

## 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 ..... 28/12/2022 15:52 (SGT)  
Reported by ..... Driver  
Date of Accident ..... 23/12/2022 04:00 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... CORPORATION RD  
Country/State of Loss ..... Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SLK7549M

#### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... M LABEL AUTO LEASING PTE LTD  
Company Reg No ..... 202218044Z  
Email Address ..... REPORTING.GT@GMAIL.COM  
Mobile Phone No ..... (Phone) +65-96245154  
Alternative Phone No ..... -

#### VEHICLE PARTICULARS

Manufacturer ..... Honda  
Model ..... Shuttle  
Variant ..... -  
Exact purpose for which vehicle was being used at time of accident ..... -  
Are you claiming under your own insurance policy for repair to your vehicle? ..... No - Reporting only  
Vehicle Category ..... Private hire  
Transmission ..... Auto  
CC ..... 1500

#### INSURANCE COMPANY

Name of Insurance Company ..... India International Insurance Pte Ltd  
Policy Number / Cover Note Number ..... D22MFL0006049

#### DRIVER

Name of Driver ..... ONG GEE KEONG  
NRIC No ..... S7371746I  
Date Of Birth ..... 06/01/1973  
Occupation ..... Outdoor

Date Of Driving Pass .....	20/05/2005
Driving experience .....	17 YEARS AND 7 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-97555952
Alt. Phone Number .....	-
Email Address .....	GKONG99@GMAIL.COM
Address .....	352 KANG CHING RD #02-57 S.610352
Address complement .....	-
Postcode .....	-
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 - Head to Rear
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? .....	No
Was any injured conveyed to hospital by ambulance? .....	-
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 ATTACHED POLICE REPORT

#### 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 .....	SNB694X
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) .....	-

SKETCH PLAN

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8. Consent under the Personal Data Protection Act (PDPA)

I understand, acknowledge, agree and consent that:

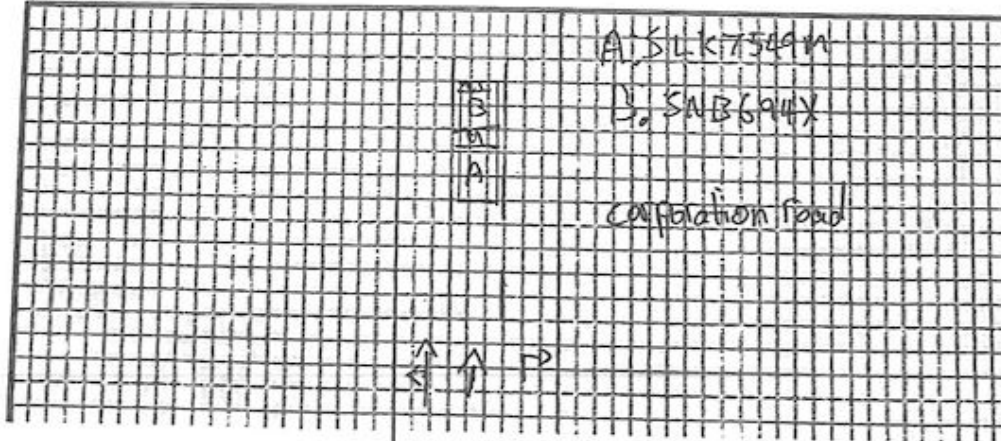
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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/are 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 

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

~~I was travelling straight along corporation road,~~  
~~out of~~

refer to police report T/2022/223/7008

Declaration

(We declare the foregoing particulars are true in every respect.)

  
 Policyholder's Signature (Date: 2022/18/04)

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

  
 Witnessed by Reporting Centre Personnel

Scanned with CamScanner

























**SINGAPORE  
POLICE FORCE**



T/20221223/7008

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

1 of 3

Report No. T/20221223/7008

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 23/12/2022 06:08		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: ONG GEE KEONG			Address: 352 KANG CHING ROAD #02-57 SINGAPORE 610352		
ID Type / ID No.: NRIC NO / S7371746I			Contact No.: Home/Office: Mobile: 97555952		
Nationality: SINGAPORE CITIZEN			Email: GKONG99@GMAIL.COM		
Sex: Male	Age: 49	Date of Birth: 06/01/1973	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation:			Driving Licence Information: Class: 3		Date of Expiry:

**General Information of the Accident**

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 23/12/2022 04:00	Type of Location: X-Junction
Location:  CORPORATION ROAD				
Weather: Drizzling		Road Surface: Wet		Road Speed Limit: 60 Km/h
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		Traffic Volume: No Traffic
Type of Collision: Moving Vehicle Against - Others				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of
SLK7549M	Car	HONDA	Shuttle 1.5 Hybrid	Black	Slightly Damaged	0
SNB694X	Car	TOYOTA	Corolla	Red	Slightly Damaged	0



**SINGAPORE  
POLICE FORCE**



T/20221223/7008

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

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Report No. T/20221223/7008

**CONTINUATION OF REPORT**

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	ONG GEE KEONG	ID No.	S7371746I
Related Vehicle	SLK7549M (Car)	Contact No.	97555952
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL
Driver			
Name	LEE BUCK CHYE	ID No.	S1637289G
Related Vehicle	SNB694X (Car)	Contact No.	98805040
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

**Brief Details.**

I was driving in black color Honda Shuttle 1.5 Hybrid SLK7549M. After exiting AYE Exit 15A from City direction, I turned to Corporation Road. When reached junction between Corporation and Jalan Tukang/ Yung Ho Road, I stopped behind the red color car Toyota Corolla Hybrid SNB694X as the traffic was red. The time was about 4.00am, while waiting for red light to turn green, I accidentally removed my foot on the brake pedal and my car moved forward from stationary to hit the back of the red color car in front and caused visible minor scratches/ damage to back bumper of the red car and the front bumper of my car. No injury. The driver from the red color car exchanged information with me for traffic insurance claim. There was no passenger from both the red color car and my car.



**SINGAPORE  
POLICE FORCE**

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



T/20221223/7008

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Report No. T/20221223/7008

**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 /  
FAHKRUL RAZI BIN SUHAIME  
Contact No.: 65470000

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

Date/Time:  
23/12/2022 06:08

Classification Of Case:

NP168



