

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	03/02/2023 13:04 (SGT)
Reported by	Driver
Date of Accident	03/02/2023 08:30 (SGT)
Exact Location of Accident	Eu Tong Sen St, Singapore
Additional Location Information	JUNCTION HAVELOCK RD TWDS SOUTH BRIDGE RD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMP4266K
INSURED/POLICYHOLDER	
Is company?	Yes
Name Of Registered Owner	PRIME CAR LIMO PTE LTD
Company Reg No	201826883W
Email Address	SUPREMELEASINGSG@GMAIL.COM
Mobile Phone No	(Phone) +65-86836000
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Freed
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 car
Transmission	Auto
CC	1500

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5119549919-02-000030

DRIVER

Name of Driver	KER BENG HONG
NRIC No	S7633837Z
Date Of Birth	03/10/1976
Occupation	Outdoor

Date Of Driving Pass	09/12/1999
Driving experience	23 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-86086003
Alt. Phone Number	-
Email Address	SUPREMELEASINGSG@GMAIL.COM
Address	BLK 178 BOON LAY DRIVE #06-414
Address complement	-
Postcode	640178
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
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	NG GEK SAN
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?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT: T/20230203/7024

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	SLT3845L
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	VEHICLE B
No. Of Passenger (Including Driver)	2

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	KER BENG HONG
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SMP4266K
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

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- By the application of the general results of the preceding section to the case of the present problem, we have

Figure 1. The effect of the initial concentration of the monomer on the polymerization of α -methylstyrene initiated by $\text{C}_2\text{H}_5\text{MgBr}$ in THF at -78°C for 10 min. The concentration of the initiator was 0.01 mol/L . The concentration of the monomer was 0.01 mol/L (a), 0.02 mol/L (b), 0.04 mol/L (c), 0.06 mol/L (d), 0.08 mol/L (e), 0.1 mol/L (f), 0.12 mol/L (g), 0.14 mol/L (h), 0.16 mol/L (i), 0.18 mol/L (j), 0.2 mol/L (k), 0.22 mol/L (l), 0.24 mol/L (m), 0.26 mol/L (n), 0.28 mol/L (o), 0.3 mol/L (p), 0.32 mol/L (q), 0.34 mol/L (r), 0.36 mol/L (s), 0.38 mol/L (t), 0.4 mol/L (u), 0.42 mol/L (v), 0.44 mol/L (w), 0.46 mol/L (x), 0.48 mol/L (y), 0.5 mol/L (z).

1. We make use of the Personal Information of the General Insurance Association of Singapore ("GIA") as follows, according to relevant laws and regulations in effect in Singapore:
- (a) for the purpose of maintaining and/or improving our internal database and/or for other internal purposes, provided that we do not intend to use the same to reflect any the "Personal Information" and disclose and/or transfer such Personal Information to other parties who have no direct involvement in this accident (all insureds who have insured vehicles involved in this accident shall be collectively referred to as the "Insurers"); the reason for this is that, under the relevant laws in Singapore, and any relevant government agency/authority (such as the police) for the purpose of it;
- (b) processing of a claim and/or dealing with my claim(s) related to the settlement of the claim(s) and any necessary investigation relating to the claim(s);
- (c) need of giving third parties and/or my claim(s)
- (d) carrying out and/or dealing with my instructions or responding to any enquiries by me;
- (e) in order to log my claim(s) and/or the making of correspondence, statements, invoices, reports or replies to me, which could involve a disclosure of certain personal data about me, to bring about delivery of the services we have or the expected type of service(s) and/or packages, and/or
- (f) complying with our legal obligations, administering, processing, handling and/or dealing with my claim(s) according to the "Purposes";
- (g) all insurers who have insured vehicles involved in the accident or the insurers' lawyers/law firms, lawyers permitted to collect, store, transmit and/or process the Personal Information for one or more of the above purposes; and
- (h) my Personal Information may also be disclosed by any of the insurers and/or GIA to their third party and/or providers or agents/including their lawyers/law firms, when it is disclosed outside of Singapore, for one or more of the above purposes;
- (i) my Personal Information will also be collected and used to compile claim history for the purpose of fraud prevention, investigation and management of current and all future claims;
- (j) the information so collected and/or stored may be shared / disclosed
- (k) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulatory, law enforcement and government agencies as reasonably required for the purposes stated; or
- (l) for complying with requirements under any regulations, laws or court orders.

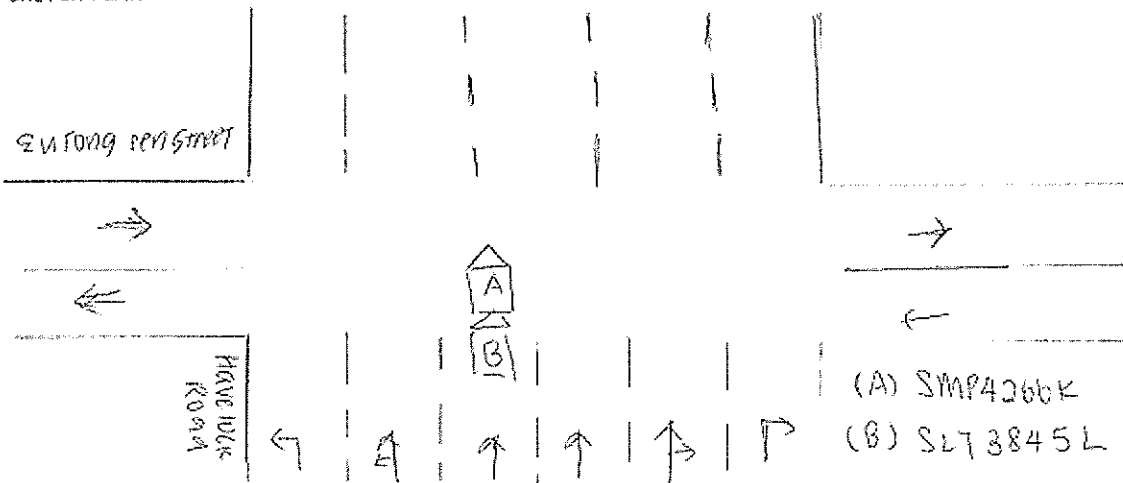


Contract Signature
 of a witness to the contract
 Date & Place

[illegible]

I hereby authorise SME Motor Pte Ltd to send my
Accident report to my workshop _____
via email / fax _____
Signature _____

towards South Bridge Road.



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER to traffic police
REPORT

T/20230203/7024

Note: Please note that your insurer may have 14 days time frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check your policy for more information

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



Driver's Signature _____
(It must be not the policyholder)
Date & Time _____

Kang

Reporting Contact: Department of Agriculture
 Name: _____
 Title: _____



**SINGAPORE
POLICE FORCE**



1/20230203-7024

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

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Report No. 1-20230203/7024

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 03/02/2023 11:36	Video Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: KER BENG HONG			Address: 178 BOON LAY DRIVE #06-414 SINGAPORE 640178		
ID Type / ID No.: NRIC NO / S7633837Z			Contact No.: Home/Office: Mobile: 86086003		
Nationality: SINGAPORE CITIZEN			Email: ukerbh@gmail.com		
Sex: Male	Age: 46	Date of Birth: 03/10/1976	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: PRIVATE HIRER			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 03/02/2023 08:30	Type of Location: X-Junction
Location: EU TONG SEN STREET				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of
SLT3845L	Car					0
SMP4266K	Car					0

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20230203/7024

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

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Report No. T/20230203/7024

CONTINUATION OF REPORT

Driver			
Name	KER BENG HONG	ID No.	S7633837Z
Related Vehicle	SMP4266K (Car)	Contact No.	86086003
Hospital/Clinic	CARE MEDICAL CLINIC	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	03/02/2023	Date	NIL
No. of Days granted Medical Leave	05	Degree of	Serious

Brief Details.

ON 03/02/2023 AT ABOUT 0830HRS AT JUNCTION OF EU TONG SEN STREET AND HAVELOCK ROAD TOWARDS SOUTH BRIDGE ROAD. I WAS TRAVELLING ON THE LANE 4 AT ALONG HAVELOCK ROAD AND WHEN MY FRONT VEHICLE SLOW DOWN AND STOP DUE TO HEAVY TRAFFIC, HENCE I FOLLOW SUIT. SUDDENLY I FELT A GREAT IMPACT FROM THE REAR AND WHEN I ALIGHTED, I REALISED THAT IT WAS VEHICLE (B) WHO HIT ONTO THE REAR PORTION OF MY VEHICLE (A) CAUSING DAMAGES TO MY VEHICLE. AFTER THE ACCIDENT, I WENT TO CONSULT A DOCTOR AND WAS AWARDED 5 DAYS OF MC FOR MY INJURY. I HAVE 1 PASSENGER INSIDE MY VEHICLE.

VEHICLE A: SMP4266K
VEHICLE B: SLT3845L



**SINGAPORE
POLICE FORCE**



T/20230203/7024

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

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Report No: T/20230203/7024

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 /
MOHAMAD ZULFAZDLI BIN ABDULLAH
Contact No.: 65476204

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

Date/Time:
03/02/2023 11:36

Classification Of Case:

NP165