

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	23/03/2023 15:56 (SGT)
Reported by	Actual Driver
Date of Accident	22/03/2023 14:45 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC2986G
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Company Reg No	199303821R
Email Address	fleetsafety@cdgtaxi.com.sg
Mobile Phone No	(Phone) +65-97823445
Alternative Phone No	(Office) +65-65508768

VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	Ae ioniq
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	Taxi
Transmission	Auto
CC	1580

INSURANCE COMPANY

Name of Insurance Company	HSBC Life (Singapore) Pte. Ltd
Policy Number / Cover Note Number	VFX/P2419138

DRIVER

Name of Driver	SA'ADIAH BINTE RAFIL
NRIC No	S1540898G
Date Of Birth	29/05/1962
Occupation	Outdoor

Date Of Driving Pass	29/06/1982
Driving experience	40 YEARS AND 9 MONTHS
Gender	Female
Mobile Number	(Phone) +65-97823445
Alt. Phone Number	-
Email Address	fleetsafety@cdgtaxi.com.sg
Address	BLK 228 YISHUN STREET 21 # 04-486
Address complement	-
Postcode	760228
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	Raining
Road Surface	Wet

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)	3
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	MOHAMED ALI BIN HUMUM
Gender	Male

PASSENGER 2

Name	RAJUNAH BINTE MOHD YASSIN
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
T /20230323/7021

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
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Was there any video captured by Car Camera? Yes
 Reasons for not uploading a video of the accident FILE NOT SUITABLE

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLX7654Z
 Vehicle Manufacturer Hyundai
 Vehicle Model Elantra
 Vehicle Variant -
 Vehicle Colour -
 Vehicle Category Private hire
 Name of Driver TAN BENG THONG
 NRIC No S1353282F
 Contact Number -
 Address -
 Address complement -
 Postcode -
 Insurance Company Name -
 Nature Of Damage REAR
 Details of property damaged in accident -
 No. Of Passenger (Including Driver) -

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number GBK4128H
 Vehicle Manufacturer Toyota
 Vehicle Model Dyna
 Vehicle Variant -
 Vehicle Colour -
 Vehicle Category Commercial vehicle
 Name of Driver RANA SOHEL
 NRIC No G2599368W
 Contact Number -
 Address -
 Address complement -
 Postcode -
 Insurance Company Name -
 Nature Of Damage FRONT
 Details of property damaged in accident -
 No. Of Passenger (Including Driver) 2

INJURED PERSONS DETAILS

INJURED 1

Name of injured person SA'ADIAH BINTE RAFIL
 Gender Female
 Phone No (Phone) +65-97823445
 Address BLK 228 YISHUN STREET 21 # 04-486
 Address Complement -
 Post Code 760228
 Approximate Age Years Old 60
 Injuries Sustained -
 Injured person in which vehicle? SHC2986G
 Were seat belts worn? Yes
 Was this injured conveyed to hospital by ambulance? Yes

INJURED 2

Name of injured person MOHAMED ALI BIN HUMUM
 Gender Male
 Phone No -
 Address -
 Address Complement -
 Post Code -
 Approximate Age Years Old -

Injuries Sustained	-
Injured person in which vehicle?	SHC2986G
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	Yes

INJURED 3

Name of injured person	RAJUNAH BINTE MOHD YASSIN
Gender	Female
Phone No	(Phone) +65-96246722
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SHC2986G
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	Yes

SKETCH PLAN**IMPORTANT NOTICE**

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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.

**FLASH ACCIDENT
REPORTING OFFICER**
KYMI YONG



Policyholder's Signature /
Date & Time

Driver's Signature (If driver is not the policyholder) /
Date & Time 23.03.2023. 1440HRS

Witnessed by Reporting Centre
Personnel

Sketch Plan

A - SHC2986G	
B - SLX7654Z	
C - GBK4128H	

Describe Circumstances of the Accident

REFER TO POLICE REPORT
T /20230323/7021

Declaration

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



Policyholder's Signature /
Date & Time

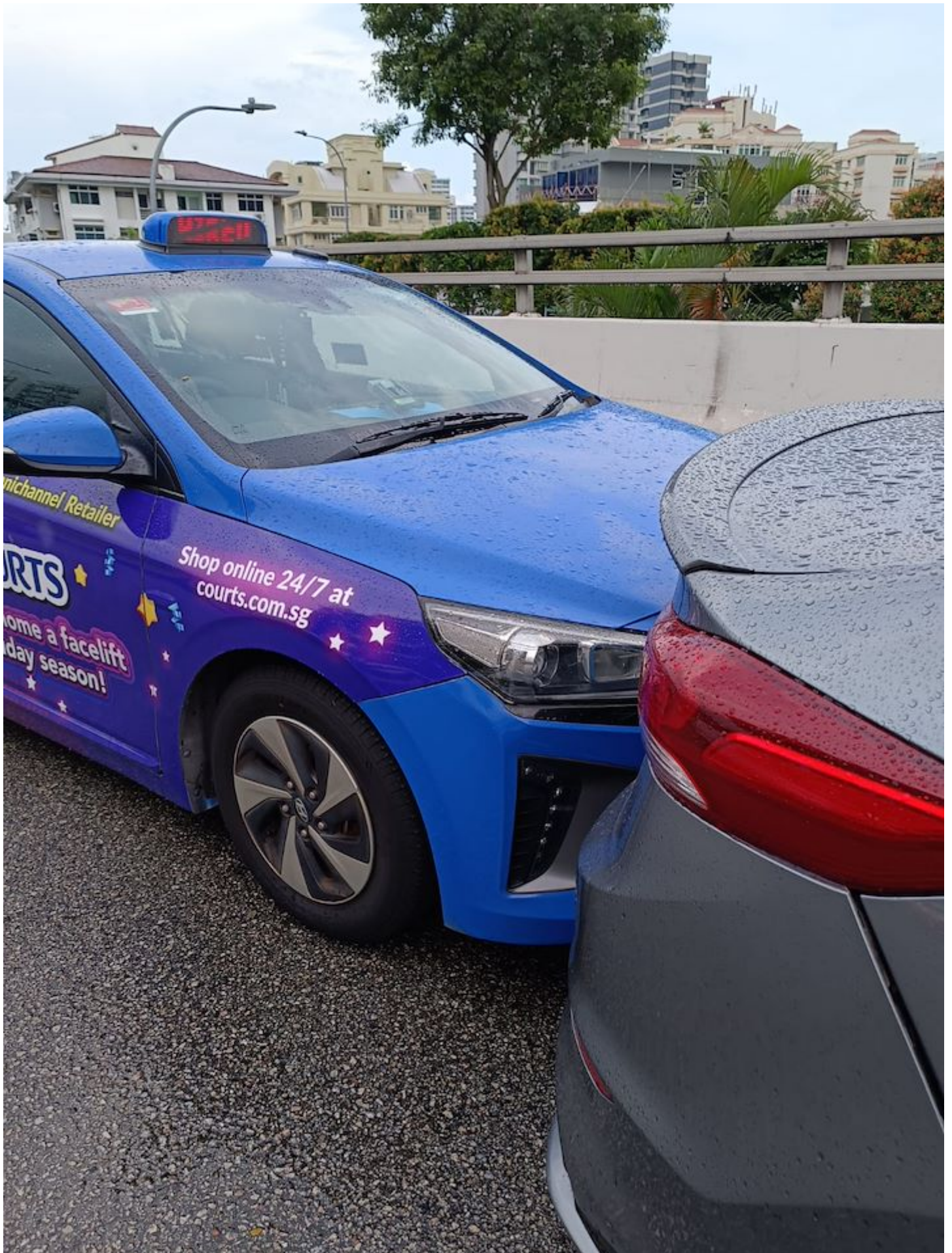
Driver's Signature (If driver is not the policyholder) /
Date & Time 23.03.2023. 1445RS

