

# 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 ..... 13/02/2023 16:20 (SGT)  
Reported by ..... Driver  
Date of Accident ..... 08/02/2023 18:25 (SGT)  
Exact Location of Accident ..... Singapore  
Additional Location Information ..... CECIL STREET TOWARDS COLLYER QUAY IN FRONT OF  
FINALAYSON GREEN  
Country/State of Loss ..... Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number ..... SMN5985Y

### INSURED/POLICYHOLDER

Is company? ..... Yes  
Name Of Registered Owner ..... FAVOURITE CAR RENTAL PTE LTD  
Company Reg No ..... 201838589K  
Email Address ..... SAM@SKYWAY.COM.SG  
Mobile Phone No ..... (Phone) +65-8551188  
Alternative Phone No ..... -

### VEHICLE PARTICULARS

Manufacturer ..... Honda  
Model ..... Shuttle  
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 - 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 ..... -

### DRIVER

Name of Driver ..... PANG TERESA  
NRIC No ..... S1496502E  
Date Of Birth ..... 02/09/1961

Occupation .....	Outdoor
Date Of Driving Pass .....	04/06/1988
Driving experience .....	34 YEARS AND 8 MONTHS
Gender .....	Female
Mobile Number .....	(Phone) +65-81353456
Alt. Phone Number .....	-
Email Address .....	SAM@SKYWAY.COM.SG
Address .....	BLOCK 52 CASSIA CRESCENT #13-183
Address complement .....	-
Postcode .....	390052
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 - Change/cross lane
Weather Conditions .....	LIGHT RAIN
Road Surface .....	Wet

#### 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) .....	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 .....	JOEY
Gender .....	Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Geylang Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18008486999
Alt. Police Station Phone No .....	(Fax) +65-68486799
Police Station Address .....	1 Cassia Link Singapore 397618
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT ; T/20230209/2070

#### 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 .....	SMH5434C
Vehicle Manufacturer .....	Hyundai
Vehicle Model .....	Avante
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	QUEK LOO KENG
NRIC No .....	S6845390I
Contact Number .....	(Phone) +65-91385092
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

SKETCH PLAN

**IMPORTANT NOTICE**

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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' 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

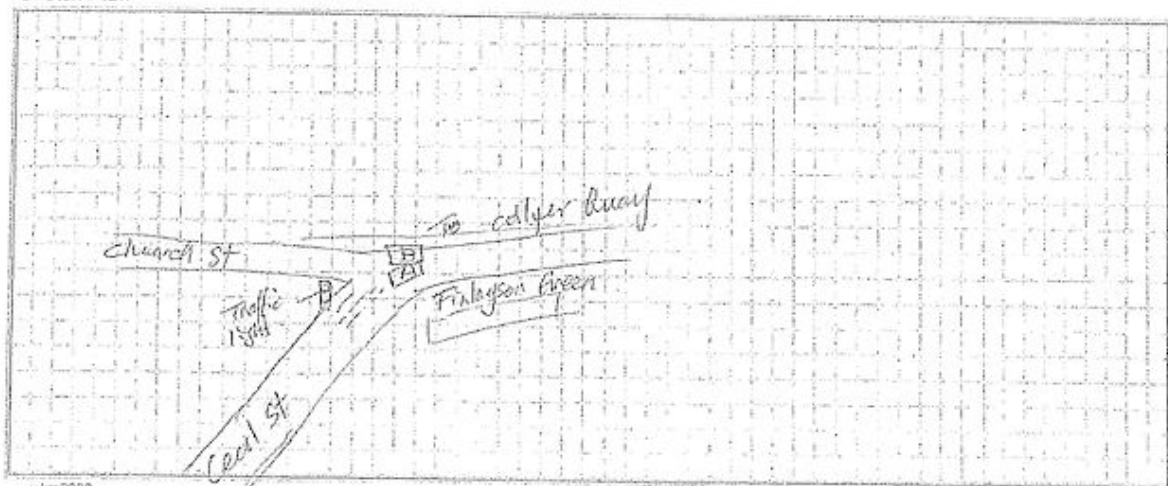
*[Signature]*

Actual Driver's Signature (if driver is not the policyholder) / Date & Time  
10/02/2023  
11:15am

*[Signature]*

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

**Sketch Plan**



vJun2022

Describe Circumstance of the Accident

On 08/02/2023 at about 1825 hrs, I was driving <sup>my</sup> car A along Cecil Street towards Collyer Quay on the 2<sup>nd</sup> lane in front of Finlayson Green traffic light junction and I was travelling at about 20km/hr as I just accelerated off from a traffic light junction. I then signaled left & slowly inch <sup>to the</sup> left into the 2<sup>nd</sup> lane when suddenly I felt a small impact. I then make a check and discovered that my car was side swiped with the vehicle car B on the 2<sup>nd</sup> lane causing some scratches on both our cars. There is no injury. The other driver Miss Quek informed me to settle the matter through the insurance company.

Declaration

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



Policyholder's Signature / Date & Time



Actual Driver's Signature (if driver is not the policyholder)  
/ Date & Time 08/02/2023  
11:50am



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



## INDIA INTERNATIONAL INSURANCE PTE LTD

Co. Reg. No. 198703792k | GST Reg. No. MZ-0078006-X  
 64 | Cecil Street | #04 | #05 | #06-02 | IOB Building | Singapore 049711  
 Office (65) 63476100 Email insure@iii.com.sg  
 Fax (65) 62244174 Website www.iii.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.

<b>CERTIFICATE NO.:</b> D21MFL0009917_01		<b>COVER:</b> Third Party Only
<b>1. Index Mark and Registration Number of Vehicle</b>	: SMN5985Y	
Chassis No	: GP72006283	
<b>2. Name of Policyholder</b>	: FAVOURITE CAR RENTAL PTE. LTD	
<b>3. Effective date of Insurance</b>	: 06 Dec 2022	
<b>4. Expiry date of Insurance</b>	: 05 Dec 2023	
<b>5. Persons or Classes of Persons entitled to drive*</b>	<p>Any person who is driving on the Policyholder's order or with his/their 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>	
<b>6. Limitations as to use*</b>	<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><b>The Policy does not cover</b></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 : B000018/COMFORTDELGRO INSURANCE BROKERS PTE LTD          Date of Issue : 01/12/2022 10:44:17          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>		

letchmy/01/12/2022 10:44:17

01/12/2022 10:50:09

























**SINGAPORE  
POLICE FORCE**



T/20230209/2070

Police Station Of Origin:  
Geylang N.P.C  
1 Cassia Link SINGAPORE 397618  
Tel No: 1800-8486999

1 of 3  
Report No. T/20230209/2070

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 09/02/2023 17:19	Vide Report No.:	Station Diary No.: 130
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**Informant's Particulars**

Name of Informant: PANG TERESA			Address: APT BLK 52 CASSIA CRESCENT #13-183 SINGAPORE 390052	
ID Type / ID No.: NRIC NO / S1496502E			Contact No.:	Mobile: 81353456
Nationality: SINGAPORE CITIZEN			Home/Office:	
			Email:	
Sex: Female	Age: 61	Date of Birth: 02/09/1961	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: PRIVATE CAR HIRE DRIVER			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: 08/02/2023 18:25	Type of Location: Y-Junction
Location:  CECIL STREET				
Weather: Raining		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction			Anyone conveyed by ambulance: No	

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SMH5434C	Car				Slightly Damaged	0
SMN5985Y	Car				Slightly Damaged	3

**Details of Person Involved**

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



**SINGAPORE  
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T/20230209/2070

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Tel No: 1800-8486999

2 of 3

Report No. T/20230209/2070

**CONTINUATION OF REPORT**

<b>Driver</b>			
Name	QUEK LOO KENG		ID No. S68453901
Related Vehicle	SMH5434C (Car)		Contact No. 91385092
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
<b>Driver</b>			
Name	PANG TERESA		ID No. S1496502E
Related Vehicle	SMN5985Y (Car)		Contact No. 81353456
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

**Brief Details.**

On 08.02.2023 at about 1825hrs, I was driving along Cecil Street towards Collyer Quay on the 3rd lane and was travelling at about 20km/hr as I just accelerated off from a traffic light junction. I then signaled left and slowly inch to the left into the 2nd lane when suddenly I felt an impact. I then make a check and discovered that my car side swiped onto the vehicle on the 2nd lane causing some scratches on both our vehicles. The incident happened in front of Finlayson Green. There is no injury. The other driver informed to settle the matter through the insurance company. This is the first time that such an incident happened to me.



**SINGAPORE  
POLICE FORCE**



T/20230209/2070

Police Station Of Origin:  
Geylang N.P.C  
1 Cassia Link SINGAPORE 397618  
Tel No: 1800-8486999

3 of 3

Report No. T/20230209/2070

**CONTINUATION OF REPORT**

**Sketch Plan**

Informant is not able to provide sketch plan

**IMPORTANT:** Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature of Officer Recording The Report: G / SR STAFF SGT RUZIANA BTE MUHAMMAD RUDY	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 09/02/2023 17:19
Officer In Charge Of Case: TP / GIA / SI ANG YI TING, STEPHANIE Contact No.: 65476414	Classification Of Case:

NP168



