

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	24/02/2023 13:51 (SGT)
Reported by	Driver
Date of Accident	23/02/2023 18:45 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	ECP(CHANGI) AFTER MARINE PARADE EXIT. LANE 1
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMP7228B
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	LAY AUTO LEASING PTE LTD
Company Reg No	201310521C
Email Address	FIONA@LAYAUTO.COM
Mobile Phone No	(Phone) +65-87973443
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	COROLLA ALTIS
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	1600

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5126325143

DRIVER

Name of Driver	TAN KHIM BOON
NRIC No	S1646997A
Date Of Birth	22/11/1964
Occupation	Outdoor

Date Of Driving Pass	03/06/2014
Driving experience	8 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-86194124
Alt. Phone Number	-
Email Address	KHIM.BOON2020@GMAIL.COM
Address	BLK 440A #06-701 BUKIT BATOK WEST AVENUE 8
Address complement	-
Postcode	651440
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	Clear
Road Surface	Dry

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?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
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	TADA PASSENGER
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 FOR ACCIDENT STATEMENT

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	SLC7474L
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	CASEY WONG KOK CHUN
NRIC No	S9072309Z
Contact Number	(Phone) +65-87207375
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SHC8553H
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	TOH KENG PENG
NRIC No	S1438365D
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	2

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	TADA PASSENGER
Gender	Female
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	30
Injuries Sustained	-
Injured person in which vehicle?	SMP7228B
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	Yes

INJURED 2

Name of injured person	TAN KHIM BOON
Gender	Male
Phone No	(Phone) +65-86194124
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	58
Injuries Sustained	MEDICAL LEAVE FROM 24022023 TO 02032023 SUFFERED INJURIES TO BACK AND NECK AND LEFT LEG
Injured person in which vehicle?	SMP7228B
Were seat belts worn?	No
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

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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.



24/2/23
1330HRS

[Signature]

24/2/23
1330HRS

[Signature]

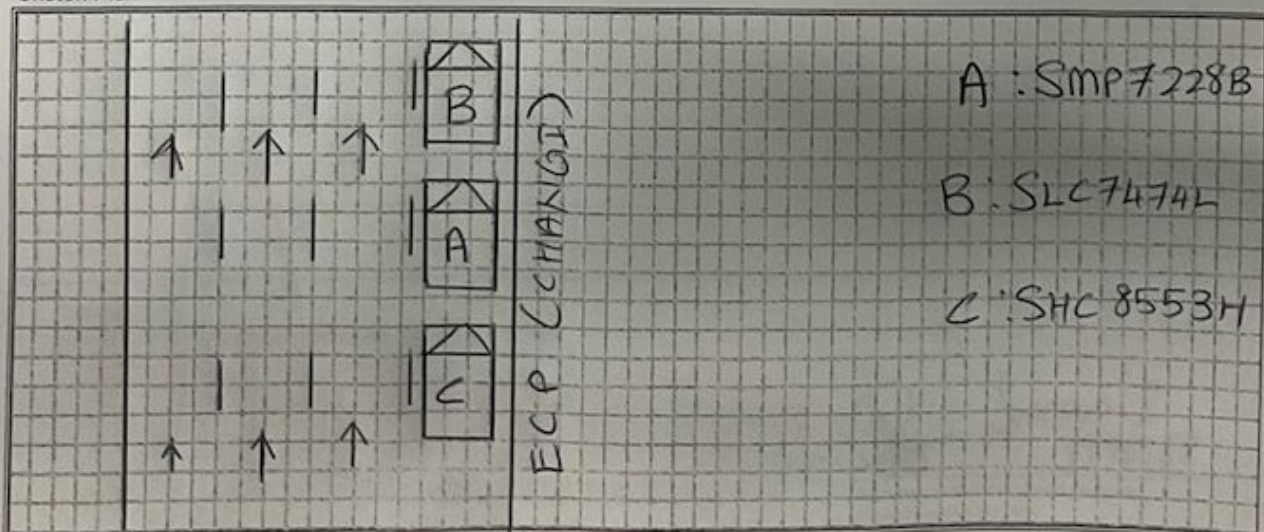
Simon S
990968

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 GEARS FOR ACCIDENT STATEMENT.

