

# 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 .....	08/12/2022 15:03 (SGT)
Reported by .....	Both
Date of Accident .....	07/12/2022 09:40 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	PIE TWDS CHANGI B4 LOR 6 TOA PAYOH
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SMR7208Z
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### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	TAN CHIN TECK
NRIC No .....	SXXXX123C
Email Address .....	chintecht@gmail.com
Mobile Phone No .....	(Phone) +65-96712056
Alternative Phone No .....	-

### VEHICLE PARTICULARS

Manufacturer .....	Toyota
Model .....	Prius
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 .....	1798

### INSURANCE COMPANY

Name of Insurance Company .....	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number .....	DMHCSNW00001612200

### DRIVER

Name of Driver .....	TAN CHIN TECK
NRIC No .....	SXXXX123C
Date Of Birth .....	20/07/1959
Occupation .....	Outdoor

Date Of Driving Pass .....	28/02/1977
Driving experience .....	45 YEARS AND 10 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-96712056
Alt. Phone Number .....	-
Email Address .....	chinteckt@gmail.com
Address .....	BLK 427 BUKIT PANJANG RING RD
Address complement .....	#16-697
Postcode .....	670427
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 .....	Chain Collision
Weather Conditions .....	Clear
Road Surface .....	Dry

#### OTHER INFORMATION

Was any foreign vehicle involved in the accident? .....	No
Number of vehicles involved in the accident .....	3
Was anybody injured in the Accident? .....	Yes
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

Name .....	PASSENGER
Gender .....	Female

#### 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

PLS REFER TO THE POLICE REPORT:T/20221208/7012

#### 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 .....	SMY1714G
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 2

Vehicle Registration Number .....	SKT8656U
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 .....	TAN CHIN TECK
Gender .....	Male
Phone No .....	-
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	SERIOUS
Injured person in which vehicle? .....	SMR7208Z
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	Yes

**SKETCH PLAN****IMPORTANT NOTICE**

1. Please report **correctly** the details of the accident to speed up the claims process.
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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.

 Policyholder's Signature / Date & Time	 Driver's Signature (If driver is not the policyholder) / Date & Time	 Witnessed by Reporting Centre Personnel
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**Sketch Plan** PIE towards Changi before Lorong 6 Toa Payoh

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(A) SMR7208Z  
 (B) SMY17146  
 (C) SKTP6564

Refer to police report

T/20221208/7012

Note: Please note that your insurer may have 14 days time frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check your policy for more information.

We declare the foregoing particulars are true in every respect.

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

Witnessed by Reporting Centre Personnel





**SINGAPORE  
POLICE FORCE**



T/20221208/7012

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

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Report No. T/20221208/7012

## CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMR7208Z	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMHCSNW00001612200	20/01/2022	19/01/2023

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TAN CHIN TECK	ID No.	S1373123C
Related Vehicle	SMR7208Z (Car)	Contact No.	96712056
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	07/12/2022	Date	NIL
No. of Days granted Medical Leave	03	Degree of	Serious

