

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	25/01/2023 10:52 (SGT)
Reported by	Both
Date of Accident	23/01/2023 13:15 (SGT)
Exact Location of Accident	CTE, Singapore
Additional Location Information	BETWEEN ANG MO KIO AVENUE 5 & 1
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJH4605T
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	CHAN KUAN LIAN PHYLLIS
NRIC No	SXXXX776J
Email Address	steviezeng@gmail.com
Mobile Phone No	(Phone) +65-96565713
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	Avante
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Reporting only
Vehicle Category	Private car
Transmission	Auto
CC	1591

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMPCSNW00032702201

DRIVER

Name of Driver	ZENG FANSHENG, STEVIE
NRIC No	SXXXX207C
Date Of Birth	10/04/1985
Occupation	Indoor

Date Of Driving Pass	09/04/2009
Driving experience	13 YEARS AND 9 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96565713
Alt. Phone Number	-
Email Address	steviezeng@gmail.com
Address	BLK 237 SERANGOON AVENUE 3 #11-124
Address complement	-
Postcode	550237
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	NEPHEW
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	Wet

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?	No
Was any injured conveyed to hospital by ambulance?	-
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	3
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	CLAIRE KOH
Gender	Female

PASSENGER 2

Name	SHANICE ZENG
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO SKETCH PLAN

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	GBC3884G
Vehicle Manufacturer	Nissan
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	TAN SOON MING
NRIC No	SXXXX828A
Contact Number	(Phone) +65-86664748
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	SMM9218H
Vehicle Manufacturer	Mercedes
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	MOHD ADIL BIN YUSOFF
Contact Number	(Phone) +65-90907706
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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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 (Name as in NRIC/ID card)

Sketch Plan

Sketch Plan

C16

B) GBC38846, C) SMM92184

A) SJH4605 T

1

Describe Circumstance of the Accident

On 23 Jan 2023, 1:15 pm, I was driving (SSM4605T) on CTE. In between AMK 5 & 1, as Lane 1 was blocked, there were many cars sitting in Lane 2.


I was on lane 2 going straight when a Nissan Van (GBC 9884G) did a sudden brake in front. I had ample safety distance and applied the brakes fully. However due to the wet floor, the vehicle made impact with the van and the van rolled forward. There was a Mercedes (SSM 9218H) in front.


Nobody was injured at that time nor was there any damage to government property. All of us agreed to come to a private settlement. Refer to the attached private settlement form.

I file this report for record purposes only.

Declaration

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


Policyholder's Signature / Date & Time

 24/1/23 1:30am
Driver's Signature (if driver is not the policyholder) / Date & Time

 25/1/2023
Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card)















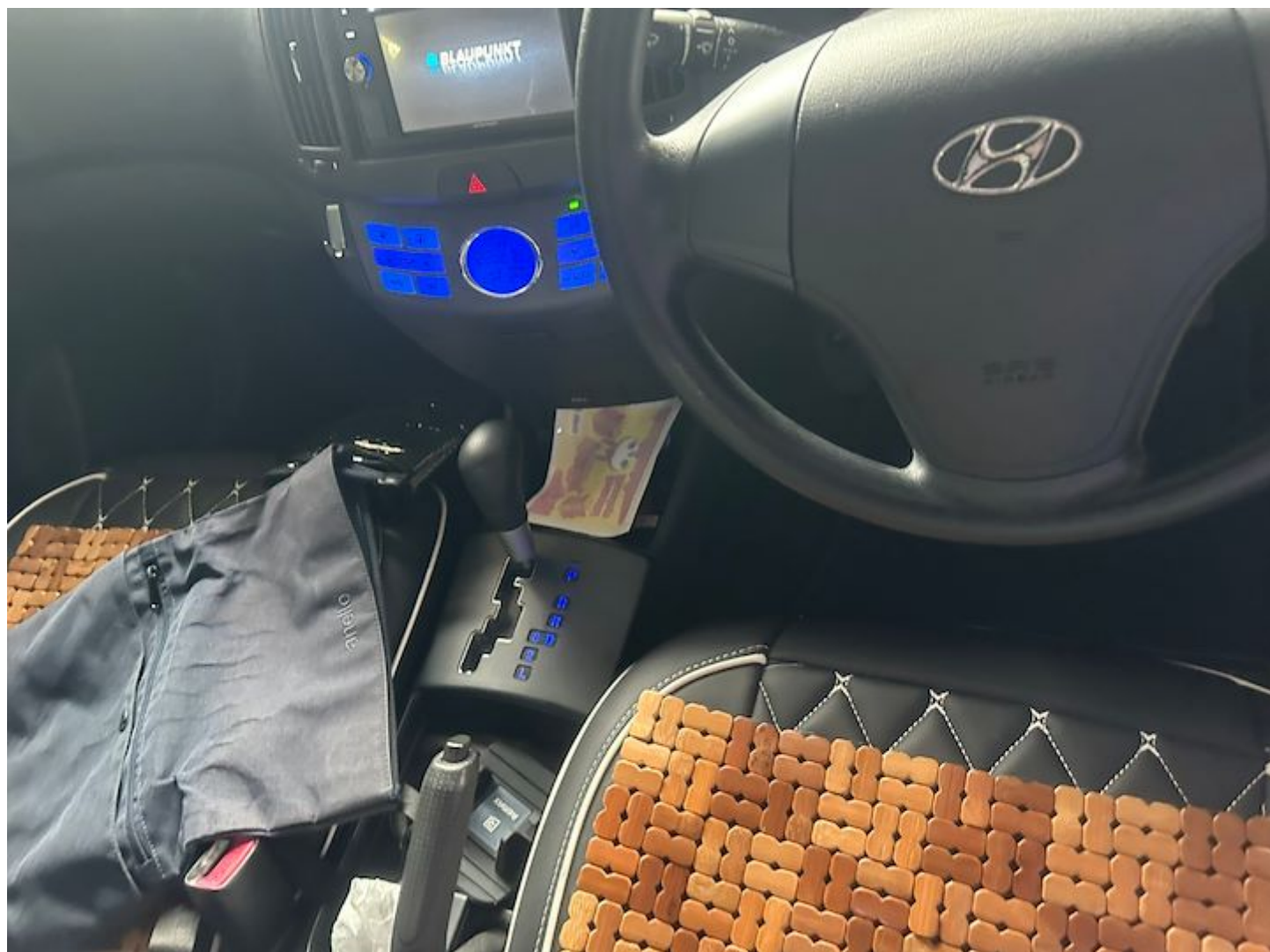


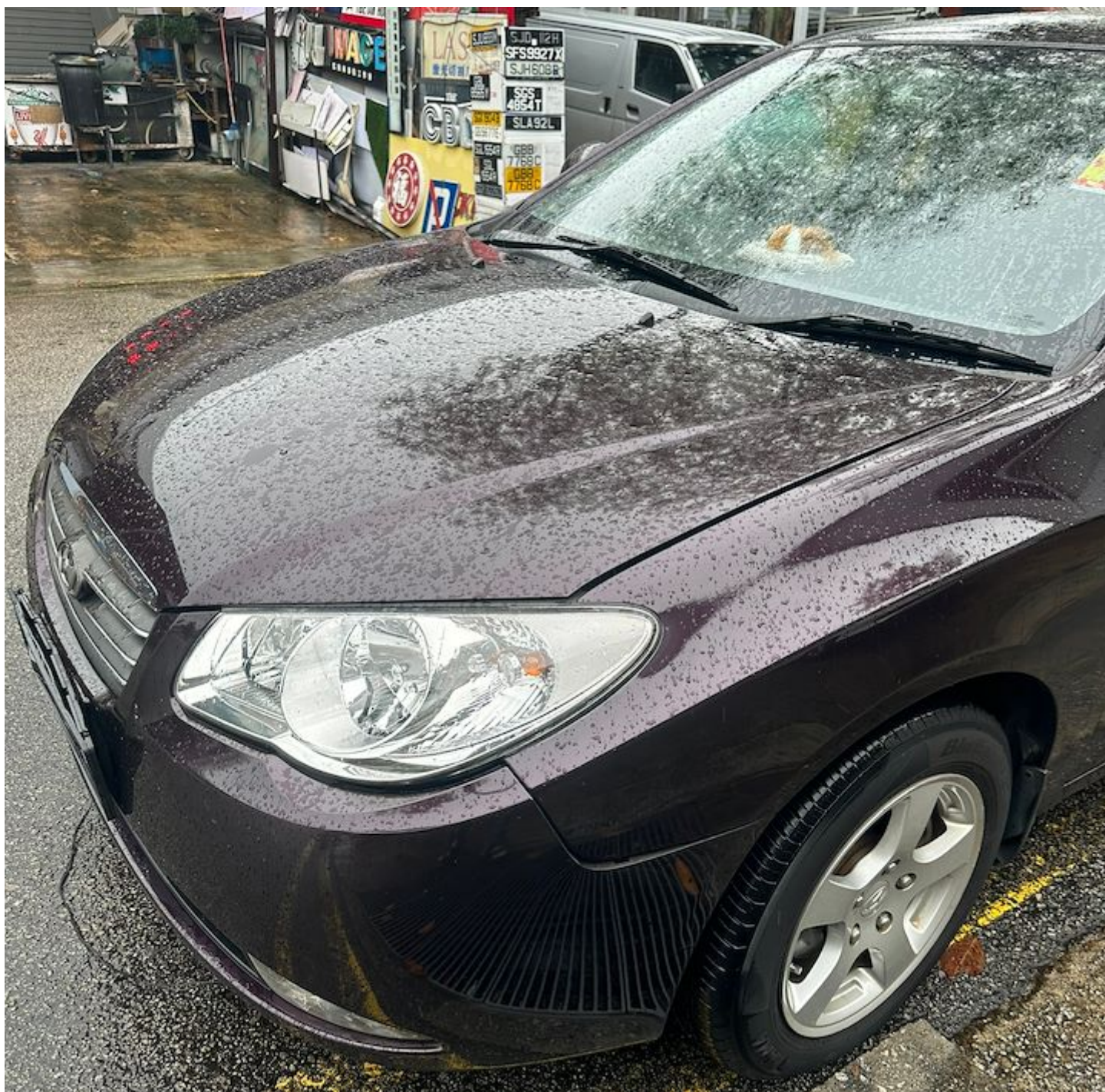














Private Settlement Form

1. Under this private settlement, we the undersigned agree to mutually settle among ourselves a motor accident as follows:

Date/Time: 23 January 2023, 1.15 pm

Location: CTE, between AMK Ave 5 and Ave 1

Involving Vehicle Registration Numbers: SMM9218H, GBC3884G & SJH4605T

2. All parties have declared as follows:

- There are no bodily injuries or death involved to any party or passengers;
- There are not any other vehicles involved in the accident;
- There is no government property damaged due to the accident;
- The parties have agreed to settle this matter amicably as follows:

Without any admission of liability, ZENG FANSHENG STEVIE has paid a sum of S\$300 which MOHAMMAD ADIL BIN YUSOF hereby acknowledges receipt thereof in full and final settlement of all damages and costs incurred and/or to be incurred as a result of the accident;

And also;

Without any admission of liability, ZENG FANSHENG STEVIE has paid a sum of S\$400 which TAN SOON MING hereby acknowledges receipt thereof in full and final settlement of all damages and costs incurred and/or to be incurred as a result of the accident;

- All parties have not and will not make a police report of this accident;
- All parties will not file any accident claim for this accident;

Paying Party (A)	Receiving Party 1 (C)	Receiving Party 2 (B)
 <u>S8509207C</u> Signature NRIC	 <u>S9509750G</u> Signature NRIC	 <u>S7830828A</u> Signature NRIC
<u>ZENG FANSHENG STEVIE</u> Full Name	<u>MOHAMMAD ADIL BIN YUSOF</u> Full Name (Owner of vehicle)	<u>TAN SOON MING</u> Full Name (Owner of vehicle)
<u>96565713</u> Contact Number	<u>90907706</u> Contact Number	<u>86664748</u> Contact Number
<u>SJH4605T</u> Vehicle Number	<u>SMM9218H</u> Vehicle Number	<u>GBC3884G</u> Vehicle Number
<u>24/1/2023</u> Date	<u>23 January 2023</u> Date	<u>24/1/2023</u> Date