

VEHICLE NO: GBE7422U

MAKE & MODEL: NISSAN NV200

ACTS / MANUAL

DATE OF ACCIDENT	12 / 12 / 2022	*CC.
TIME OF ACCIDENT	15.05 AM / <u>PM</u>	
LOCATION OF ACCIDENT	Woodlands Road	
EXACT PURPOSE USED AT TIME OF ACCIDENT	<u>EMPLOYMENT</u> / PRIVATE USE / PRIVATE HIRE	
NAME OF OWNER	TJA TRADING	
EMAIL	thamjoe@gmail.com	Office MOBILE: 90667731
NRIC	52979675M	
CLAIM TYPE	<u>OD</u> / <u>THIRD PARTY</u> / REPORTING ONLY	
FLEET POLICY	YES / <u>NO</u> ?	
INSURANCE CO	NTUC	
TYPE OF COVERAGE	<u>Comprehensive</u> / Third Party / Third Party Fire & Theft	
POLICY NO	5098447641-04	
NAME OF DRIVER	AS ABOVE / IF NO. Tham Yiew choy	
NRIC	S1404206G	
DATE OF BIRTH	21 / 04 / 1960	
ANY PASSENGER	YES / <u>NO</u> :	
NAME OF PASSENGER		
GENDER OF PASSENGER	MALE / FEMALE	
OCCUPATION	<u>Outdoor</u> / Indoor	
DATE OF DRIVING PASS	04 / 12 / 1980	
GENDER	<u>Male</u> / Female	
CONTACT NO	Mobile: 90667731 Office: Home:	
EMAIL	thamjoe@gmail.com	
ADDRESS	Apt B1K 615 Woodlands Avenue 4 #01-515 (S)730615	
DOES DRIVER OWN OTHER VEHICLES?	<u>NO</u> / If yes, Reg No. INSURER.	
RELATIONSHIP	Employee / If No. Boss.	
WEATHER CONDITION	<u>Clear</u> / Raining / Other.	
ROAD SURFACE	<u>Dry</u> / Wet / Other.	
ANY INJURIES	No / <u>Yes</u> . Who?	
CONTACT NO		
POLICE REPORT	No / <u>Yes</u> . Where?	
NOTICE OF INTENDED PROSECUTION GIVEN?	NO/IF YES. WHO?	
VEHICLE B NO.	GBD3734B Any Passenger. 03.	
NAME	Lim Chee Boon.	
CONTACT NO	9788 0039.	
VEHICLE C NO	Any Passenger.	
VEHICLE D NO	Any Passenger.	
VEHICLE E NO	Any Passenger.	
VEHICLE F NO	Any Passenger.	
ANY WITNESS		
WITNESS CONTACT NO		
WAS THERE ANY VIDEO CAPTURE?	YES / <u>NO</u>	
WAS THERE ANY AUDIO RECORDED?	YES / <u>NO</u>	
SCENE ACCIDENT PHOTOS TAKEN?	YES / <u>NO</u>	
**WORKSHOP:	Lee Brothers Automotive Pte. Ltd	
Have you been approach by unknown person soliciting (s) / offering accident claims assistance?	YES / <u>NO</u>	

SKETCH PLAN

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 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 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.
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.

