

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 Authorised 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 Report	30/08/2019 18:32
Date Of Accident	30/08/2019 08:10
Exact Location Of Accident	PIE (CHANGI) BEFORE TOA PAYOH LORONG 6 EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJH3334G
Insured/Policyholder	
Name Of Registered Owner	ZAW MYO TUN
NRIC No	S7664718F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81818437
Alternative Phone No	OFFICE-81818437

Vehicle Particulars

Manufacturer	TOYOTA
Model	AXIO-1.5 (A)
Exact Purpose for which vehicle was being used at time of accident	
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPPHQ19-004788
Cover Note Number	

Driver

Name of Driver	ZAW MYO TUN
NRIC No	S7664718F
Date Of Birth	01/07/1976
Occupation	INDOOR
Date Of Driving Pass	03/05/2007
Driving Experience	12 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81818437
Fax Number	
Contact Number	OFFICE-81818437
EEmail Address	NOEMAIL

Address	BLK 288C BUKIT BATOK STREET 25 #02-20
Postcode	652288
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	JTF3011 (PRIVATE CAR)
Number of vehicles (including own vehicle) involved in the accident	4
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN AND POLICE REPORT

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	JTF3011
Vehicle Make/Model/Colour	TOYOTA VIOS
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAN TIAN FOOK
NRIC/Passport Number	870303015189
Contact Number	91122218
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SKS3755E
Vehicle Make/Model/Colour HONDA VEZEL
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SHA6045G
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category TAXI
Name of Driver
NRIC/Passport Number
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name ZAW MYO TUN
Approximate Age
Injuries Sustain CHEST PAIN
Injured person in which vehicle? SJH3334G
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

SKETCH PLAN

IMPORTANT NOTICE

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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 lodging 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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Law

Policyholder's Signature

Date & Time:

30/8/19 @ 2.17pm

Driver's Signature

(If driver is not the policyholder)

Date & Time:

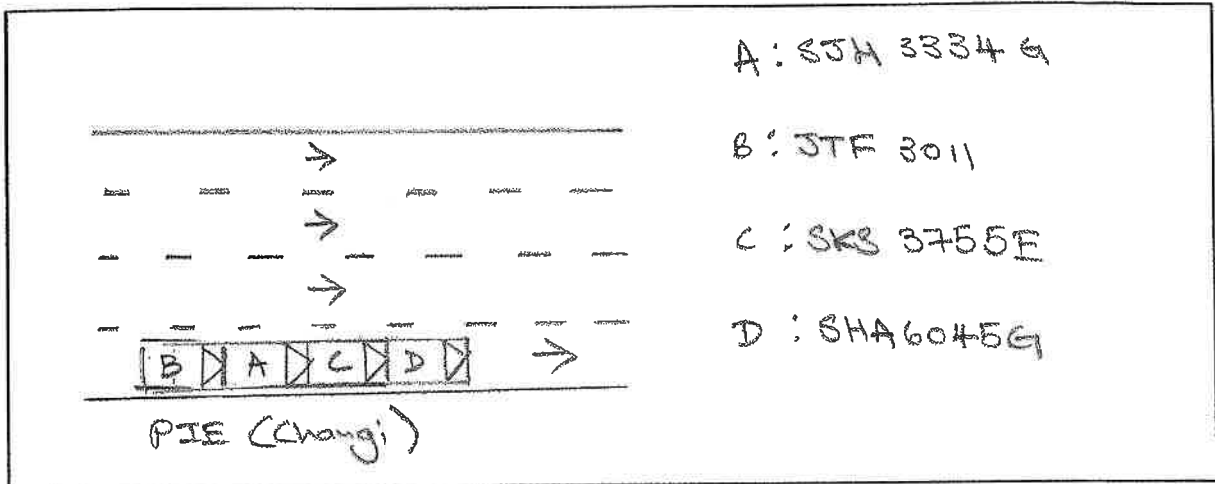
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was driving vehicle A along PIE (Changi) before Toa Payoh Lor 6 exit in lane 1. As the vehicles in front of me stopped. I slowed down & stopped. After a few seconds, vehicle B without slowing down collided into the rear of my vehicle. Due to the heavy impact my vehicle surged forward and collided into vehicle C. I alighted and saw vehicle D in front of vehicle C. Video footage is available.

* TP = other workshop

DECLARATION

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

Law
Policyholder's Signature
Date & Time: 30/8/19 @ 2.17pm

Driver's Signature
(If driver is not the policyholder)

[Signature]
Reporting Centre Personnel's Signature
Name: [Circular Stamp: KIM HIN AUTO PTE LTD]



**SINGAPORE
POLICE FORCE**



T/20190830/2031

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

1 of 3

Report No. T/20190830/2031

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 30/08/2019 10:27		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: ZAW MYO TUN			Address: APT BLK 288C BUKIT BATOK STREET 25 #02-20 NATURE VIEW SINGAPORE 652288		
ID Type / ID No.: NRIC NO / S7664718F			Contact No.: Home/Office: Mobile: 81818437		
Nationality: MYANMAR			Email:		
Sex: Male	Age: 43	Date of Birth: 01/07/1976	Type of Informant: Driver		
Race:			Language:		Institution / School Name:
Occupation: OTHERS			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 30/08/2019 08:10	Type of Location:
Location: Along Road 1 PAN ISLAND EXPRESSWAY PIE TOWARDS CHANGI				
Weather: Raining		Road Surface:		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume: Moderate
Type of Collision:				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
JTF3011	Car					0
SJH3334G	Car	TOYOTA	COROLLA AXIO 1.5X A	Blue		0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJH3334G	EQ INSURANCE COMPANY LTD.	DMPPHQ19- 004788	31/07/2019	30/07/2020



**SINGAPORE
POLICE FORCE**



T/20190830/2031

2 of 3

Police Station Of Origin:

Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

Report No. T/20190830/2031

CONTINUATION OF REPORT

1. CAR IN
2. VEHICLE
3. PHOTO, MO

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver's Details			
Name	TAN TIAN FOOK	ID No.	870303015189
Related Vehicle	JTF3011 (Car)	Contact No.	NIL
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
Driver			
Name	ZAW MYO TUN	ID No.	S7664718F
Related Vehicle	SJH3334G (Car)	Contact No.	81818437
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

Brief Details.

ON THE ABOVE MENTIONED DATE AND TIME,

THE CAR IN FRONT OF MINE HAD STOPPED. THUS I ALSO STOPPED MY VEHICLE. SUDENLY, THE VEHICLE BEHIND COLLIDED INTO THE REAR OF MY VEHICLE. DUE TO THE FORCE OF THE IMPACT, MY VEHICLE ENDED UP COLLIDING WITH THE CAR THAT WAS IN FRONT OF ME. I MANAGED TO EXCHANGE PARTICULARS WITH THE OTHER DRIVER. AFTERWARDS I LEFT THE SCENE.

I HAVE PHOTOGRAPHS OF THE ACCIDENT IN MY PHONE.

THAT IS ALL



**SINGAPORE
POLICE FORCE**



T/20190830/2031

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

3 of 3
Report No. T/20190830/2031

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:
TP /
LEE CHEN EN

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIA /
Staff Sgt WONG SIEU LUI
Contact No.: 65476151

Authentication Stamp
NP168

Signature Of Informant:

Law

Date/Time:
30/08/2019 10:27

Classification Of Case:



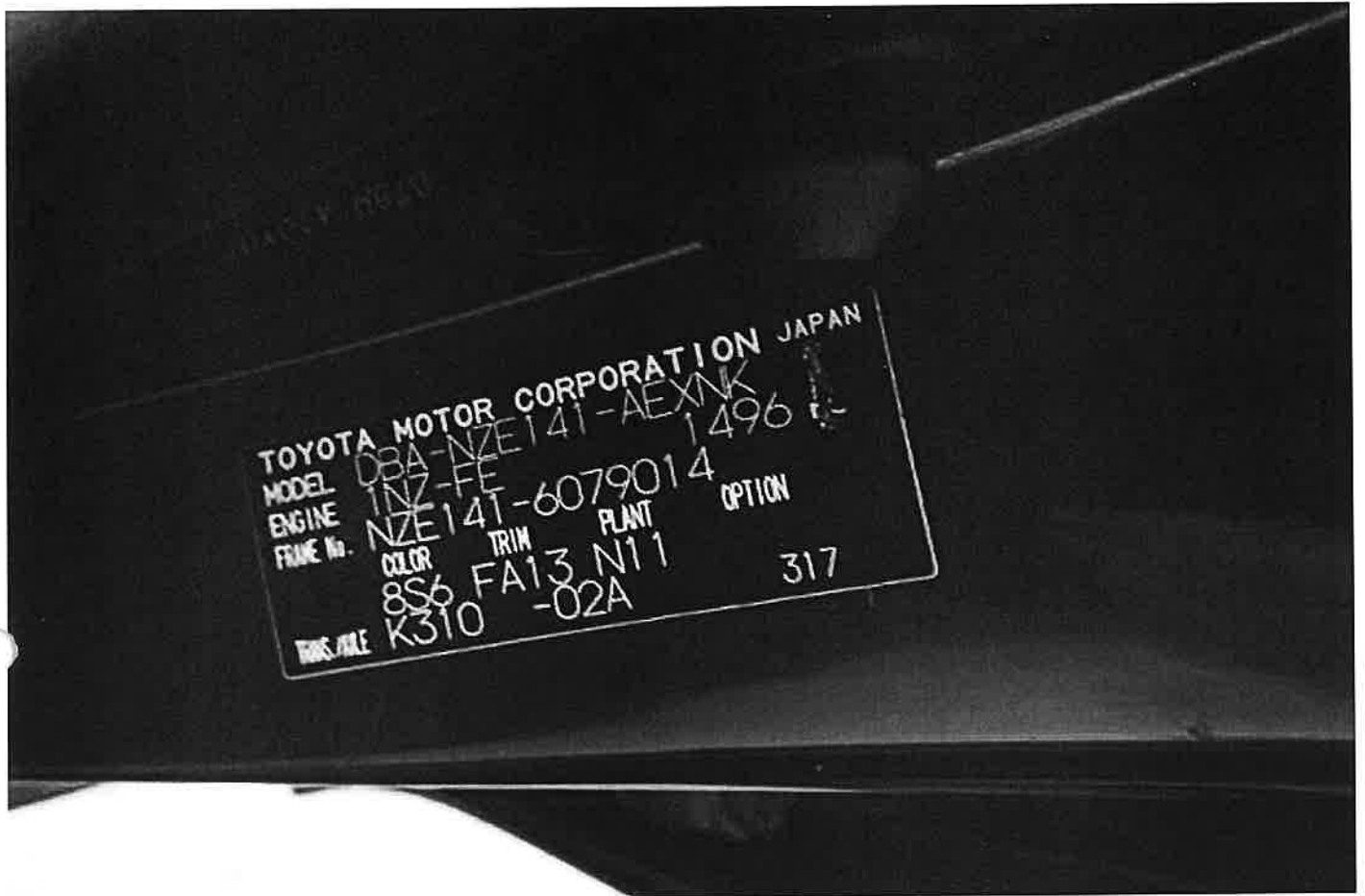
**SINGAPORE
POLICE FORCE**

Signature: *ah*

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Accident Photo



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