

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	16/01/2023 11:58 (SGT)
Reported by	Driver
Date of Accident	15/01/2023 15:00 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	CTE TOWARDS CITY (BETWEEN AMK AVENUE 1 & BRADDELL ROAD EXIT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMX2738L
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	SKYWAY MOTOR PTE LTD
Company Reg No	199904194N
Email Address	SAM@SKYWAY.COM.SG
Mobile Phone No	(Phone) +65-88551188
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Vezel
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	1500

INSURANCE COMPANY

Name of Insurance Company	India International Insurance Pte Ltd
Policy Number / Cover Note Number	D22MFL0004075

DRIVER

Name of Driver	CHUA PHILIP
NRIC No	S1353869G
Date Of Birth	21/08/1959

Occupation	Outdoor
Date Of Driving Pass	31/07/1981
Driving experience	41 YEARS AND 6 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97542811
Alt. Phone Number	-
Email Address	SAM@SKYWAY.COM.SG
Address	5 BUKIT BATOK STREET 25 #02-03
Address complement	-
Postcode	658880
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	CLOUDY
Road Surface	Wet

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?	No
Was any injured conveyed to hospital by ambulance?	-
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	HO SHUYU
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Jurong Division Headquarters
Police Station Phone No	(Phone) +65-18007910000
Alt. Police Station Phone No	(Fax) +65-68965647
Police Station Address	No. 2 Jurong West Avenue 5 Singapore 649482
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO SKEKET PLAN

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLC8026R
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	SMG89D
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	GBK3007E
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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)	-

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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' law yers/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) carrying out the accident investigation;
 - (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 envelope/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' law yers/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 law yers/law firms), which may be based outside of Singapore, for one or more of the above Purposes.

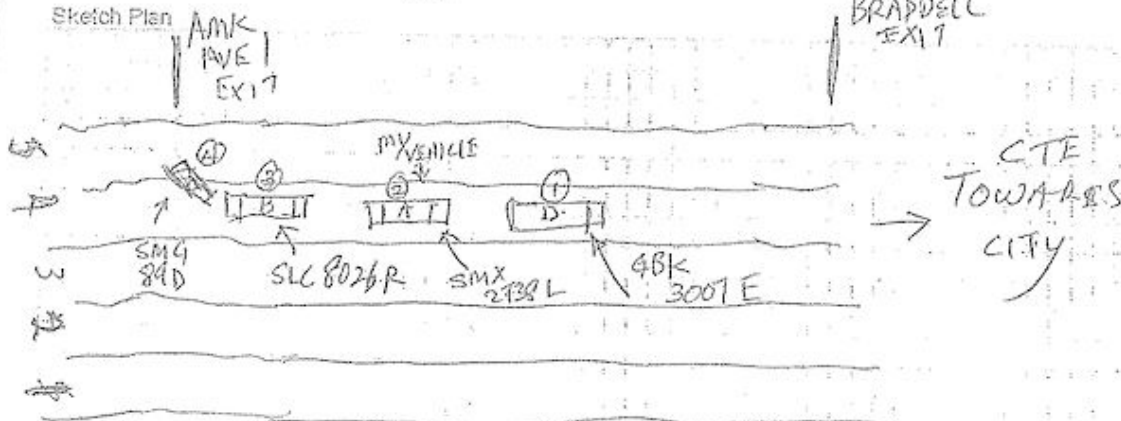


Policyholder's Signature / Date & Time

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

Witnessed by Reporting Centre Personnel

Sketch Plan



Describe Circumstance of the Accident

While driving SMX 2738 L, (Silver Honda Vezel)
I was involved in a chain collision at CTE towards
city between AMK AVE 1 & Bmedel exit

Chain Collision sequence

- 1) GBK 3007 E (MR Kim Hp 95913834)
- 2) SMX 2738 L (mine)
- 3) SLC 8026 R (MR ~~LECH~~ Letch Hp 92378973)
- 4) SMG 89 D (MR DARIUS XIAO Hp 97809339)

Vehicle no 4 was trying to overtake vehicle no 3
and hit her on the rear.

Subsequently vehicle no 3 hit vehicle no 2 (me) and
I hit vehicle no 1.

My vehicle (no 2) & vehicle no 3 were
damaged on front and rear.

My passenger claim she was injured and
I advise her to seek medical treatment.

Declaration

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



Policyholder's Signature / Date & Time

16/01/20203
0840 am Philip

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

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



INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703792k | GST Reg. No. M2-0078806-X
 64 | Cecil Street | #04 | #05 | #06-02 | IOB Building | Singapore 049711
 Office (65) 63476100 Email insure@iil.com.sg
 Fax (65) 62244174 Website www.iil.com.sg

CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA)
 MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

All Accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

CERTIFICATE NO.: D22MFL0004075_01		COVER: Third Party Only
1. Index Mark and Registration Number of Vehicle	: SMX2738L	
Chassis No	: RU31323531	
2. Name of Policyholder	: SKYWAY MOTOR PTE LTD	
3. Effective date of Insurance	: 08 Aug 2022	
4. Expiry date of Insurance	: 07 Aug 2023	
5. Persons or Classes of Persons entitled to drive*	<p>Any person who is driving on the Policyholder's order or with his/her permission. The Hirer.</p> <p>Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle</p>	
6. Limitations as to use*	<p>Use for the carriage of passengers or goods in connection with the Policyholder's business or the hirer's business. Use for social, domestic, pleasure purposes and business purposes of the Policyholder or of any person to whom the vehicle is hired.</p> <p>The Policy does not cover</p> <p>(1) Use for racing, pace-making, reliability trial, or speed-testing. (2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle. (3) Use for any purpose in connection with the Motor Trade.</p> <p>*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.</p>	
<p>I/We HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).</p> <p>Agent/Broker : D000052/SKYWAY MOTOR PTE LTD Date of Issue : 01/08/2022 10:53:31 MZ406 - Hire Car (U/G)</p> <p style="text-align: right;">For India International Insurance Pte Ltd</p> <p style="text-align: right;"> Authorised Signatory </p>		

lelehmy/01/08/2022 10:53:31

01/08/2022 11:01:26




























**SINGAPORE
POLICE FORCE**


J/20230115/7047

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POLICE REPORT (NP299)

Report No. J/20230115/7047

Police Station Of Origin
Jurong Division HQ
2 Jurong West Avenue 5 SINGAPORE
649482
Tel No:1800-7910000

Date/Time Report Made 15/01/2023 22:04	Vide Report No.	Station Diary No.
Name Of Informant CHUA PHILIP	Address 5 BUKIT BATOK STREET 25 #02-03 SINGAPORE 658880	
ID Type / ID No. NRIC NO / S1353869G	Contact No. Home/Office: Mobile: 97542811	
Nationality SINGAPORE CITIZEN	Email Address PHILIPCHUA01@GMAIL.COM	
Occupation Accountant (excluding tax accountant)	Sex Male	Age 63
Institution/School Name	Date of Birth 21/08/1959	Race Chinese
Date/Time Of Incident 15/01/2023 15:00 - 15/01/2023 15:00	Location Of Incident CTE towards City	

Brief details.

While driving my Vehicle SMX2738L, silver color Honda Vezel, i was involved in a chain collision at CTE towards City in between AMK ave 1 and Bradell Road. I was the 2nd car in the chain collision.

Chain collision sequence:

- 1)GBK3007E (Mr Kim, HP: 85913834)
- 2)SMX2738L (mine)
- 3)SLC8026R (Mr Lectch, HP: 92378973)

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: 15/01/2023 22:04
Officer In-Charge Of Case:	Classification Of Case:

This report is lodged at Bukit Batok NPP Kiosk 1



**SINGAPORE
POLICE FORCE**



J/20230115/7047

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20230115/7047

4)SMG89D (Mr Darius Xiao, HP: 97809339)

Vehicle 1 to 3 was stationary in a jam, car no.4 started the chain collision when it collided into vehicle 3.

I have one female passenger in my car who was not feeling well after the incident and was advised to see a doctor. As of now, i do not feel any pain.

My vehicle and car no.3 was damage on the front and rear.

Subjects Involved			
Victim			
Person Name	Ho Shuyu		
ID Type	OTHERS / Unknown NRIC	ID No	UNKNOWN
Gender	Female	Age	20
Race	Chinese	Occupation	Actor
Relation To Informant	Passenger		
Person Name	CHUA PHILIP		
ID Type	NRIC NO	ID No	S1353869G
Gender	Male	Age	63
Race	Chinese	Language	English
Occupation	Accountant (excluding tax accountant)	Address	5 BUKIT BATOK STREET 25 #02-03 SINGAPORE 658880

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: 15/01/2023 22:04
Officer In-Charge Of Case:	Classification Of Case:

This report is lodged at Bukit Batok NPP Kiosk 1



**SINGAPORE
POLICE FORCE**



J/20230115/7047

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. J/20230115/7047

Mobile No	97542811	Is Informant A Victim?	Yes
Person Name	CHUA PHILIP (Informant)		

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: 15/01/2023 22:04
Officer In-Charge Of Case:	Classification Of Case:

This report is lodged at Bukit Batok NPP Kiosk 1

