# **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.

- 4. The issue and acceptance 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 31/03/2023 17:26 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 30/03/2023 20:30 (SGT) Exact Location of Accident Woodlands Ave 12, Singapore Additional Location Information TURNING INTO WOODLANDS WALK Country/State of Loss Singapore

### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number **FH898A** 

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner PHUA ENG HUA NRIC No SXXXX307F Email Address richard.phua@angles.com.sg Mobile Phone No (Phone) +65-96759038 Alternative Phone No

### VEHICLE PARTICULARS

Manufacturer Maserati Model **LEVENTA** Variant Exact purpose for which vehicle was being used at time of accident Private use Are you claiming under your own insurance policy for repair to No - Reporting only your vehicle? Vehicle Category Private car Transmission Auto

### **INSURANCE COMPANY**

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Policy Number / Cover Note Number DMPCSNW00115982200

2979

### DRIVER

CC

Name of Driver PHUA ENG HUA NRIC No SXXXX307F Date Of Birth 27/11/1957 Occupation Indoor

Date Of Driving Pass 30/06/1978 Driving experience 44 YEARS AND 9 MONTHS Gender Mobile Number (Phone) +65-96759038 Alt. Phone Number Email Address richard.phua@angles.com.sg Address BLK 683A WOODLANDS DRIVE 62 #13-105 Address complement Postcode 731683 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 Was anybody injured in the Accident? No Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Yes Number of Passengers (Including Driver) 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? If yes, against whom? CIRCUMSTANCES OF ACCIDENT PLEASE REFER TO POLICE REPORT T/20230331/7008 ATTACHMENT(S) Are accident photos available for attachment? Yes Was there any video captured by Car Camera? No **DETAILS OF OTHER VEHICLE PROPERTY 1** 

SJP4800D

Hyundai

# CAccident report SN08233V0006

Vehicle Registration Number

Vehicle Manufacturer

Vehicle Model
Vehicle Variant

Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	TAN JUN JIE JACKY
NRIC No	SXXXX887D
Contact Number	(Phone) +65-91730971
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

### SKETCH PLAN

### IMPORTANT NOTICE

- 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 Traffic Police Department for investigation.
- This report will be forwarded by the insurers to 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 ladgement 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.

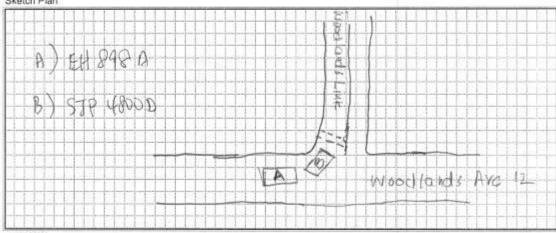
(web 31 3 23

Policyholder's Signature / Date & Time

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

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

Sketch Plan



v.lun2022

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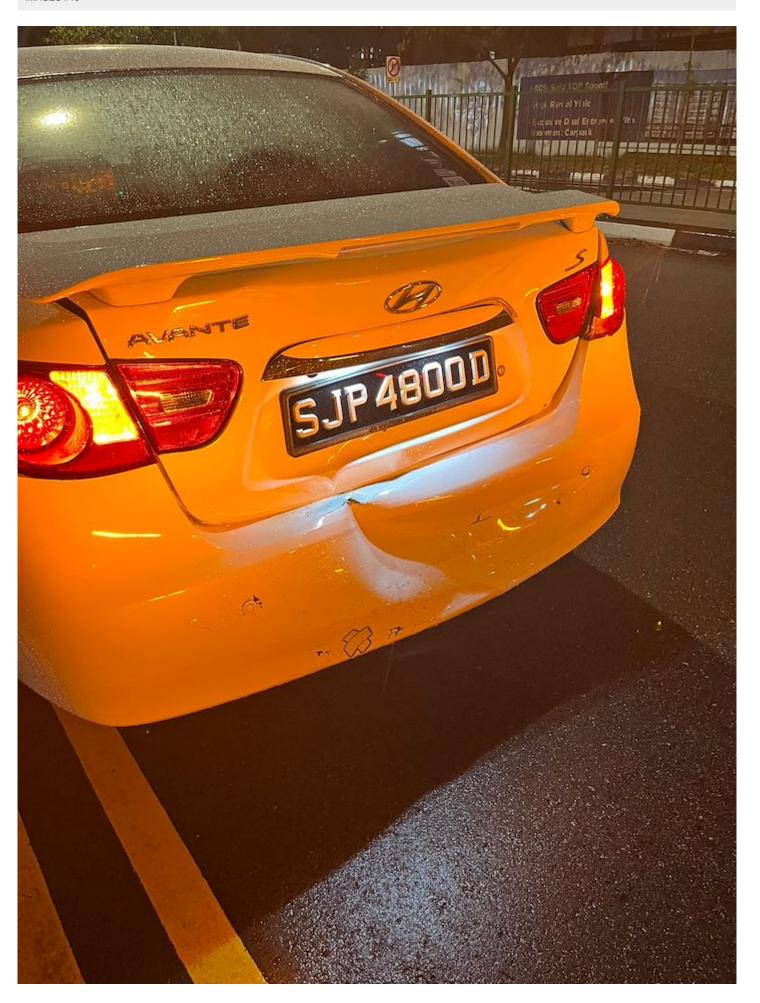
















Police Station Of Origin: Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865

Tel No: 65470000

1 of 3 Report No. T/20230331/7008

## REPORT OF A TRAFFIC ACCIDENT

31/03/2023 09:29		Made:	Vide Report No.:	Station Diary No.:		
Informa	int's Partic	ulars				
Name o	f Informant NG HUA		Address: 683A WOODLANDS DRIVE 6	2 #13-105 SINGAPORE 731683		
NRIC N	/ ID No.: 0 / S12633	07F	Contact No.: Home/Office:	Mobile: 96759038		
National SINGAR	ity: ORE CITIZ	'EN	Email: richard.phua@angles.com.sg	Woone, 90759038		
Sex: Male	Age: Date of Birth: 65 27/11/1957		Type of Informant:			
Race: Chinese			Language: English	Institution / School Name:		
Occupat Director	cupation: ector		Driving Licence Information: Class: 3	Date of Expiry:		

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 30/03/2023 20:3	Ben	of Location
along woodla	nds ave 12 turning int				
Clear		Road Surface: Dry		Road Spec	ed Limit:
The second secon					
Traffic Flow: One Way Type of Collisi		Traffic Control: Not Controlled		Traffic Volu	5-84 WWW.

Details of V	ehicle Invo	lved	Mail and			
Vehicle No.	Туре	Make	Model	Color	Conditio	No of
EH 898A	Car	MASERATI	leventa	Black	Conditio	0
SJP 4800D	Car	HYUNDAI	Avante	White	Slightly	0
					Damaged	



T/20230331/7006

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

2 of 3 Report No. T/20230331/7008

### CONTINUATION OF REPORT

Any Pedestrian I	nvolved: No					
No. of Pedestrian		Use of Pedestrian Crossing: NA				
Driver				2017	327	
Name	PHUA ENG HUA			ID No.	9-1	S1263307F
Related Vehicle	EH 898A (Car)			Contact No.		96759038
Hospital/Clinic	NIL			Class Driving Licence Expiry	g :e &	Class: 3 Date of Expiry: NIL
Date	NIL	-	Date		NIL	
No. of Days gran	ted Medical Leave	NIL	Degree o	of	NIL	

### Brief Details.

when approaching the bend, vehicle infront of me did an emergency brake to avoid collision with a cyclist, I did an emergency brake however i collided with the rear bumper of the said car. No injuries and I am recording this report for recording purpose and insurance claim.

Details of other party vehicle SJP 4800D Hyundai avante Tan Jun Jie Jacky S8622887D

Details of my vehicle: EH 898A Maseratti