## Brief Details.

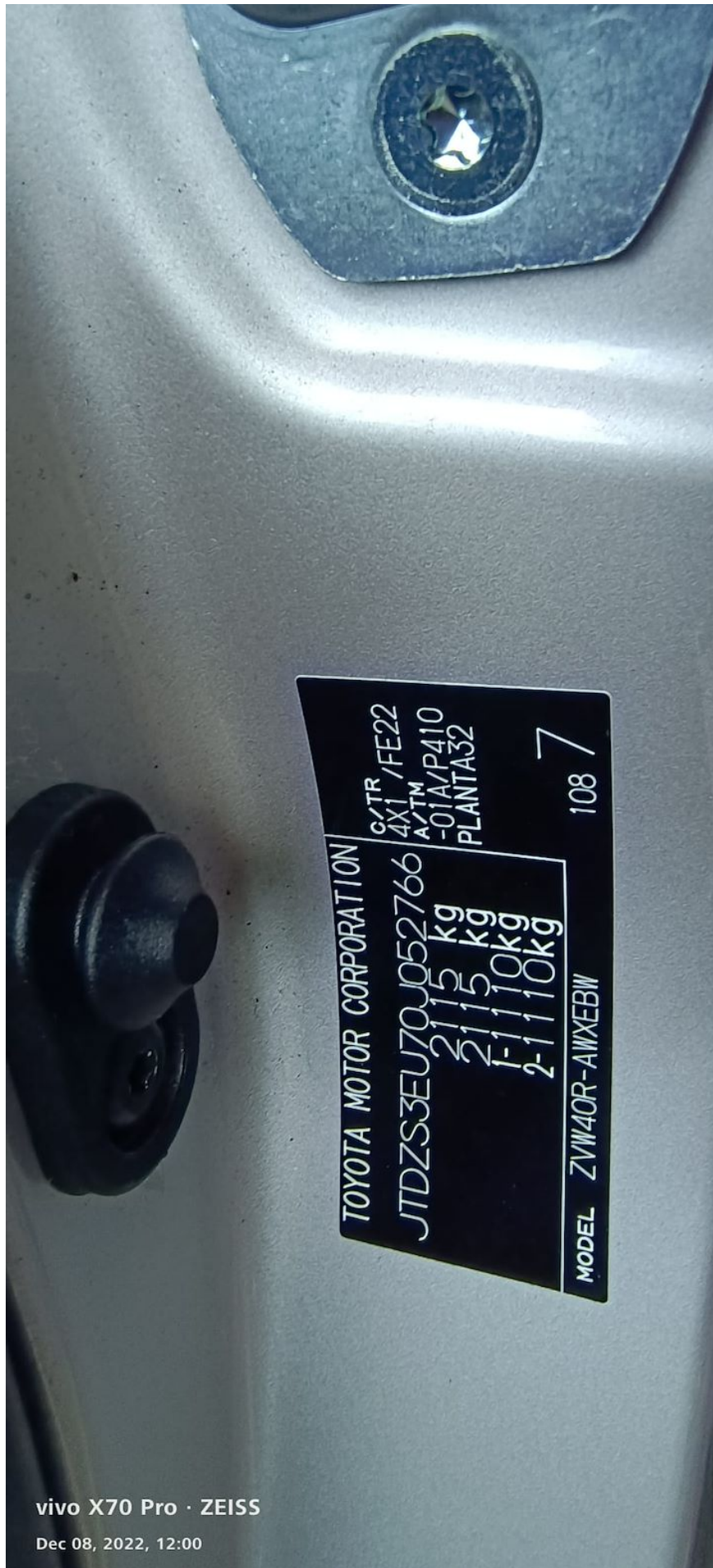
On 07/12/2022 at about 0940HRS at along PIE towards Changi before Lorong 6 Toa Payoh. I was travelling on the extreme right lane at the above mentioned road and when my front vehicle slow down and stop due to heavy traffic, hence I follow suit. Suddenly, I heard a loud bang from behind and the impact forced my vehicle to hit onto the front vehicle (C) in front of me. After I alighted, I realized that it was vehicle (B) who hit onto the rear portion of my vehicle (A) causing damages to my vehicle. It was a chain collision of total 3 vehicles involved. I have 1 passenger onboard my vehicle. After the accident, I was conveyed to the ambulance directly at the scene and was given 03 days MC for my injury.