Declaration

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



Policyholder's Signature / Date & Time

X

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

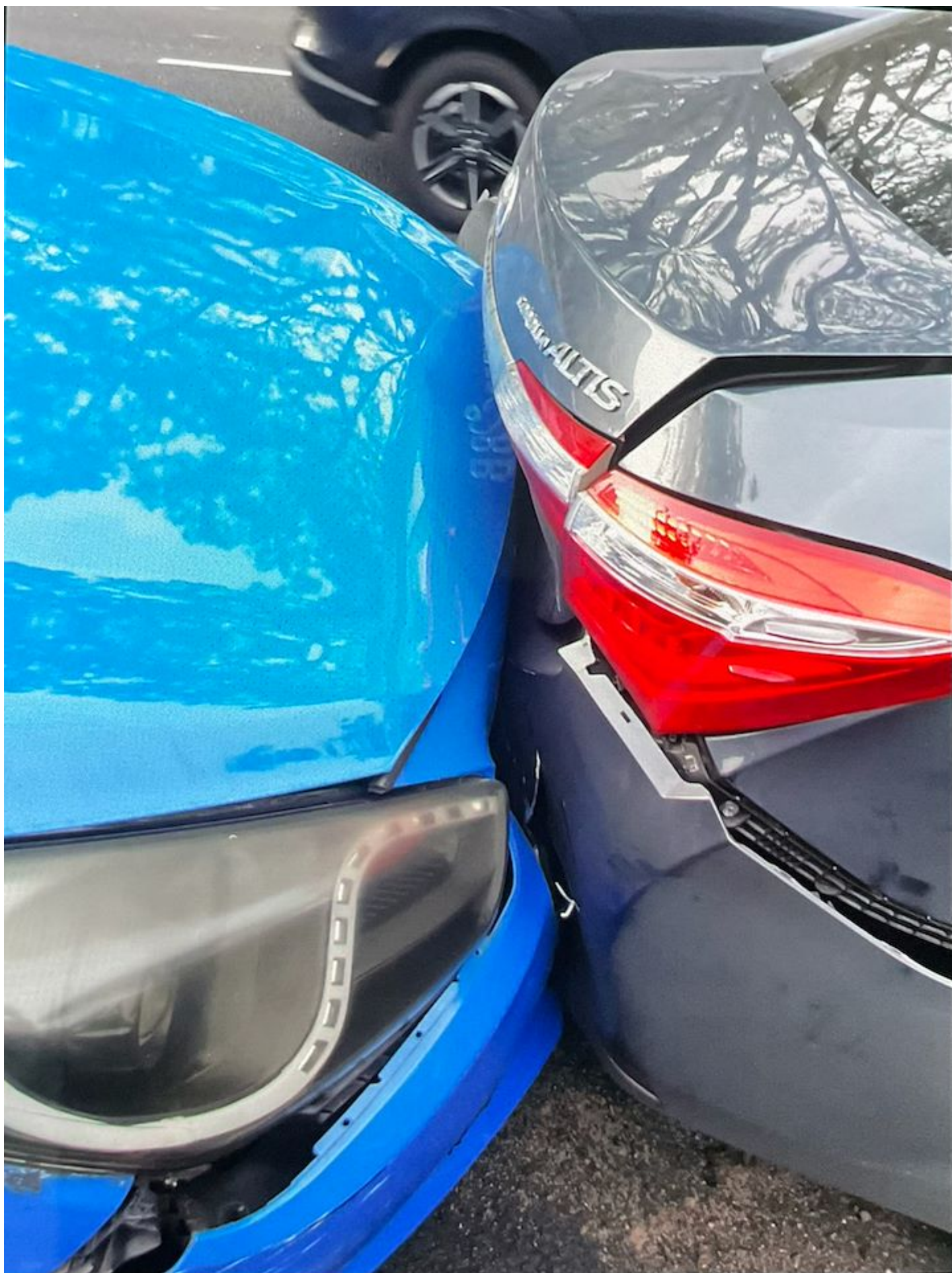
24/2/23
1330HRS

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S990968

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



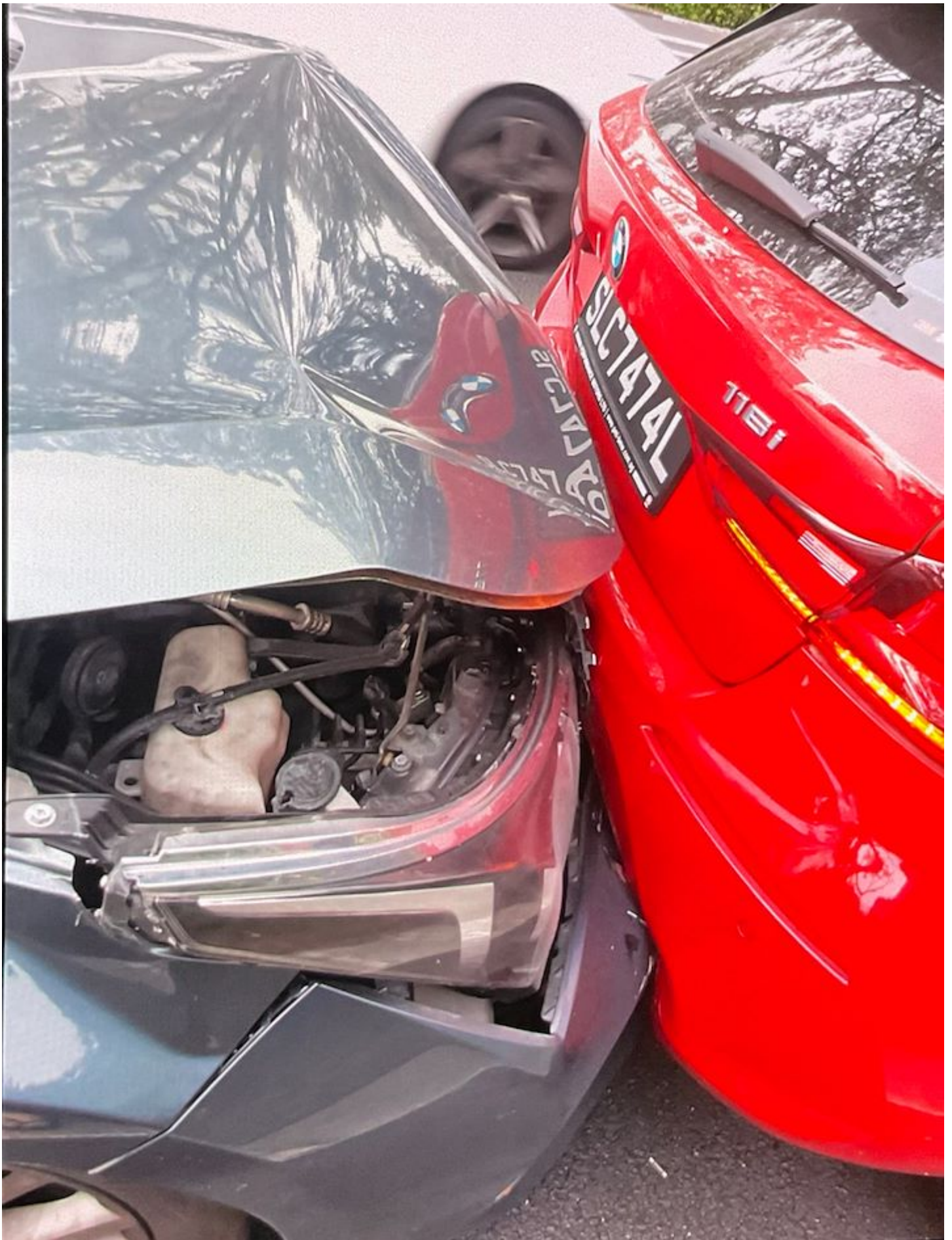


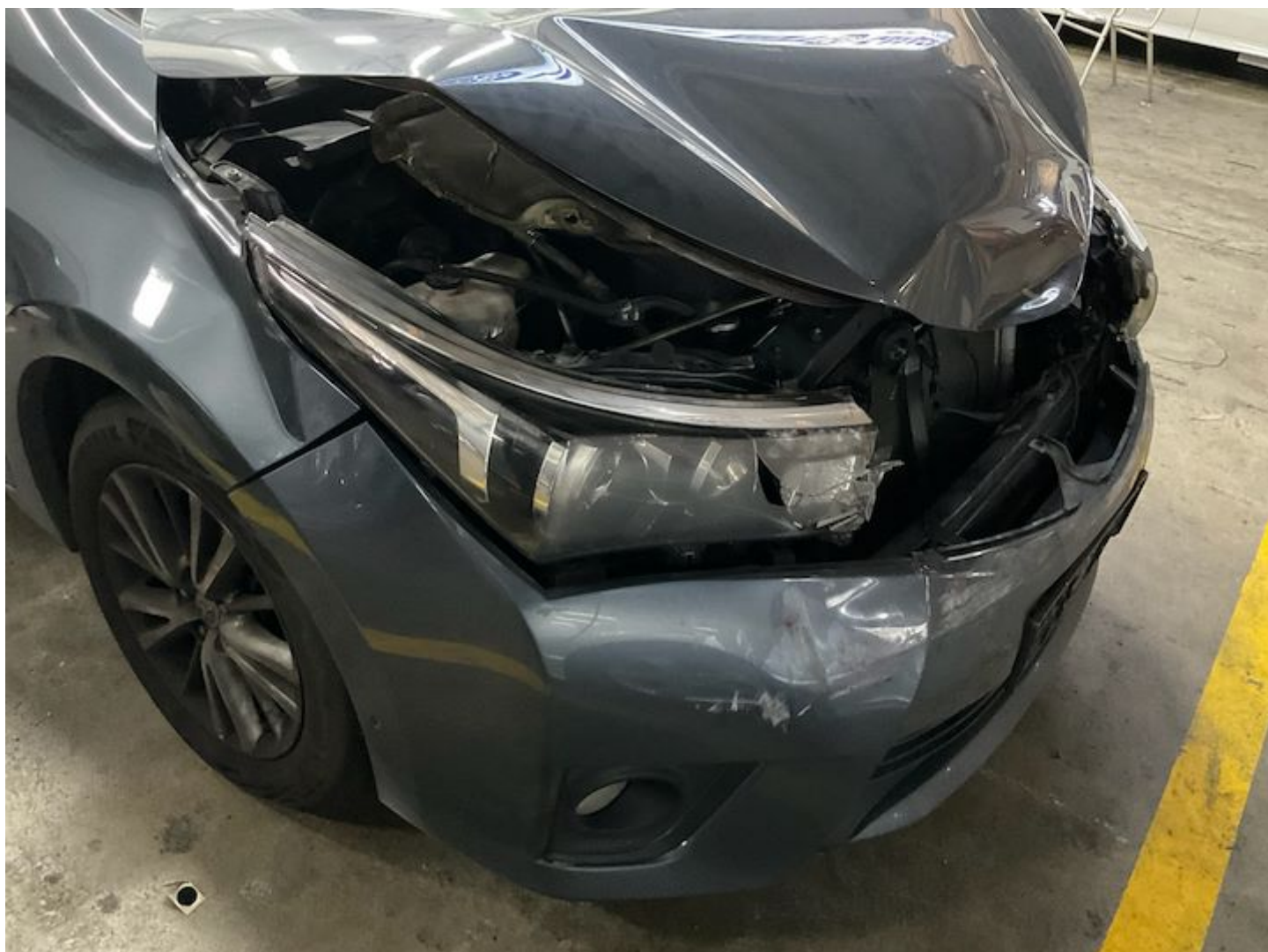


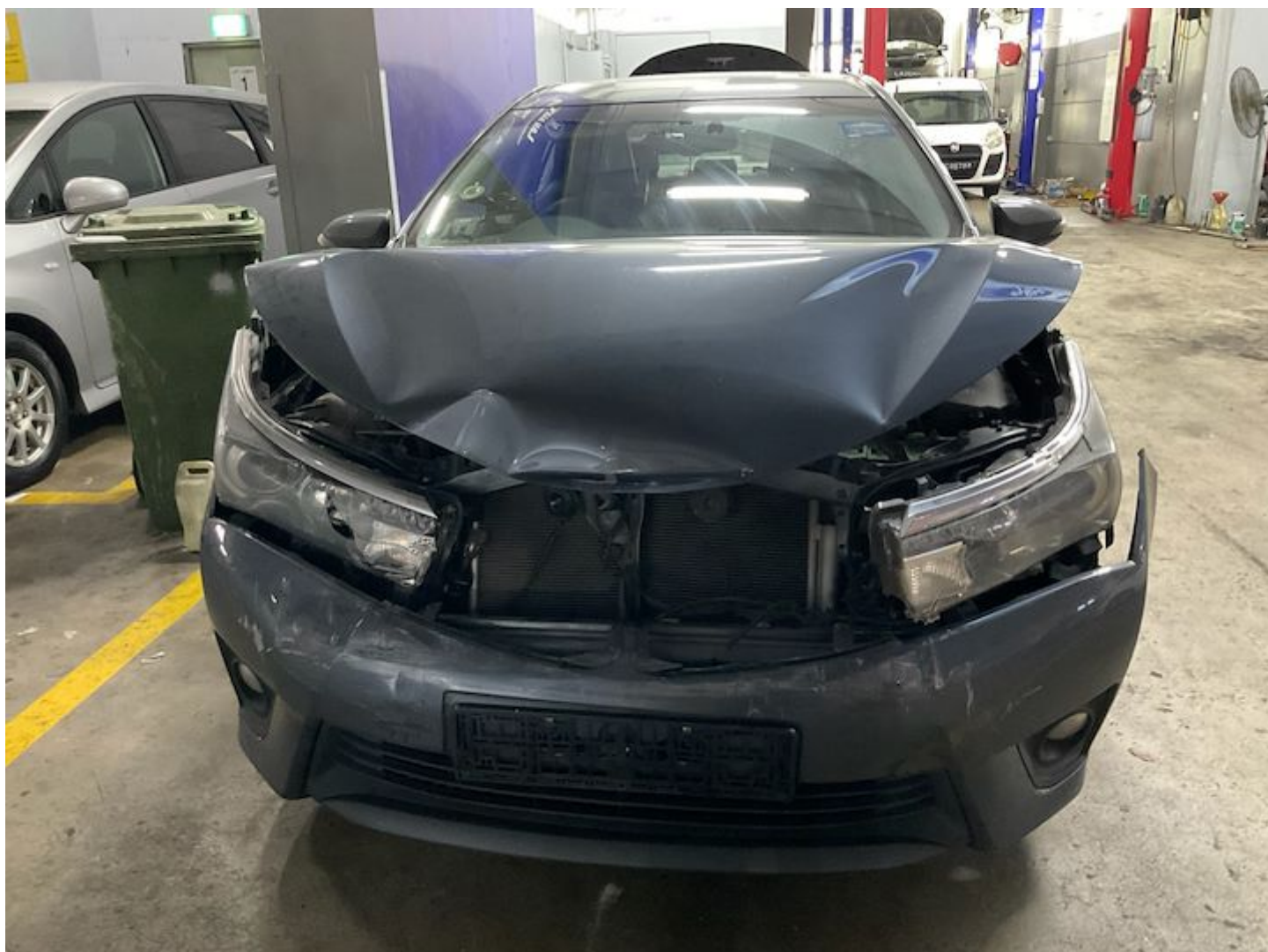








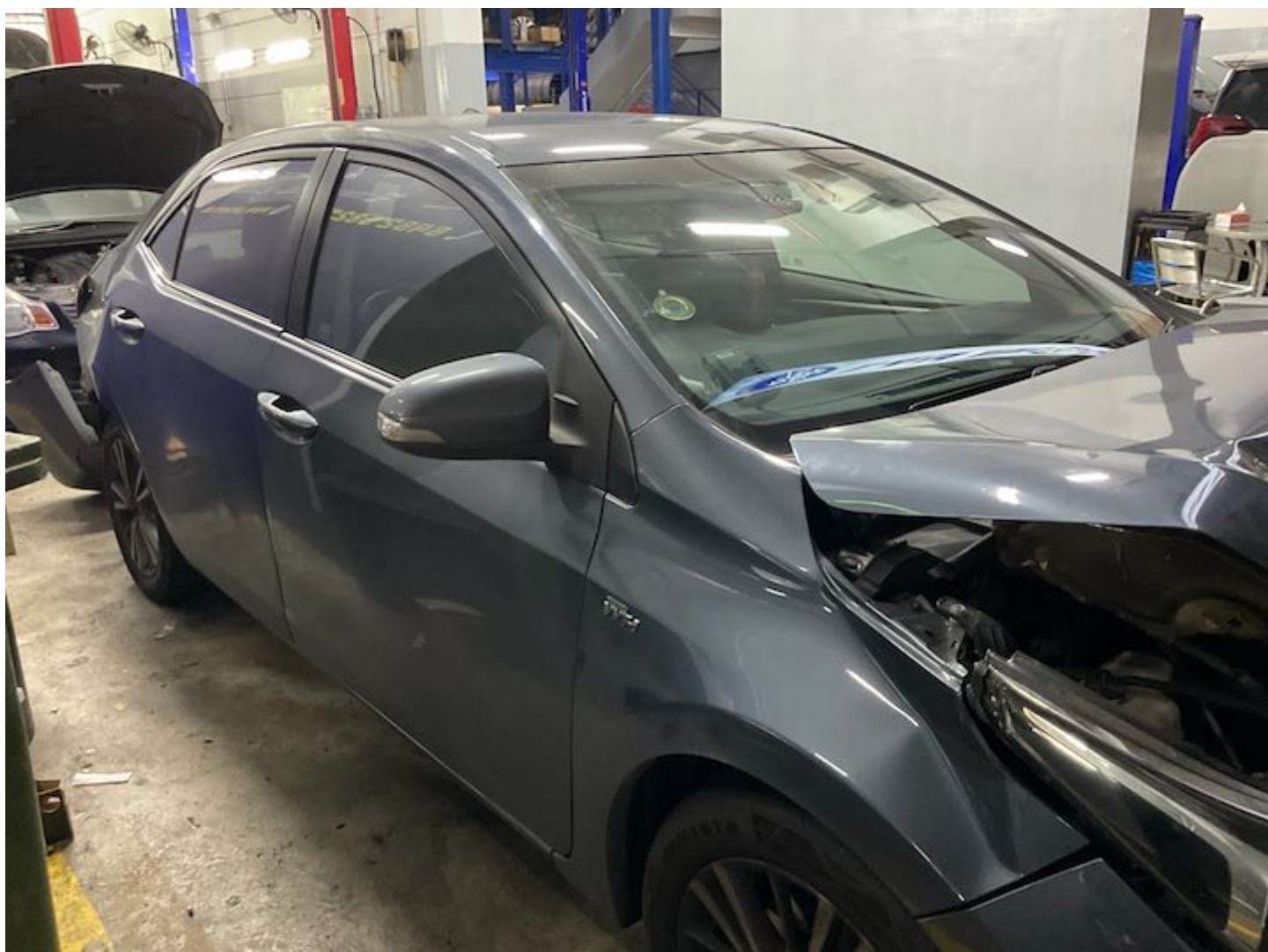














**SINGAPORE
POLICE FORCE**



T/20230224/7026

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

1 of 3

Report No. T/20230224/7026

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/02/2023 13:05		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: TAN KHIM BOON			Address: 440A BUKIT BATOK WEST AVENUE 8 #06-701 SINGAPORE 651440		
ID Type / ID No.: NRIC NO / S1646997A			Contact No.: Home/Office: Mobile: 86194124		
Nationality: SINGAPORE CITIZEN			Email: khim.boon2020@gmail.com		
Sex: Male	Age: 58	Date of Birth: 22/11/1964	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation:			Driving Licence Information: Class: 3		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 23/02/2023 18:45	Type of Location: Straight Road
Location: EAST COAST PARKWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 60 Km/h
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SHC8553H	Car	HYUNDAI	I40		Seriously Damaged	2
SLC7474L	Car	BMW	BMW	Red	Seriously Damaged	1
SMP7228B	Car					0



**SINGAPORE
POLICE FORCE**



T/20230224/7026

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

2 of 3

Report No. T/20230224/7026

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TAN KHIM BOON	ID No.	S1646997A
Related Vehicle	SMP7228B (Car)	Contact No.	86194124
Hospital/Clinic	NG TENG FONG GENERAL HOSPITAL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	23/02/2023	Date	24/02/2023
No. of Days granted Medical Leave	07	Degree of	Slight

Brief Details.

INFRONT VEHICLE A (SLC7474L) EMERGENCY JAM BRAKE AND CUASE ME TO EMERGENCY JAM BRAKE WHILE I WAS DRIVING IN LANE 1. I WAS UNABLE TO STOP IN TIME AND HIT ONTO VEHLCE A (SLC7474L) REAR PORTION . A TAXI VEHLCE B (SHC8553H) FROM BEHIND ALSO CANNOT STOP IN TIME AND BANG INTO MY REAR PORTION , DUE TO THE BAD IMPACT FROM THE REAR AND CUASED TO BANG INTO THE FRONT VEHLCE A (SLC7474L) REAR PORTION AGAIN .

**SINGAPORE
POLICE FORCE**

T/20230224/7026

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

3 of 3

Report No, T/20230224/7026

CONTINUATION OF REPORTSketch 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 /
NUR HAFIZAH BINTE NORIZAN
Contact No.: 96189347

NP168

Signature Of Informant:

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

Date/Time:
24/02/2023 13:05

Classification Of Case:

