SC1L233S0002-01 / CHIN MENG MOTORS
ENTRY DATE & TIME: 28/03/2023 16:56 (SGT)
SUBMITTED BY: CMM02
VERSION: 2 (29/03/2023 12:04 (SGT))

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 witholding 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	28/03/2023 16:56 (SGT)
Reported by	Actual Driver
Date of Accident	28/03/2023 12:20 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	WOODLANDS AVE 12 (SLE TOWARDS BKE)
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBD9897A

INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	CHENG XING HARDWARE & ENGINEERING
Company Reg No	5XXXX485W
Email Address	COLLINTAN86@GMAIL.COM
Mobile Phone No	(Phone) +65-98881950
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Citroen
Model	Berlingo
Variant	-
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 - Claiming third party
Vehicle Category	Commercial vehicle
Transmission	Auto
CC	1600

INSURANCE COMPANY

Name of Insurance Company	Tokio Marine Insurance Singapore Ltd
Policy Number / Cover Note Number	22-MS009375-R03

DRIVER

Name of Driver	TAN KHING KIAT
NRIC No	SXXXX709G
Date Of Birth	27/05/1986
Occupation	Indoor

Date Of Driving Pass	11/05/2005
Driving experience	17 YEARS AND 10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98881950
Alt. Phone Number	-
Email Address	COLLINTAN86@GMAIL.COM
Address	BLK 610C TAMPINES NORTH DR 1 #13-464
Address complement	-
Postcode	523610
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Employee
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?	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	Bedok South Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18002448999
Alt. Police Station Phone No	(Fax) +65-62446558
Police Station Address	20 Chai Chee Drive Singapore 469045
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT.

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	SDV3268L
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMR7066R
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	-
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	TAN KHING KIAT
Gender	Male
Phone No	(Phone) +65-98881950
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	GBD9897A
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

Describe Circumstances of the Accident

Refer to Police Report

Declaration

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

CHENG XING HARDWARE & ENGINEERING

Policyholder's Signature / Date & Time

23/03/23

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

Witnessed by Reporting Centre Personnel

SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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 Police for investigation.
6. The 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.
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.

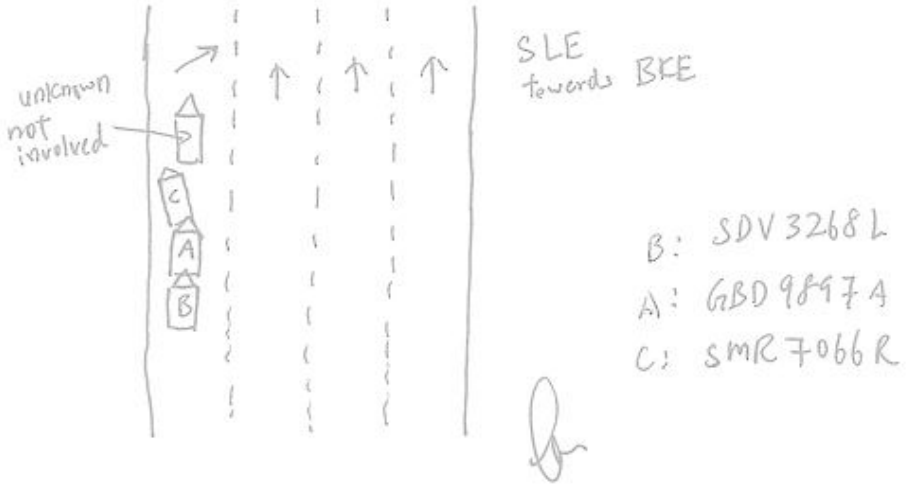
(collectively the "**Purposes**")

(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	Driver's Signature (If driver is not the policyholder) / Date & Time	Witnessed by Reporting Centre Personnel
	28/03/23	

Sketch Plan



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IMAGES #2

IMAGES #3

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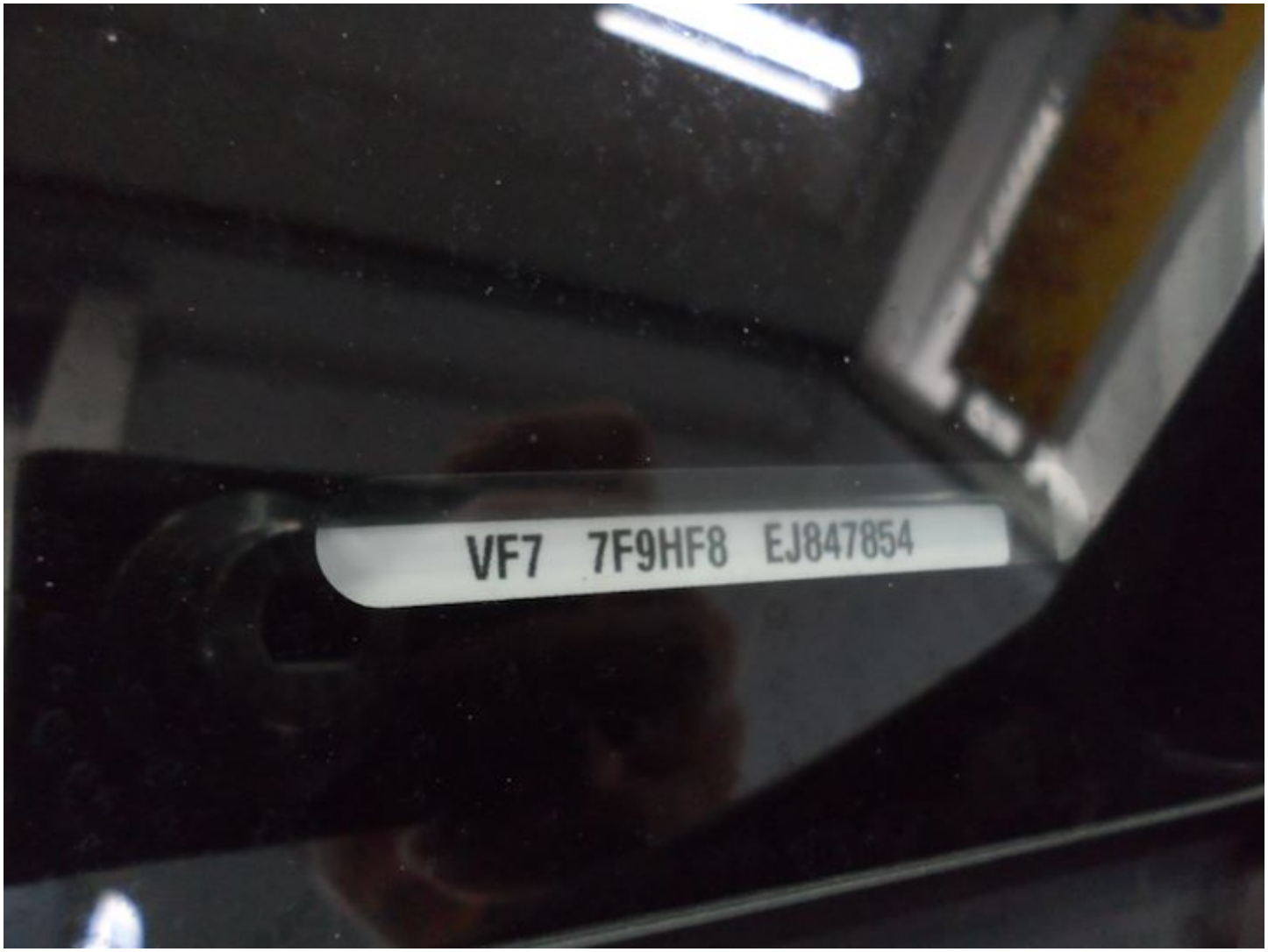
IMAGES #11

IMAGES #12

IMAGES #13

IMAGES #14

IMAGES #15



SINGAPORE POLICE FORCE

T/20230328/2062

Report No. T/20230328/2062

Police Station Of Origin:
Bedok South NPP
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:	Vide Report No.:	Station Diary No.:
28/03/2023 15:30		19

Informant's Particulars

Name of Informant:			Address:
TAN KHING KIAT			APT BLK 610C TAMPINES NORTH DRIVE 1 #13-464 SINGAPORE 523610
ID Type / ID No.:			Contact No.:
NRIC NO / S8613709G			Home/Office: Mobile: 98881950
Nationality:			Email:
SINGAPORE CITIZEN			
Sex: / Male	Age: / 36	Date of Birth: / 27/05/1986	Type of Informant: Driver
Race:			Language:
Chinese			
Occupation:			Driving Licence Information:
SALES			Class: 2B,2A,2,3 Date of Expiry:

