S)	
Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	No
DETAIL OF OTHE	P VEHICLE PROPERTY 1
DETAILS OF OTHE	R VEHICLE PROPERTY 1

Vehicle Registration Number	
Vehicle Manufacturer	SHA7256H
Vehicle Model	-
Vehicle Variant	
Vehicle Colour	-
Vehicle Category	-
Name of Driver	Taxi
Contact Number	•
Address	-
Address complement	
Postcode	-
Insurance Company Name	-
Nature Of Damage	
Details of property damaged in accident	
No. Of Passenger (Including Driver)	
(moduling Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	
Vehicle Manufacturer	FBB6655L
Vehicle Model	•
Vehicle Variant	•
Vehicle Colour	•
Vehicle Category	•
Name of Driver	Motorcycle
Contact Number	
Address	•
Address complement	
Postcode	•
Insurance Company Name	•
Nature Of Damage	•
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	•
(including Driver)	•

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	CI C0C7014
Vehicle Manufacturer	SLG8678M
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)	. . 6
110. Of Fasseriger (including Driver)	•

INJURED PERSONS DETAILS

INJURED 1

Name of injured person
Gender
Male
Phone No
Address
Address Complement
Post Code
Approximate Age Years Old
Injuries Sustained
Injured person in which vehicle?

TAN KAY LEONG (CHEN JIALIANG)
Male
Analy
Analy
ADAYS MC
SML9139H

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SKETCH PLAN

IMPORTANT NOTICE

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- 5. Any false reporting may be referred to the Traffic Police Department for investigation.
- 6. This report will be forwarded by the insurers to the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for erchiving and that copies of this report will for a fee to 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
- 8 Consent under the Personal Data Protection Act (PDPA)

l 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 another 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 vahida(s) involved in this accident (all insurer(s) who have insured vahida(s) involved in this accident shall be collectively referred to as the "Insurers"), the Insurers' towyers/law firms, the Monetary Authority of Singapore and any relevant povernment agency/authority (such as the police), for the purpose(s) of

(i) processing, fiendling and/or dealing with my claims including the sentement of the claims and any recessary investigations relating to the claims.

- (ii) investigating the account and/or my daims,
- (iii) carrying out and/or dualing with my instructions or responding to any enquiries by me;
- (iv) administrang 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 cackages), and/or
- (v) complying with applicable law in admiristering, 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 time, maybre permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes, and

(a) 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 sted outside of Singapore, for one or more of the above Purposes,

Palestydder's Synthese / Date & Time

Criver's Signature (I driver is not the policyholder) / Date & Titter

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Sketch Plan

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Accident report SA1822C20004