VEHICLE A: SMR7208Z  
VEHICLE B: SMY1714G  
VEHICLE C: SKT8656U







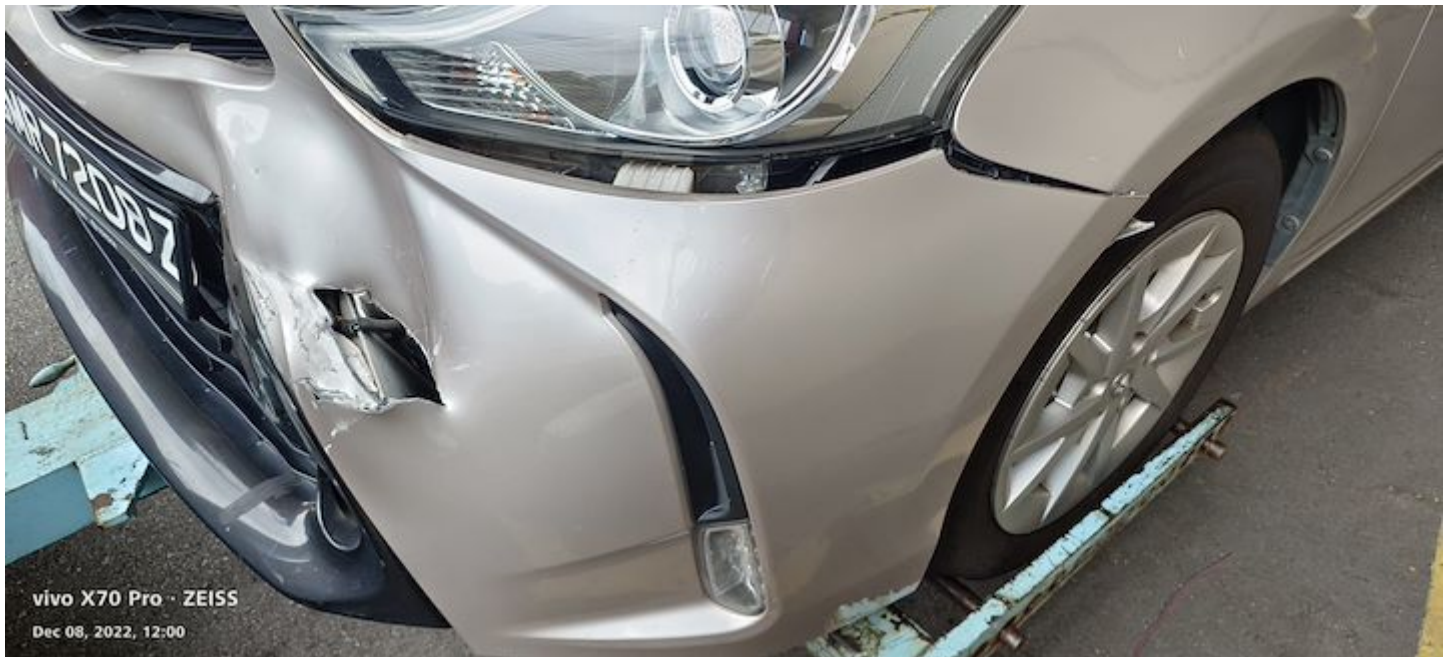
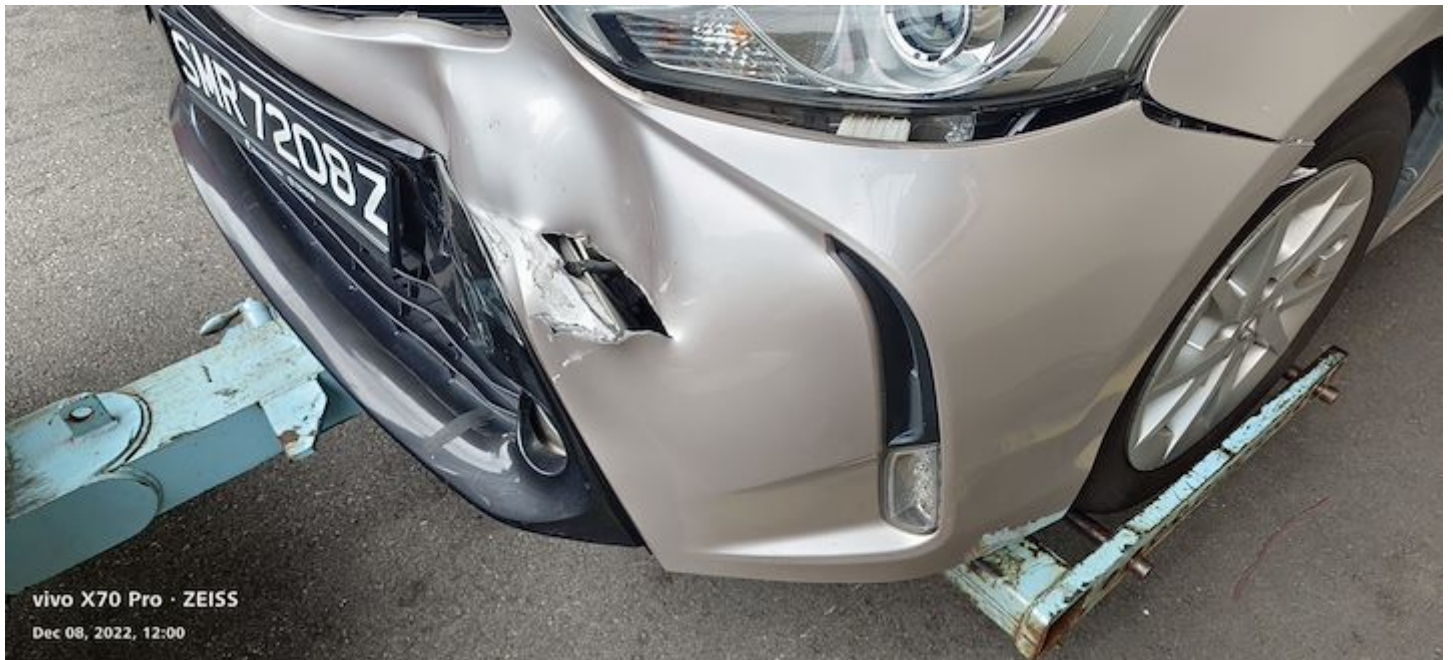


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Dec 08, 2022, 12:00

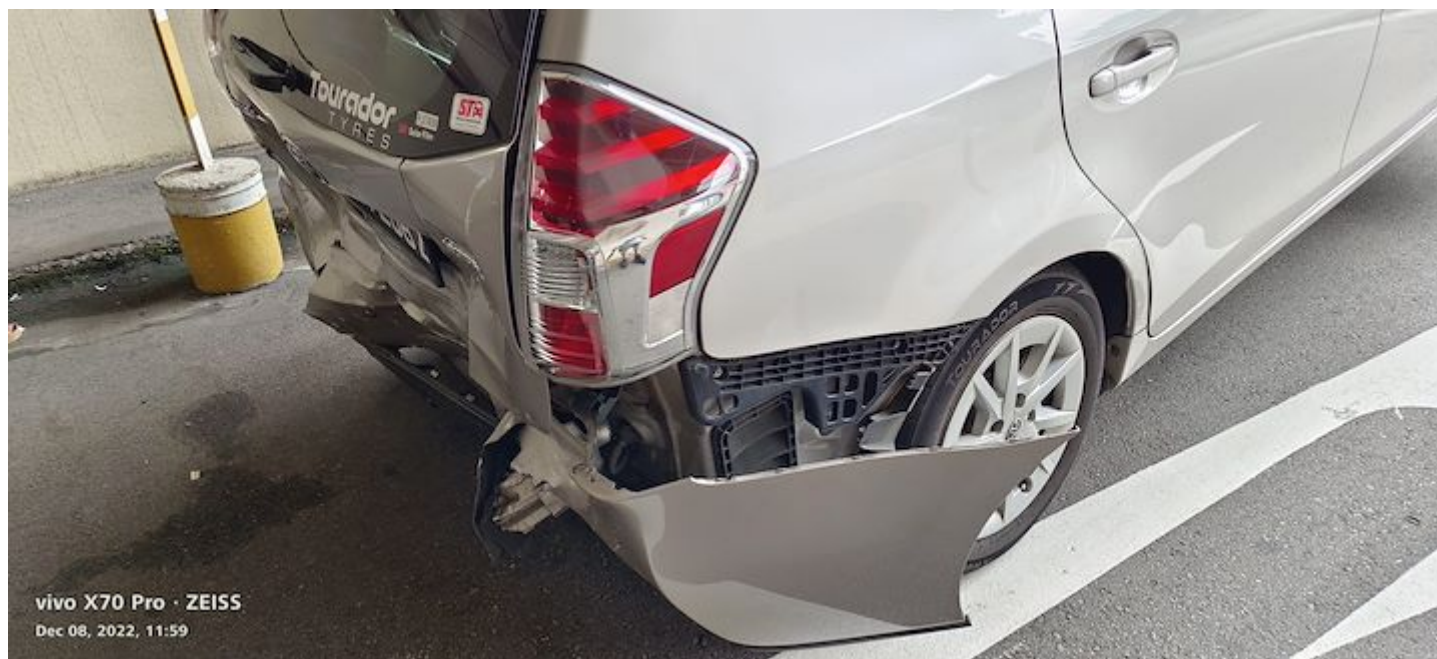


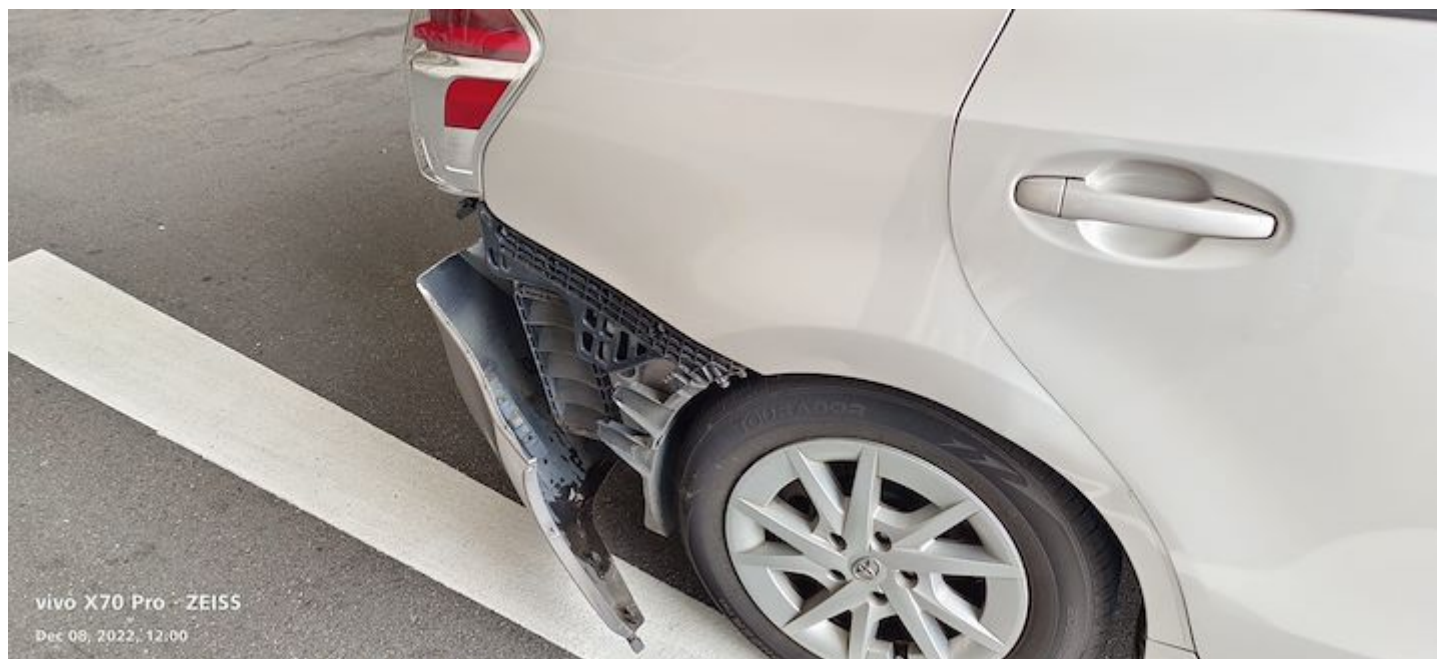




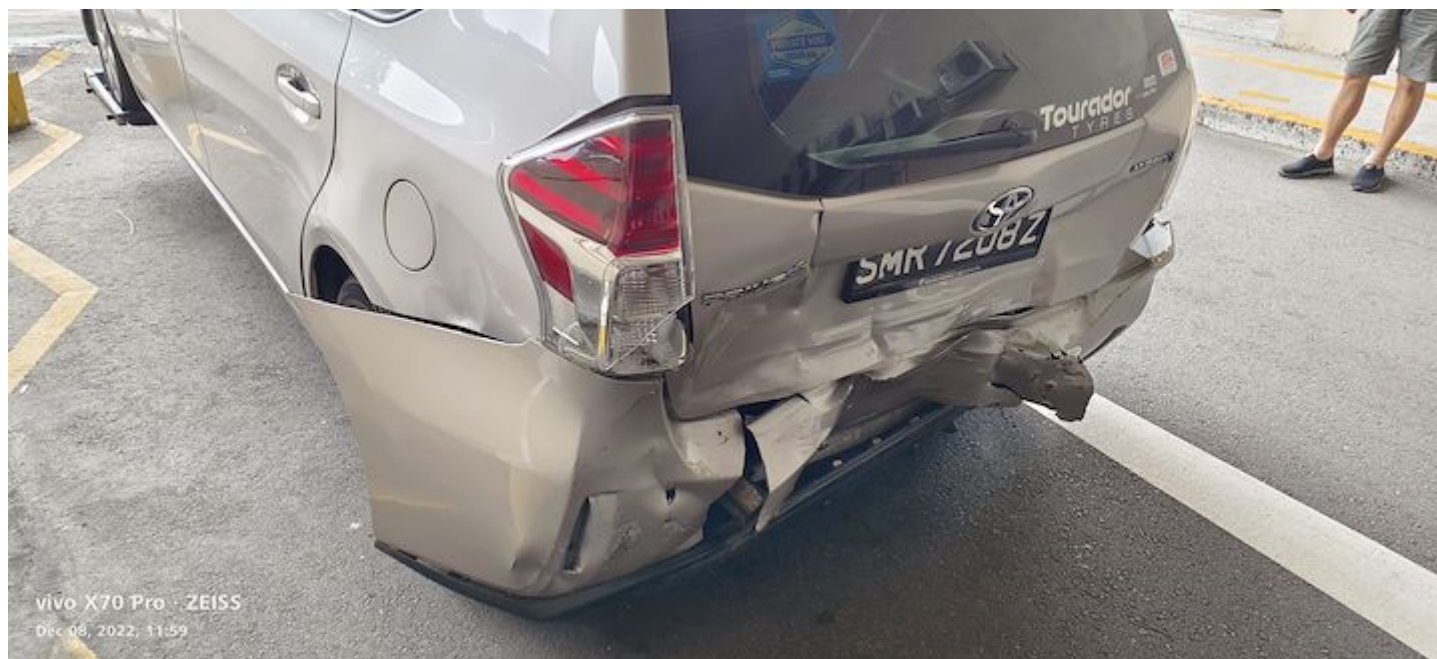






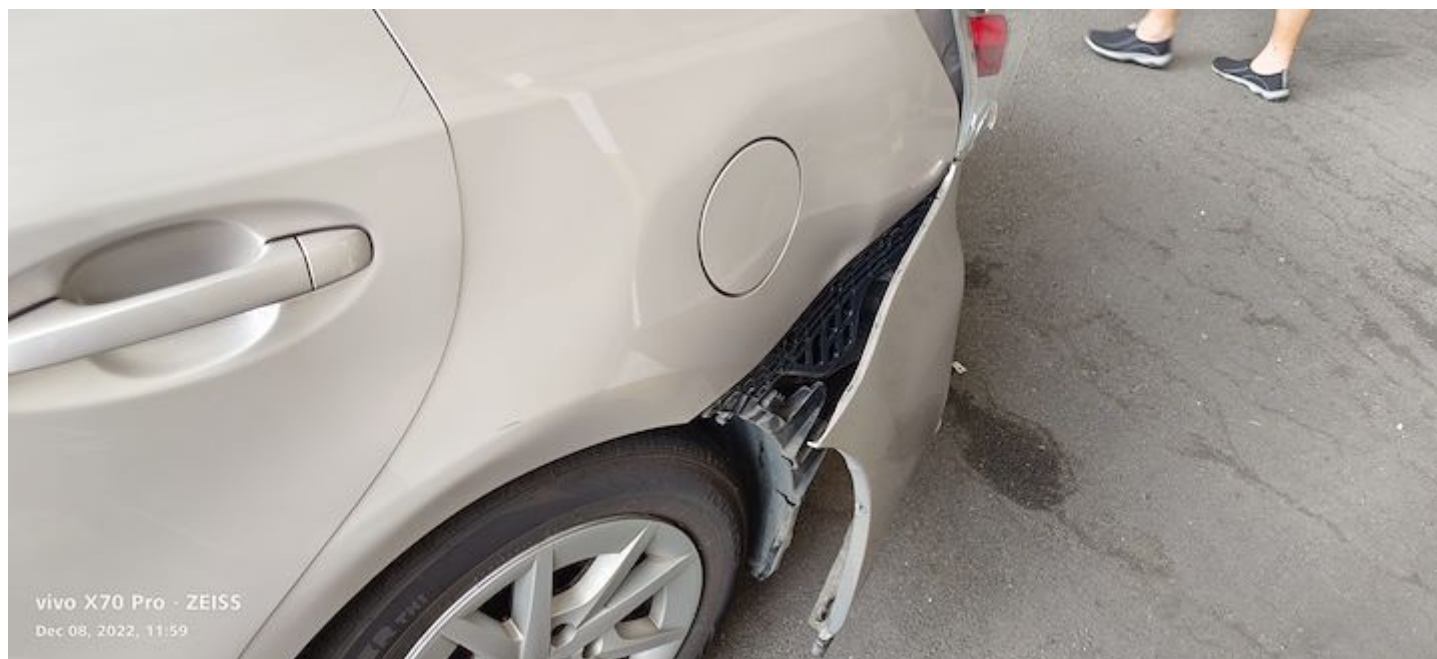
















**SINGAPORE  
POLICE FORCE**



T/20221208/7012

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

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Report No. T/20221208/7012

#### REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/12/2022 10:41	Vide Report No.:	Station Diary No.:
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#### Informant's Particulars

Name of Informant: TAN CHIN TECK			Address: 427 BUKIT PANJANG RING ROAD #16-697 SINGAPORE 670427		
ID Type / ID No.: NRIC NO / S1373123C			Contact No.: Home/Office: Mobile: 96712056		
Nationality: SINGAPORE CITIZEN			Email: chintecht@gmail.com		
Sex: Male	Age: 63	Date of Birth: 20/07/1959	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: PRIVATE HIRER			Driving Licence Information: Class: Date of Expiry:		

#### General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 07/12/2022 09:40	Type of Location: Straight Road
Location:  PIE TOWARDS CHANGI BEFORE LORONG 6 TOA PAYOH				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

#### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SKT8656U	Car					0
SMR7208Z	Car	TOYOTA	PRIUS PLUS	Silver		0
SMY1714G	Car					0





**SINGAPORE  
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T/20221208/7012

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Report No. T/20221208/7012

## CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMR7208Z	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMHCSNW000016 12200	20/01/2022	19/01/2023

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TAN CHIN TECK		ID No. S1373123C
Related Vehicle	SMR7208Z (Car)		Contact No. 96712056
Hospital/Clinic	TAN TOCK SENG HOSPITAL		Class of Driving Licence & Expiry Class: NIL Date of Expiry: NIL
Date	07/12/2022		Date NIL
No. of Days granted Medical Leave	03	Degree of	Serious

## Brief Details.

On 07/12/2022 at about 0940HRS at along PIE towards Changi before Lorong 6 Toa Payoh. I was travelling on the extreme right lane at the above mentioned road and when my front vehicle slow down and stop due to heavy traffic, hence I follow suit. Suddenly, I heard a loud bang from behind and the impact forced my vehicle to hit onto the front vehicle (C) in front of me. After I alighted, I realized that it was vehicle (B) who hit onto the rear portion of my vehicle (A) causing damages to my vehicle. It was a chain collision of total 3 vehicles involved. I have 1 passenger onboard my vehicle. After the accident, I was conveyed to the ambulance directly at the scene and was given 03 days MC for my injury.

VEHICLE A: SMR7208Z  
VEHICLE B: SMY1714G  
VEHICLE C: SKT8656U





**SINGAPORE  
POLICE FORCE**



T/20221208/7012

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

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Report No. T/20221208/7012

**CONTINUATION OF REPORT**Sketch Plan

Informant is not able to provide sketch

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 08/12/2022 10:41
Officer In Charge Of Case: TP / TPIB / SYED MUHAMMAD ISA BIN OMAR ALHABSHEE Contact No.: 65476187	Classification Of Case:

NP168



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