

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 24/03/2023 17:32 (SGT)
Reported by Both Policyholder and Actual Driver
Date of Accident 23/03/2023 20:40 (SGT)
Exact Location of Accident New Upper Changi Rd & Tanah Merah Kechil Rd, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SBS19Z

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner Go Ahead Singapore Pte Ltd
Company Reg No 2XXXXX900C
Email Address accidentpreventive@go-aheadssingapore.com
Mobile Phone No (Phone) +65-3847169
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Volvo
Model B9tl
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 - Reporting only
Vehicle Category Bus
Transmission Auto
CC 9400

INSURANCE COMPANY

Name of Insurance Company MS First Capital Insurance Ltd
Policy Number / Cover Note Number D-22099843MFBP

DRIVER

Name of Driver Lim Geok Choon
NRIC No SXXXX419H
Date Of Birth 19/07/1959
Occupation Outdoor

Date Of Driving Pass	13/10/1980
Driving experience	42 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98770852
Alt. Phone Number	-
Email Address	limfromchoon@gmail.com
Address	556 Ang Mo Kio Avenue 10
Address complement	#02-1912
Postcode	560556
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	Side Swipe
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?	No
Was any injured conveyed to hospital by ambulance?	-
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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

Lim Geok Choon was driving service 2 [SBS19Z] on the above-mentioned date & time. While heading towards 85091 • Tanah Merah Stn Exit B via the 2nd lane from the extreme left lane of a 4-lane road along New Upp Changi Rd, a black Volvo S80 [SKA8607L] travelling on the right side of SBS19Z encroached into SBS19Z's lane where SKA8607L's front left fender & both left doors side swept against SBS19Z's front right corner bumper

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	DIFFERENT FORMAT

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SKA8607L
Vehicle Manufacturer	Volvo
Vehicle Model	S80
Vehicle Variant	-
Vehicle Colour	Black

Vehicle Category	Private car
Name of Driver	Tan Lay Wah
NRIC No	SXXXX545B
Contact Number	(Phone) +65-98968327
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-