General Information of the Accident

Type of Accident:	Injury	Drink Drive:	Date/Time of Accident:	Type of Location:
	Others	No	28/03/2023 12:50	Straight Road

Location:

WOODLANDS AVENUE 12

Weather:	Road Surface:	
Clear	Dry	
Traffic Flow:	Traffic Control:	Traffic Volume:
One Way	Not Controlled	Heavy
Type of Collision:		Anyone conveyed by ambulance:
Between Moving Vehicles - Head To Rear		No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBD9897A	Van					0
SDV3268L	Car					0
SMR7066R	Car					0

SINGAPORE POLICE FORCE

T/20230328/2062

Police Station Of Origin:
Bedok South NPP
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

Report No. T/20230328/2062

CONTINUATION OF REPORT

Details of Person Involved					
Any Pedestrian Involved: No					
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA		
Driver					
Name	TAN KHING KIAT		ID No.	S8613709G	
Related Vehicle	GBD9897A (Van)		Contact No.	98881950	
Hospital/Clinic	LIM CLINIC & SURGERY		Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL	
Date Treatment	28/03/2023		Date Discharge	28/03/2023	
No. of Days granted Medical Leave	03		Degree of Injury	NIL	
Driver					
Name	NG CHIN FEI		ID No.	S6835445E	
Related Vehicle	SDV3268L (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	CHENG AH LEE		ID No.	S7237792C	
Related Vehicle	SMR7066R (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	

Brief Details.

On 28/03/2023 at about 1250hrs, I was driving my vehicle bearing the plate number (GBD9897A) along Woodlands Avenue 12 towards SLE on the merging lane. At the road ahead after the merging point, there is broken down truck stopped along the road.

Subsequently, the vehicle in front of me bearing the plate number (SMR7066R) jammed break. Fortunately, I managed to break in time.

After that, I felt an impact coming from my rear. I discovered that another vehicle bearing the plate

SINGAPORE POLICE FORCE

T/20230328/2062

Police Station Of Origin:
Bedok South NPP
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

Report No. T/20230328/2062

CONTINUATION OF REPORT

number (SDV3268L) had hit onto my rear. This caused my vehicle to inched forward and hit onto vehicle (SMR7066R). All the drivers then stepped out of their respective vehicles and exchanged particulars.

No Traffic Police or Ambulance came to the incident. I tried to retrieve the footages from my in-car dash camera however, to no avail. Subsequently, I went over to Lim Clinic & Surgery to make a check on myself and received 3 days of MC.

SINGAPORE POLICE FORCE

T/20230328/2062

4 of 4

Report No. T/20230328/2062

Police Station Of Origin:
Bedok South NPP
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

CONTINUATION OF REPORT

Signature of Officer Recording The Report: G / SGT 1 MUHAMMAD FAZLI IDHAM BIN MOHD YAZID	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 28/03/2023 15:30
Officer In Charge Of Case: TP / AEIT / SSI TAY CHUN KEEN Contact No.: 65476436	Classification Of Case:

NP168

GENERAL INSURANCE ASSOCIATION
RECORDS MANAGEMENT CENTRE

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

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: SC1L233S0002 Vehicle Registration No: GBD9897A

Name (as shown in NRIC): Tan Khing Kiat NRIC/FIN/Passport No: S8613709G

(*Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate

Address: BIK 610C Tampines North Dr 1 #13-464 Singapore (523610)

Contact (Tel): 98881950 Mobile No.: 98881950

Email Address: callintan86@gmail.com

Date of Accident: 28/03/2023 Time of Accident: 12.20 pm

Place of Accident: Woodlands Ave 12 (SLE towards BKE)

Insurance Company: Tokio Marine Insurance Singapore 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:

Amendments in sketch plan

Car A should be GBD9897A

Car B should be SDV3268L

Car C should be SMR7066R

Policyholder / Driver's Signature
Date:

Reporting Centre Personnel's Signature
Name: Alvin Quek
NRIC/FIN No.: 7346J
Date: 29/03/23