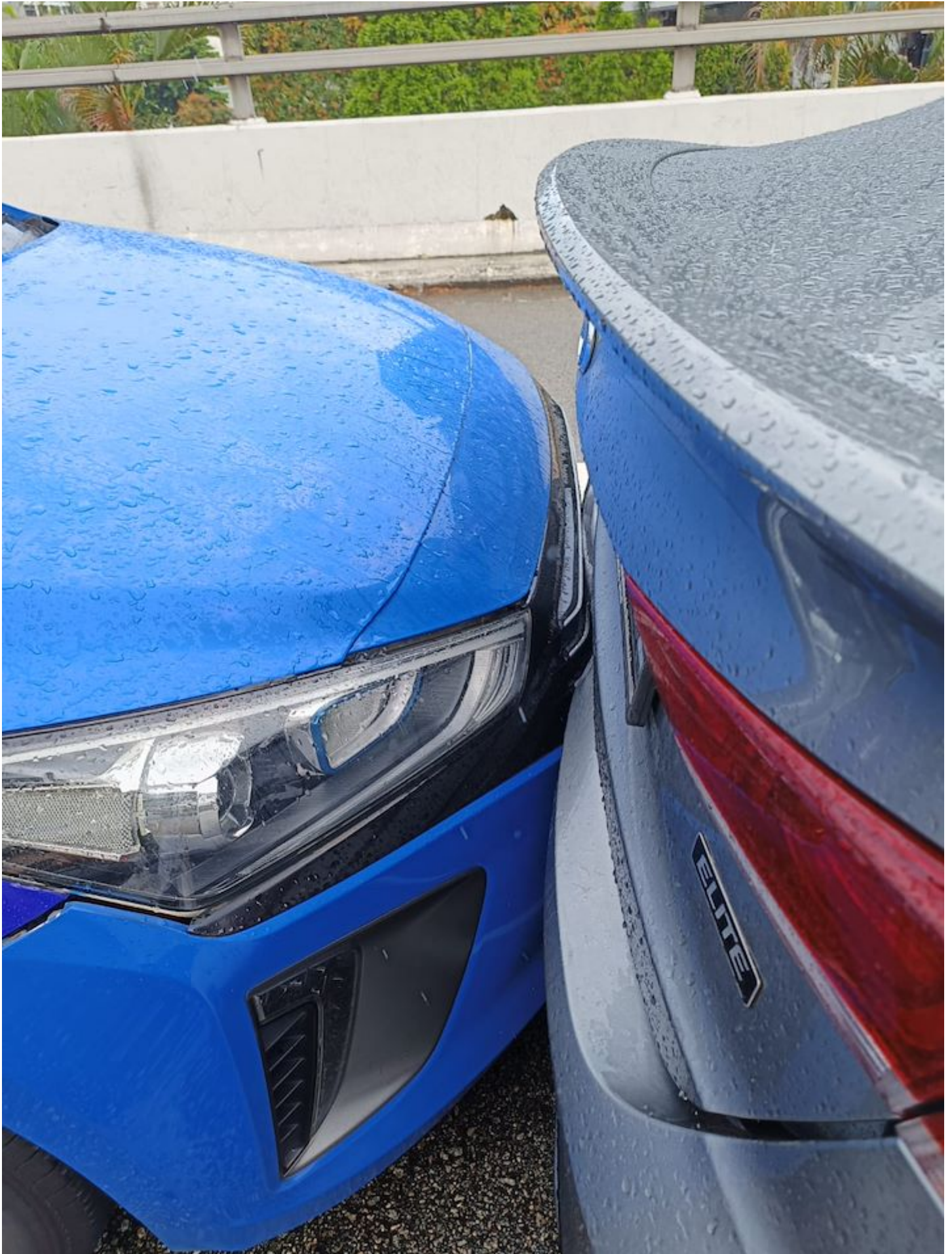
**FLASH ACCIDENT
REPORTING OFFICER**
KYMI YONG



