

NATIONAL Assessment Centre Services. (part 1) (2004-05)

## 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	06/03/2023 18:41 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	06/03/2023 14:08 (SGT)
Exact Location of Accident	Upper Changi Rd E, Singapore
Additional Location Information	JUNCTION WITH XILIN AVENUE
Country/State of Loss	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMF3171J
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#### INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TANG GENG SHAO, JASON
NRIC No	SXXXX868C
Email Address	jason_2152@hotmail.com
Mobile Phone No	(Phone) +65-81822516
Alternative Phone No	-

#### VEHICLE PARTICULARS

Manufacturer	Honda
Model	Fit
Variant	-
Exact purpose for which vehicle was being used at time of accident	Employment
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	1317

#### INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMHCSNW00017412200

#### DRIVER

Name of Driver	TANG GENG SHAO, JASON
NRIC No	SXXXX868C
Date Of Birth	12/12/1991
Occupation	Outdoor

Date Of Driving Pass .....	17/01/2012
Driving experience .....	11 YEARS AND 2 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-81822516
Alt. Phone Number .....	-
Email Address .....	jason_2152@hotmail.com
Address .....	BLK 662 BUFFALO ROAD #25-16
Address complement .....	-
Postcode .....	210662
Is the driver the policyholder? .....	Yes
If No, Relationship of the Driver with the Insured .....	-
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) .....	1
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 .....	-

#### 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

#### PLEASE REFER TO SKETCH PLAN

#### ATTACHMENT(S)

Are accident photos available for attachment? .....	Yes
Was there any video captured by Car Camera? .....	Yes
Reasons for not uploading a video of the accident .....	WITH OWNER

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number .....	GBA6292E
Vehicle Manufacturer .....	-
Vehicle Model .....	-

Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Commercial vehicle
Name of Driver .....	-
Contact Number .....	-
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	China Taiping Insurance (Singapore) Pte. Ltd.
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

#### INJURED PERSONS DETAILS

##### INJURED 1

Name of injured person .....	TANG GENG SHAO, JASON
Gender .....	Male
Phone No .....	(Phone) +65-81822516
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	SLIGHT INJURY
Injured person in which vehicle? .....	SMF3171J
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No

IMPORTANT NOTICE

- (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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

Upper Channel  
KOL EAS

(A) SMF 3171J  
(B) GRA 6292E



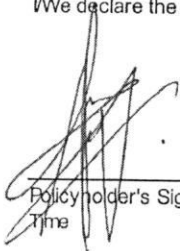
Describe Circumstances of the Accident

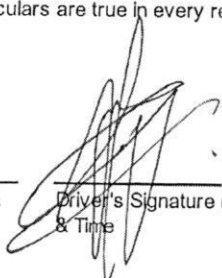
On 06/03/2023 at about 1408hrs, I was travelling along Upper Chantry Rd east Junction of Xilin Avenue. Upon reaching the traffic junction, the traffic turn red. I slow down and stop. While waiting, all of a sudden, I felt an impact from the rear. Then I realised a white SBA 6292E had collided onto my rear.

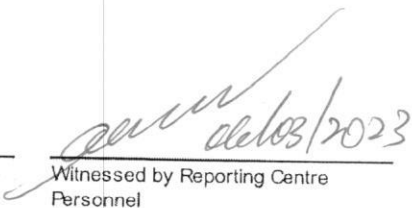
Police Report 7/20230306/2096

Declaration

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



# SINGAPORE POLICE FORCE



T/20230306/7096

1 of 3

Report No. T/20230306/7096

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

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 06/03/2023 18:27		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: TANG GENG SHAO, JASON		Address: 662 BUFFALO ROAD #25-16 SINGAPORE 210662			
ID Type / ID No.: NRIC NO / S9145868C		Contact No.: Home/Office:		Mobile: 81822516	
Nationality: SINGAPORE CITIZEN		Email: JASON_2152@HOTMAIL.COM			
Sex: Male	Age: 31	Date of Birth: 12/12/1991	Type of Informant: Driver		
Race: Chinese		Language: English		Institution / School Name:	
Occupation:		Driving Licence Information: Class:		Date of Expiry:	

<b>General Information of the Accident</b>				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 06/03/2023 14:05	Type of Location: X-Junction
Location:  CHANGI SOUTH LANE				
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

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
GBA6292E	Van					0
SMF3171J	Car	HONDA	FIT+HYBRID +1.5+AUTO	Blue		0

<b>Details of Vehicle Insurance</b>				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date



**SINGAPORE  
POLICE FORCE**



T/20230306/7096

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

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Report No. T/20230306/7096

**CONTINUATION OF REPORT**

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMF3171J	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMHCSNW000174 12200	01/11/2022	31/10/2023

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TANG GENG SHAO, JASON		ID No. S9145868C
Related Vehicle	SMF3171J (Car)		Contact No. 81822516
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Class: NIL Date of Expiry: NIL
Date	NIL		Date NIL
No. of Days granted Medical Leave		03	Degree of Serious

Brief Details.

I was traveling along Upper Changi Road East junction of Xilin Ave. Upon reaching the traffic junction, the traffic turned red. I slowed down and came to a stop. Suddenly, I felt an impact from the rear. I alighted and realized that I was rear ended by GBA6292E.

I am suffering from neck, back and body ache. I visited Unihealth 24 Hr Clinic (Toa Payoh) and received 3 days MC.





**SINGAPORE  
POLICE FORCE**



T/20230306/7096

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

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Report No. T/20230306/7096

**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 /  
TAY CHUN KEEN  
Contact No.: 65476436

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

Date/Time:  
06/03/2023 18:27

Classification Of Case:

Date of Accident : 06-03-2023 Accident Time: 1409hrs. (24-HR-Format)  
Accident Place : Upper Charlotte Rd at X Xilin Ave  
Vehicle. No. (Car Plate No.) : SMF 3171J Make/Model: Honda R+ Hybrid 1.5 Auto  
Insurance Company : China Policy No: \_\_\_\_\_  
Owner or Company Name / IC No. : Tang Gen Shao, Jason - S9145868C  
Owner or Company Contact No. : \_\_\_\_\_ Owner's Hp \_\_\_\_\_ Company Tel \_\_\_\_\_  
DRIVER'S Name / IC No. : same as above  
DRIVER'S Date Of Birth : 12.12.1991 DRIVER'S License Pass Date : 17.01.2012  
Relationship of Owner & Driver : Spouse \ Parents \ Children \ Sibling \ Employee \ Others: owner  
DRIVER'S Address : 662 Buffalo Rd #25-16 S (210662)  
DRIVER'S Contact No./ Alt No. : 1) \_\_\_\_\_ 2) 81822516  
DRIVER'S Occupation : INDOOR \ OUTDOOR (e.g. working inside or outside office)  
Email Address : Jason\_2152@hotmail.com  
Weather & Road Surface : CLEAR ☒ DRY \ RAINING & WET \ AFTER RAIN & WET  
Reporting Type : Reporting Only \ Claim ☒ Other Party \ Claim Own Insurance  
Number of Passengers (Including Driver): Driver only  
Was there any video Captured by car camera: YES ☒ No  
Exact purpose for which vehicle was being used at the time of accident: Private use ☒ Work purpose  
Any Injury (If YES, Pls state): Yes

Other Party Driver's Particular (if any)

Vehicle. No: 6BA 6292E (China)	Vehicle. No: _____
Vehicle Make/Model: _____	Vehicle Make/Model: _____
Name Driver: _____	Name Driver: _____
IC No. Driver/Contact: _____	IC No. Driver/Contact: _____

\* NEW - Passenger's name & gender:



Motor Hire Car

MZ406L/B

N SN

AN0613A

Cov. Type:C

### 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)

CERTIFICATE No.

DMHCSNW00017412200

Engine No.: LEB1435460

Cha. No.:GP51329475

1. Index Mark and Registration  
Number of Vehicle

SMF3171J

AUTOSAFE

=====

2. Name of Policy Holder

TANG GENG SHAO, JASON

3. Effective date of the Commencement of  
Insurance for the purposes of the Regulations,  
Ordinance or Enactment

01/11/2022  
(00:00:00)

Excess Sect I . S\$1,250.00

Excess Sect. I (Outside Singapore) S\$2,500.00

Excess Sect. II S\$1,250.00

4. Date of Expiry of Insurance

31/10/2023

Excess Sect.II (Outside Singapore). S\$2,500.00

EX ON WINDSCREEN . S\$100.00

5. Persons or Classes of Persons entitled to drive\*

As per Named Driver(s) stated below.

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.

TANG GENG SHAO, JASON

6. Limitations as to use:\*

- (1) Use for the carriage of passengers or goods in connection with the Policyholder's business.  
(2) Use for social domestic pleasure purposes and business purposes of any person to whom the vehicle is hired.

The Policy does not cover

- (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.

HIRE PURCHASE CO. : MAYBANK SINGAPORE LIMITED

\* 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.

**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).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: AUTO WORLD PTE LTD  
Authorised Officer

Authorised Signatory

> Back to OneMotoring

## Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars	
Owner ID Type:	Singapore NRIC
Owner ID:	868C
Vehicle Details	
Vehicle No.:	SMF3171J
Vehicle to be Exported:	No
Intended Deregistration Date:	08 Apr 2023
Vehicle Make:	HONDA
Vehicle Model:	FIT HYBRID 1.5 AUTO
Primary Colour:	Blue
Manufacturing Year:	2018
Engine No.:	LEB1435460
Chassis No.:	GP51329475
Maximum Power Output:	101.0 kW (135 bhp)
Open Market Value:	\$19,167.00
Original Registration Date:	01 Nov 2018
First Registration Date:	01 Nov 2018
Transfer Count:	1
Actual ARF Paid:	\$9,167.00
Intended PARF Rebate Details	
PARF Eligibility:	Yes
PARF Eligibility Expiry Date:	31 Oct 2028
PARF Rebate Amount:	\$6,875.00
Intended COE Rebate Details	
COE Expiry Date:	31 Oct 2028
COE Category:	B - Car above 1600cc or 97kW (130bhp)
COE Period(Years):	10
QP Paid:	\$31,301.00
COE Rebate Amount:	\$17,409.00
<b>Total Rebate Amount:</b>	<b>\$24,284.00</b>

The information contained herein is correct as at 06 Mar 2023

OK

**IMPORTANT NOTE:** Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

## ADDENDUM

### (A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : SN0823360008 Vehicle Registration No : SMF 3171J  
Name (as shown in NRIC) : TANG GENG SHAO, JASON NRIC/FIN/Passport No : S9145868C  
(\*Vehicle Driver / Vehicle Owner) (\*) Please delete as appropriate  
Address : 662 BUFFALO ROAD #25-16 Singapore ( 210662  
Contact (Tel) : \_\_\_\_\_ Mobile No. : 8182 2516  
Email Address : JASON\_2152@HOTMAIL.COM  
Date of Accident : 06.03.2023 Time of Accident : 14:08hrs  
Place of Accident : UPPER CHANGI ROAD EAST X XILIN AVENUE  
Insurance Company : CHINA TAIPING INSURANCE (SINGAPORE) PTE LTD

### (B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

ATTACHED POLICE REPORT NUMBER: T/20230306/7096

TANG GENG SHAO, JASON

Policyholder / Driver's Signature  
Date: 07.03.2023

07/03/2023  
Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:  
Date: