

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	19/12/2022 16:24 (SGT)
Reported by	Both
Date of Accident	16/12/2022 21:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	AIRPORT BOULEVARD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNA3908R
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	ALPHA MOTORS PTE LTD
Company Reg No	201922050H
Email Address	mak.auburnauto@gmail.com
Mobile Phone No	(Phone) +65-97736360
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Vellfire
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	2400

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5121408521-01

DRIVER

Name of Driver	TANG SAI TAT
NRIC No	S7346654G
Date Of Birth	10/12/1973
Occupation	Outdoor

Date Of Driving Pass	11/12/1997
Driving experience	25 YEARS
Gender	Male
Mobile Number	(Phone) +65-87480100
Alt. Phone Number	-
Email Address	mak.auburnauto@gmail.com
Address	461B YISHUN AVE 6 #12-1045
Address complement	-
Postcode	762461
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	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	5
Was anybody injured in the Accident?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	5
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	Male

PASSENGER 2

Name	PASSENGER
Gender	Male

PASSENGER 3

Name	PASSENGER
Gender	Female

PASSENGER 4

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?	-

REFER SKETCH PLAN

REPAIR AT OWNER'S WORKSHOP

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 SHC5327P
 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 SDM8188Z
 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 3

Vehicle Registration Number SJG5777D
 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 4

Vehicle Registration Number	PC1077S
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Bus
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)	-

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.

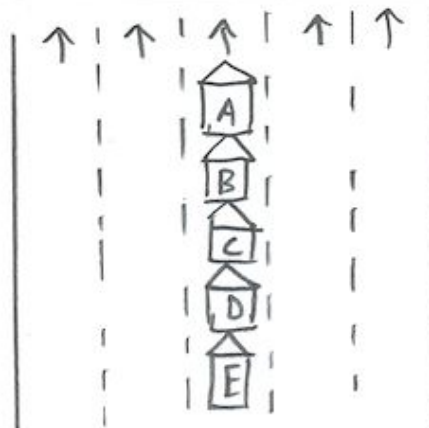

Policyholder's Signature / Date & Time




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


Witnessed by Reporting Centre Personnel

Sketch Plan

	<p>Vehicle A - SNA390BR</p> <p>Vehicle B - SHC5327P</p> <p>Vehicle C - SDM8188Z</p> <p>Vehicle D - SJG5777D</p> <p>Vehicle E - PC1077S</p>
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Describe Circumstances of the Accident

Refer to police report.