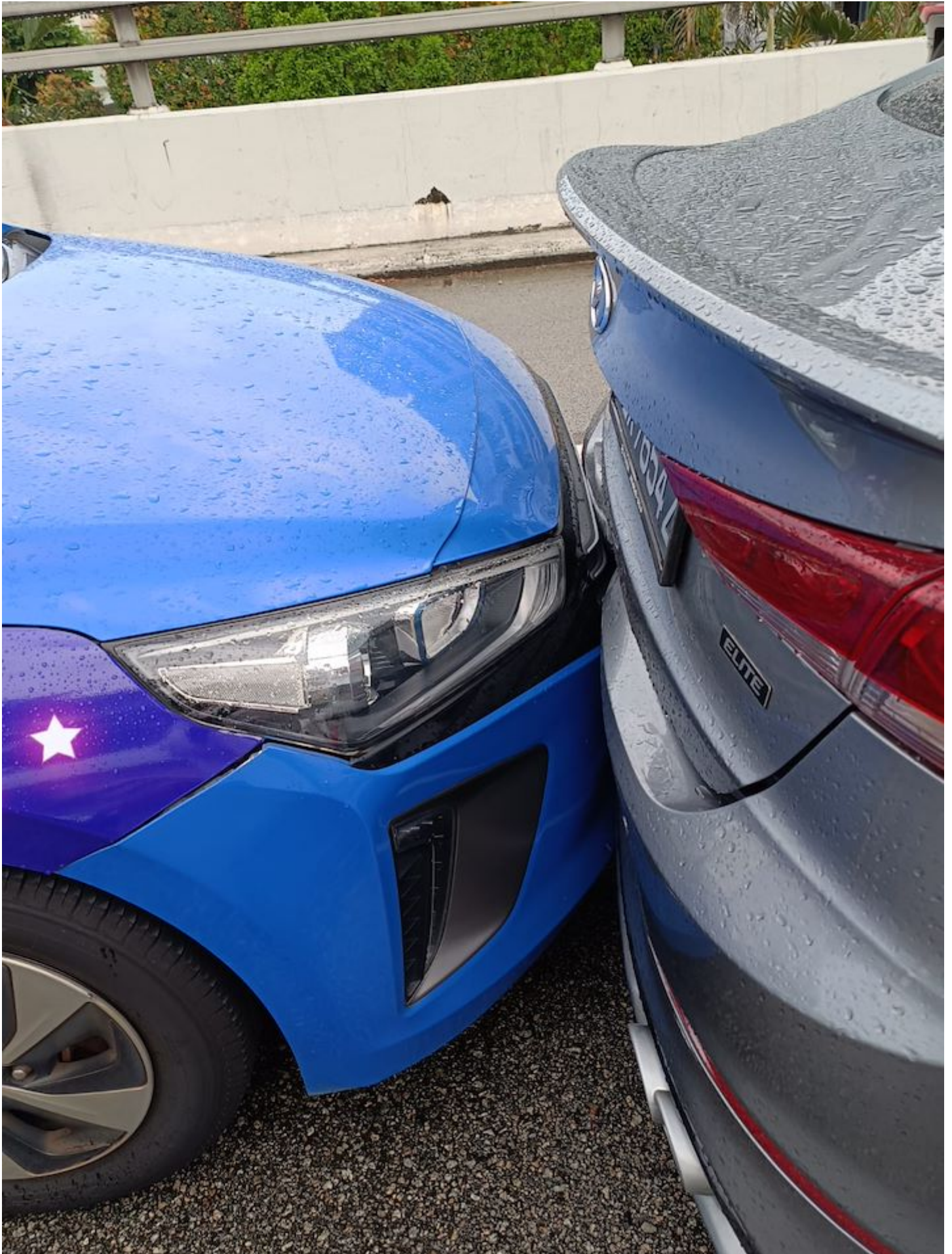
Witnessed by Reporting Centre
Personnel



















**SINGAPORE
POLICE FORCE**



T/20230323/7021

1 of 4

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

Report No, T/20230323/7021

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 23/03/2023 11:38	Vide Report No.:	Station Diary No.:
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Informant's Particulars			
Name of Informant: SA'ADIAH BINTE RAFIL		Address: 228 YISHUN STREET 21 #04-486 SINGAPORE 760228	
ID Type / ID No.: NRIC NO / S1540898G		Contact No.: Home/Office: Mobile: 97823445	
Nationality: SINGAPORE CITIZEN		Email: dedenrafil@gmail.com	
Sex: Female	Age: 60	Date of Birth: 29/05/1962	Type of Informant: Driver
Race: Boyanesse		Language: English	Institution / School Name:
Occupation:		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 22/03/2023 14:45	Type of Location: Straight Road
Location: PIE towards Tuas before CTE/SLE (Exit 14)				
Weather: Drizzling		Road Surface: Wet	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: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
GBK4128H	Lorry	TOYOTA	DYNA	Silver	Slightly Damaged	1
SHC2986G	Car	HYUNDAI	Ioniq	Blue	Seriously Damaged	2
SLX7654Z	Car	HYUNDAI	Elantra	Silver	Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



T/20230323/7021

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

Report No. T/20230323/7021

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Passenger			
Name	Unknown Passenger	ID No.	NIL
Related Vehicle	GBK4128H (Lorry)	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL
Passenger			
Name	RAJUNAH BINTE MOHD YASSIN	ID No.	NIL
Related Vehicle	SHC2986G (Car)	Contact No.	96246722
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	22/03/2023	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL
Driver			
Name	SA'ADIAH BINTE RAFIL	ID No.	S1540898G
Related Vehicle	SHC2986G (Car)	Contact No.	97823445
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	22/03/2023	Date	22/03/2023
No. of Days granted Medical Leave	05	Degree of	Slight



**SINGAPORE
POLICE FORCE**



T/20230323/7021

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

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Report No. T/20230323/7021

CONTINUATION OF REPORT

Passenger			
Name	MOHAMED ALI BIN HUMUM	ID No.	NIL
Related Vehicle	SHC2986G (Car)	Contact No.	NIL
Hospital/Clinic	TAN TOCK SENG HOSPITAL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	22/03/2023	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL
Driver			
Name	RANA SOHEL	ID No.	G2599368W
Related Vehicle	NIL	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

On 22/03/2023 at about 1445hrs, My car/taxi/SHC2986G was stationary along PIE towards Tuas before CTE/SLE(Exit 14) due to heavy traffic. I was on the most left lane as I intent to turn into CTE.

While waiting to move off, I suddenly felt a high impact from my rear. Due to the impact, My car surge forward and collided against the rear of the car/SLX76545Z infront of me.

I exit my car and discovered a lorry/GBK4128H had collided it's front against my rear. I took images of scene and exchanged particulars.

Traffic police and ambulance was at scene, I was conveyed to Tan Tock Seng Hospital with my 2 passengers namely Rajunah Binte Mohd Yassin and Mohamed Ali Bin Humum. I was given 5 days Medical certificate/ref: 1317338149



**SINGAPORE
POLICE FORCE**



T/20230323/7021

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Report No. T/20230323/7021

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

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 /
Ahmad Syafiq Bin Harris
Contact No.: 65476201

This report is lodged at Yishun North NPC Kiosk 1
NP188

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

Date/Time:
23/03/2023 11:38

Classification Of Case: