

# SINGAPORE ACCIDENT STATEMENT

Accident Date:	04/02/2023	Time:	16:35	(hh:mm) 24 hr format
Location	Junction of Havelock Road and New Market Road (beside ministry of Manpower)			
Vehicle Number	PA 6411M			
Insured Name	BC Tan Transport Services			
NRIC / FIN	53025005E	Contact Number	9362 2588	
Make	Toyota	Model	Hiace Bus	
Are you claiming under your own insurance policy for repair to your vehicle?				
( ) Yes If No, Pls select: ( / ) Third Party ( ) Reporting				
Insurance Company	China Taiping			
Type of Policy ( ) Comprehensive ( ) Third Party Fire & Theft ( ) TP Only				
Policy Number				
Name of Driver	Tan Boon Chuan		( ) Same as Insured	
NRIC / FIN	500251642	Contact Number	9362 2588	
Date of Birth	10/11/1953			
Driving Pass Date	20/12/1974			
Occupation ( ) Indoor ( / ) Outdoor				
Gender ( / ) Male ( ) Female				
Email Address	bctan+pt@yahoo.com.sg	( ) NO EMAIL		
Address of Driver	6 Hougang Street 92 #14-02 Singapore 538685			
Was driver an employee of the Insured's Company? ( / ) Yes ( ) No				
If No, Relationship of the Driver with the Insured				
( / ) Owner ( ) Spouse ( ) Friend ( ) Relative ( ) Children ( ) Sibling				
Does the Driver Own Any Other Vehicle? ( ) Yes ( / ) No				
If Yes, Vehicle Registration Number of Driver's Own Vehicle -				
Insurance Company of Driver's Own Vehicle -				
Weather Conditions ( ) Clear ( / ) Raining ( ) Others				
Road Surface ( ) Dry ( / ) Wet ( ) Others				
Was any foreign vehicle involved in this accident? ( ) Yes ( / ) No				
Was anybody injured in the accident? ( ) Yes ( / ) No				
If yes, injured detail -				
Was there any video captured by Car Camera? ( ) Yes ( / ) No				
Was the Accident reported to the Police? ( ) Yes ( / ) No If yes attach police report				
DETAILS OF 3 <sup>rd</sup> party	Name / Nric		Contact	
Veh B	SLJ 2894D			
Veh C				
Veh D				
Veh E				
Veh F				

(1) passenger = Lim Sin Keng (F)



### SKETCH PLAN

#### 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 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' 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.

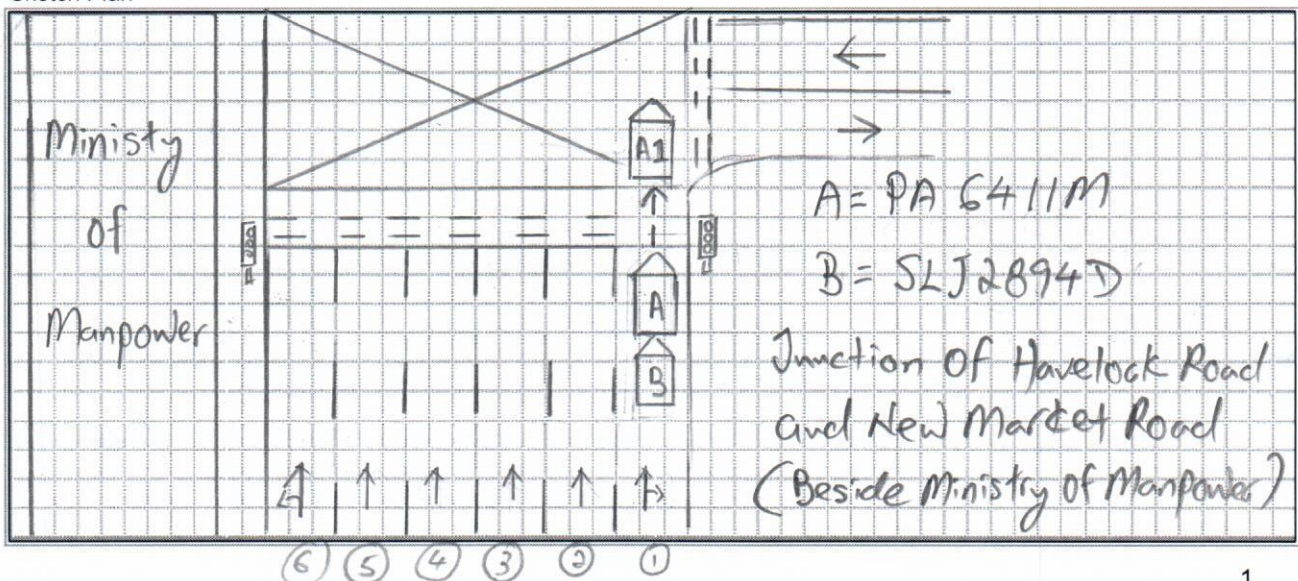


Policyholder's Signature / Date & Time

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

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

Sketch Plan



Describe Circumstance of the Accident

Refer to attached

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  
(Name as in NRIC/ID card)

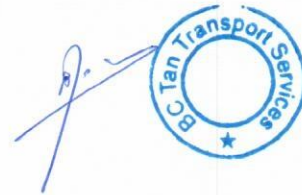
On 04.02.2023 at about 16:35 hours along Junction of Havelock Road and New Market Road (Beside Ministry of Manpower). While I was travelling on the lane 1, when coming towards the traffic light I saw the traffic light turn amber, I slow down and stop my vehicle.

suddenly I heard a loud bang from behind and the impact push my vehicle to the yellow box and when I alighted I realized it was vehicle (B) who hit my rear portion of my vehicle (A) causing damages to my vehicle.

I wish to state that, I have 1 passenger on my vehicle (A).

Vehicle (A): PA 6411M

Vehicle (B): SLJ 2894D





REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. S0025164Z



Name  
TAN BOON CHUAN  
陈文川

Race  
CHINESE

Date of Birth  
10-11-1953

Sex  
M

Country of Birth  
SINGAPORE



PA 6411M

Owner and Driver

2454025



NRIC No: S0025164Z

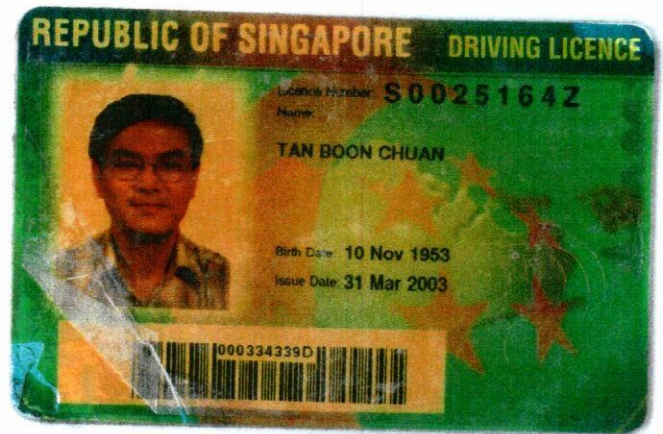


Blood Group  
A+

Date of Issue  
06-10-1994

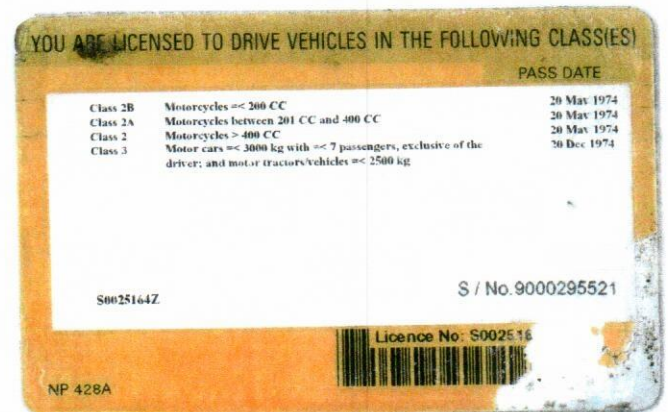
6 HUGANG STREET 92 #14-02  
SINGAPORE 539685

NRIC No: S0025164Z Date: 24-06-2003 No: 4744690



PA 6411m

Owner and Driver



Land Transport Authority


**VOCATIONAL LICENCE**

Licence No: S0025164Z

Name: TAN BOON CHUAN

Issue Date: 4/2/2012

Please visit [www.lta.gov.sg](http://www.lta.gov.sg) to check the status of this vocational licence



PA 6411m

Owner and driver

This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to the LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
03	BUS VL	06/03/2002
04	BUS ATTENDANT	06/03/2002