Pax 5 : 2 M
2 F

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


Witnessed by Reporting Centre Personnel

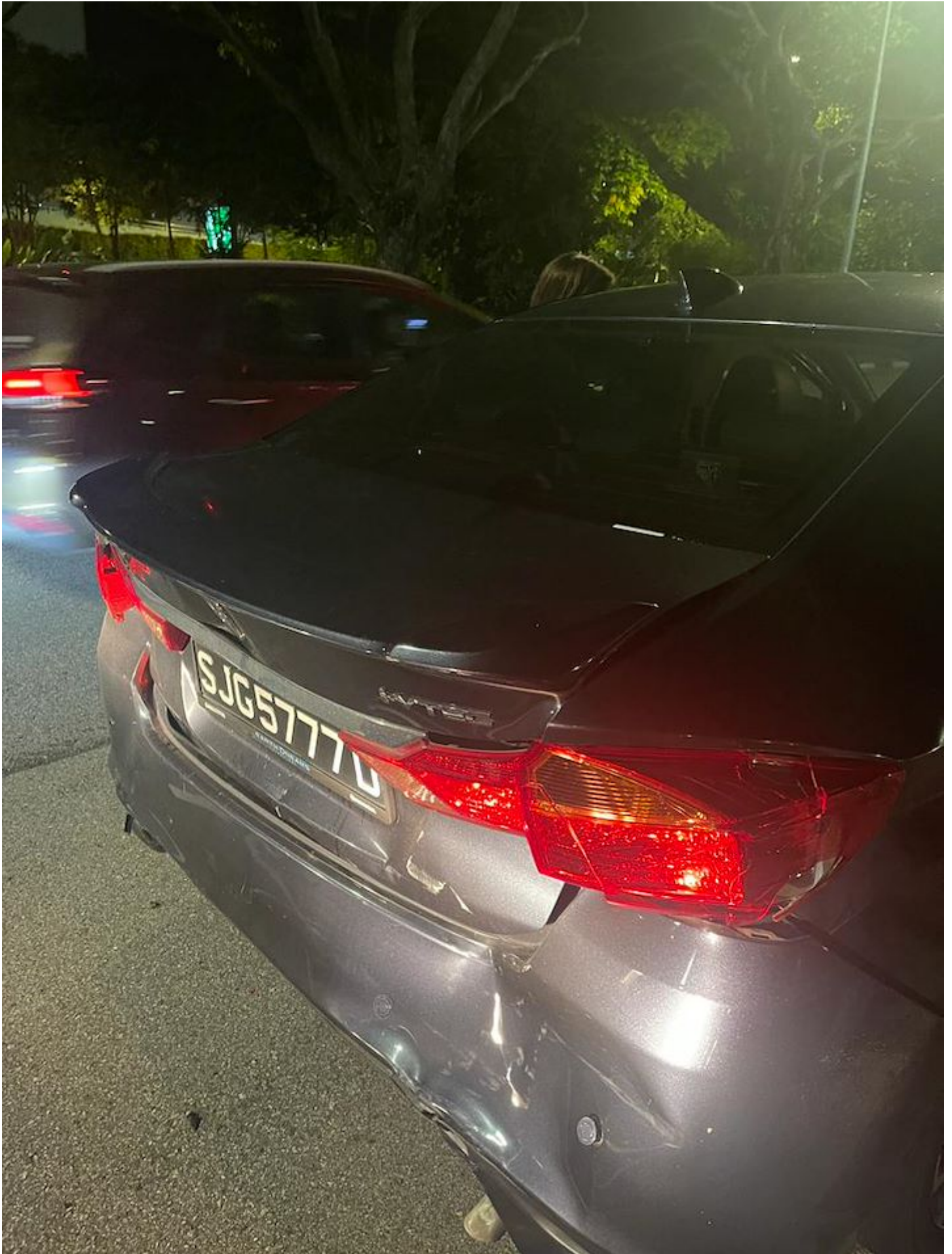






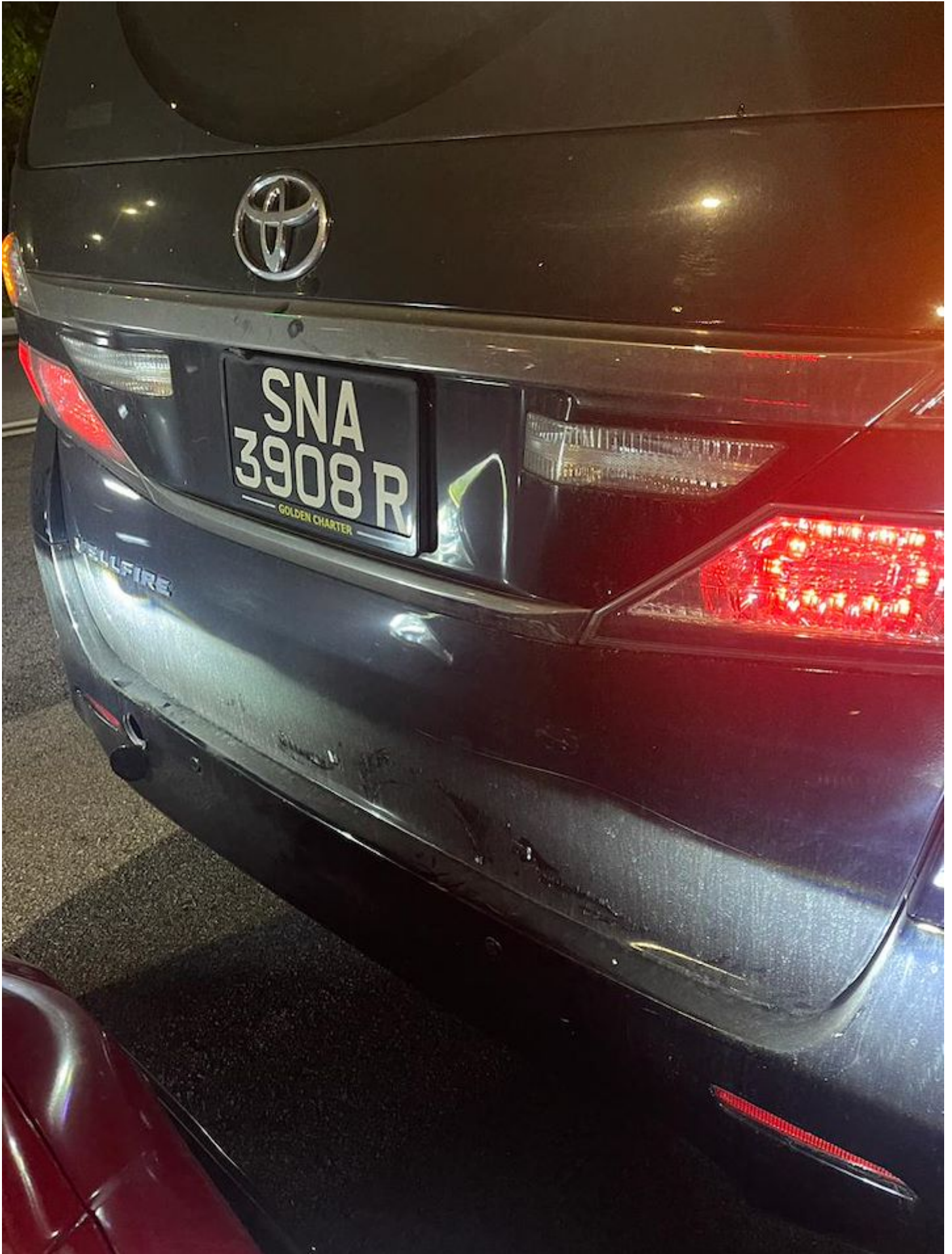
















**SINGAPORE
POLICE FORCE**



T/20221219/7019

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

1 of 3

Report No. T/20221219/7019

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 19/12/2022 12:20		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: TANG SAI TAT			Address: 461B YISHUN AVENUE 6 #12-1045 SINGAPORE 762461		
ID Type / ID No.: NRIC NO / S7346654G			Contact No.: Home/Office: Mobile: 87480100		
Nationality: SINGAPORE CITIZEN			Email: mak.auburnauto@gmail.com		
Sex: Male	Age: 49	Date of Birth: 10/12/1973	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation:			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 16/12/2022 21:00	Type of Location: Straight Road
Location: AIRPORT BOULEVARD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
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
SNA3908R	Car					0

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20221219/7019

2 of 3

Report No. T/20221219/7019

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

CONTINUATION OF REPORT

Driver			
Name	TANG SAI TAT	ID No.	S7346654G
Related Vehicle	SNA3908R (Car)	Contact No.	87480100
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	Slight

Brief Details.

On 16/12/2022 at around 2100Hrs, I was driving my rental car bearing SNA3908R. I just picked up a passenger from terminal 1 and am driving along airport boulevard towards bedok. I was at a complete stop as there was quite a jam when suddenly, I heard a loud bang and felt impact from the rear of my vehicle follow by a few more bangs after that. It was a chain collision of a total of 5 cars. I was the first car. The car right behind was a taxi bearing SHC5327P. Both cars sustained damages. We then all alighted and took photos and agreed to settle through insurance as it was a chain collision.



**SINGAPORE
POLICE FORCE**



T/20221219/7019

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

3 of 3

Report No. T/20221219/7019

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

NP168

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

Date/Time:
19/12/2022 12:20

Classification Of Case:



ALPHA MOTORS PTE LTD

85 COUNTRYSIDE ROAD S(789828)
UEN: 201922050H

ANNEX A

CAR RENTAL TERMS AGREEMENT


Car Registration Number : SNA39081R
 Make & Model : TOYOTA VELLFIRE 2.4Z
 Rental Rate : \$908 + \$42 = \$950
 Deposit : \$1,000/- Cash / Transfer
 iPlus+ : Silver / Gold
 Excess : \$800 + \$800/-

Date of Collection : 10/12/2022
 Date to Return : 12/09/2023
 Duration Term : 3 year(s) 0 month(s)

Hirer Details : (MAIN / RELIEF)
 Name (as per NRIC) : TANG SAI TAT
 NRIC/License No. : S7346654G
 Address : 4613 YISHUN AVE 6, #12-104E, SG 762461
 Date of Birth : 10-12-1973
 Contact Number : 8748 0100
 E-Mail : Tangyiceman@gmail.com
 Bank A/C : _____

Next of Kin Details
 Name (as per NRIC) : LOH LIM LAN
 Relationship : MOTHER
 NRIC/License No. : _____
 Address : _____
 Date of Birth : AS ABOVE
 Contact Number : 9382 9288

Refer to ANNEX B – Hirer's Obligations & Use of Vehicle


 Signature of Hirer
 Date:



 Company Representative

Updated as at 08 June 2022.