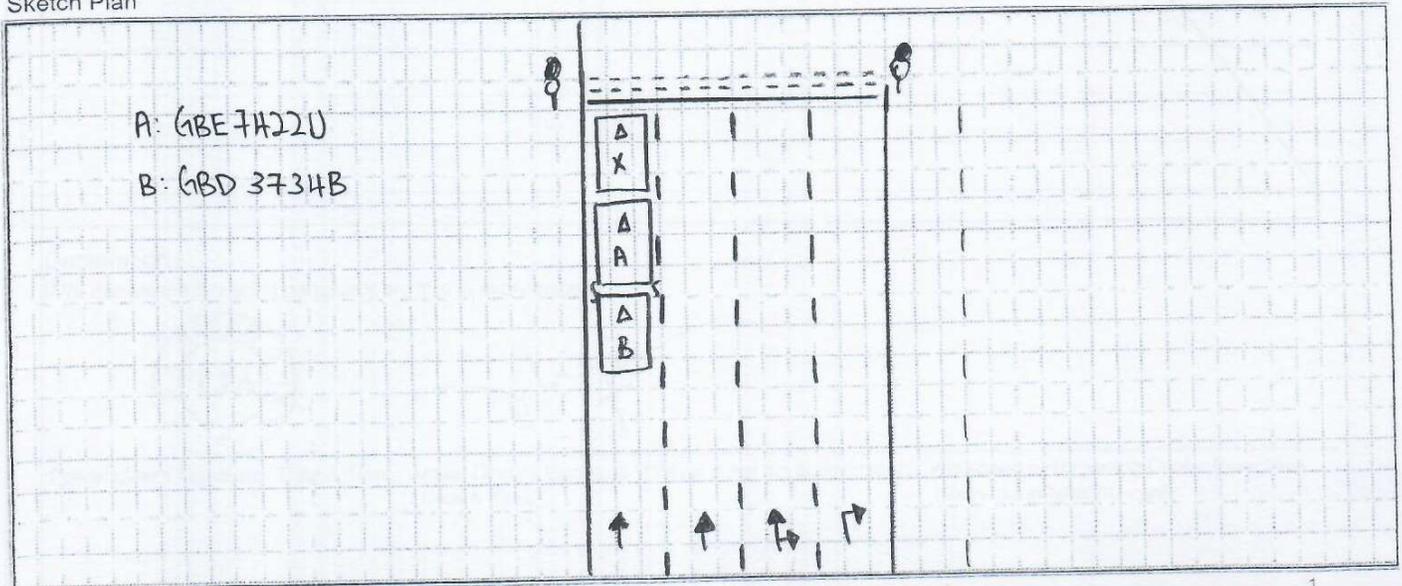


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

Sketch Plan



Describe Circumstance of the Accident

AS PER POLICE REPORT

Declaration

I/We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)



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

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/12/2022 12:51	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: THAM YIEW CHOY		Address: 615 WOODLANDS AVENUE 4 #01-515 SINGAPORE 730615	
ID Type / ID No.: NRIC NO / S1404206G		Contact No.: Home/Office:	Mobile: 90667731
Nationality: SINGAPORE CITIZEN		Email: THAMJOEE@GMAIL.COM	
Sex: Male	Age: 62	Date of Birth: 21/04/1960	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: SELF - EMPLOYED		Driving Licence Information: Class:	Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 12/12/2022 17:05	Type of Location: Straight Road
Location: WOODLANDS ROAD				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
GBD3734B	Lorry					0
GBE7422U	Van					0

Details of Person Involved

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



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

Report No. T/20221213/7013

CONTINUATION OF REPORT

Driver			
Name	THAM YIEW CHOY	ID No.	S1404206G
Related Vehicle	GBE7422U (Van)	Contact No.	90667731
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	12/12/2022	Date	NIL
No. of Days granted Medical Leave	05	Degree of	Serious

Brief Details.

I was travelling along Woodlands Road on 12/12/2022 at about 5.05pm with my car bearing car plate number GBE7422U. The traffic light turned green, as I am waiting for the front car to move off, Suddenly I felt an huge impact from the rear and I felt immediate pain on my neck after the accident. I alighted and found out that vehicle bearing car plate number GBD3734B collided onto the rear portion of my vehicle. I told the Driver of GBD3734B that I was injured after the accident as the impact is huge. We exchange particulars and left the scene.

I proceeded to see a doctor after the accident and was given 5 days MC.
I am reporting this incident for insurance purposes.

Signature Of Officer Submitting the Report Not applicable	Signature Of Informant The identity of the person making this report will be kept confidential by Singapore Police. No signature is required.
Signature Of Inspector Not applicable	Date Time 13/12/2022 12:51
Signature/Character Of Case IP - TPB TAN JESK LING Contact No. 65470151	Signature/Character Of Case
IP No.	



**SINGAPORE
POLICE FORCE**



T/20221213/7013

3 of 3

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

Report No. T/20221213/7013

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 / TPIB /
TAN JEOK LENG
Contact No.: 65476151

Signature Of Informant:

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

Date/Time:
13/12/2022 12:51

Classification Of Case: