

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.

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 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 03/05/2023 18:10 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 03/05/2023 07:50 (SGT) Exact Location of Accident Singapore Additional Location Information PIE TOWARDS TUAS (UNDER LORNIE ROAD FLYOVER) Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Honda

Vehicle Registration Number SLV5310P

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner TAN HOCK LIANG, ADAM NRIC No S8105034A Email Address ADAMLONEARROW@GMAIL.COM Mobile Phone No (Phone) +65-96501925 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer

Model Freed 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 - Claiming third party your vehicle? Vehicle Category Private car Transmission Auto

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited Policy Number / Cover Note Number 5121618385-01

DRIVER

CC

Name of Driver TAN HOCK LIANG, ADAM NRIC No S8105034A Date Of Birth 16/02/1981 Occupation Indoor

Date Of Driving Pass Driving experience Gender Mobile Number Alt. Phone Number Email Address Address Address Address complement Postcode Is the driver the policyholder? If No, Relationship of the Driver with the Insured Does Driver Own Other Vehicles? Vehicle Registration Number of Other Vehicle Owned by Driver Insurance Company of Other Vehicle Owned by Driver	30/07/2009 13 YEARS AND 10 MONTHS Male (Phone) +65-96501925 - ADAMLONEARROW@GMAIL.COM 4 SIGLAP LINK #11-01 - 448879 Yes - No
GENERAL INFORMATION OF THE ACCIDENT	
Type of Accident Weather Conditions Road Surface	Collision - Change/cross lane Clear Dry
OTHER INFORMATION	
Was any foreign vehicle involved in the accident? Number of vehicles involved in the accident Was anybody injured in the Accident? Was any injured conveyed to hospital by ambulance? Was any other vehicle or property damaged? Number of Passengers (Including Driver) Has the driver been approached by unknown person(s) soliciting/offering accident claims assistance? 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? Police Station Name Police Station Phone No Alt. Police Station Phone No Police Station Address Was notice of intended Prosecution given? If yes, against whom?	Yes Bedok North Neighbourhood Police Centre (Phone) +65-18002449999 (Fax) +65-62447258 30 Bedok North Road Singapore 469676 No
CIRCUMSTANCES OF ACCIDENT	
REFER TO ATTACHED	
ATTACHMENT(S)	
Are accident photos available for attachment? Was there any video captured by Car Camera? Reasons for not uploading a video of the accident	Yes Yes VIDEO WITH OWNER
DETAILS OF OTHER	VEHICLE PROPERTY 1

GBA4946R

Vehicle Model

Vehicle Registration Number
Vehicle Manufacturer

Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
Name of Driver	VEERAPPAN CHANDRA SEKAR
Passport No/FIN	G7287645N
Contact Number	-
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

- 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.
- 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.
- 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.
- 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' law yers/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 &

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

Witnessed by Reporting Centre Personnel

Sketch Plan

A = SLV S 310 P

B = GBA 4946 R

| A = SLV S 310 P

B = GBA 4946 R

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Declaration

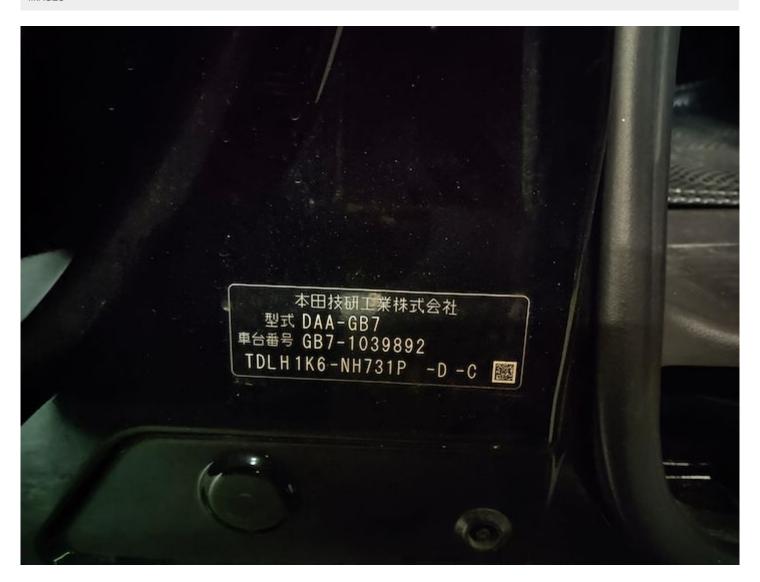
We declare the foregoing particulars are true in every respect.

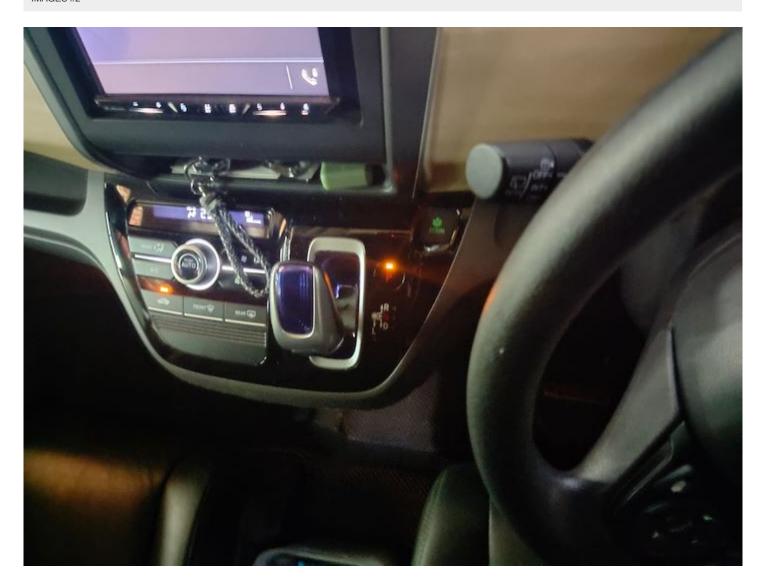
Policyholder's Signature / Date &

8May 23/11024vs Driver's Signature (If driver is not the policyholder) / Date

& Time

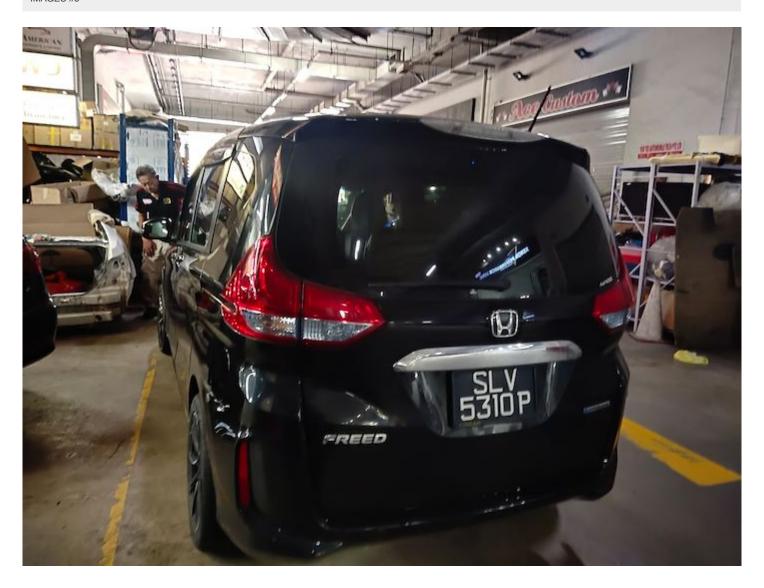
Witnessed by Reporting Centre Personnel







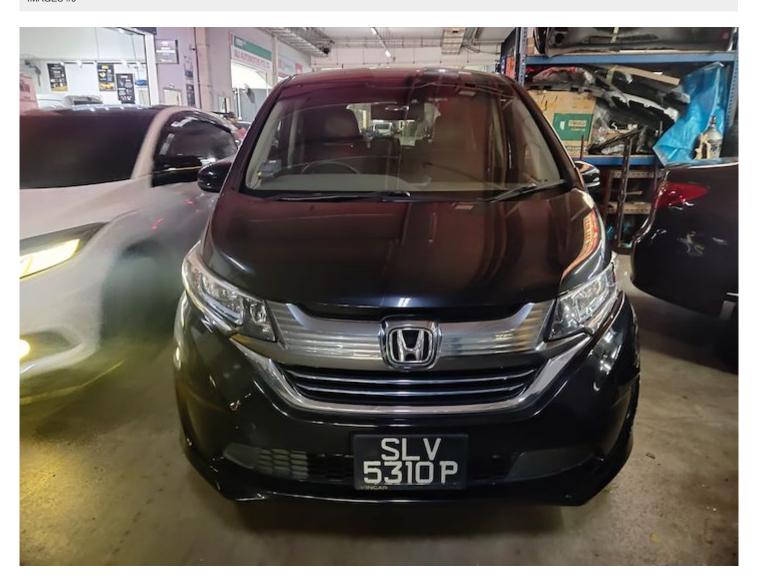












CS CamScanner

am/ pm to meet the Investigation Officer to assis You are required to be present at Traffic Police on ä

Please bring along your:

a) Identity Card / Passport / Work Pass

b) Driving License / Vocational License

c) Vehicle Insurance / Medical Certificate

d) Any other relevant documents (e.g. Video footages)

If you are unable to keep to the appointment, please contact: 6547619

Email: SPF_TP_Invest_Branch@spf.gov.sg

NP319E(2019)

Investigation Branch: 6547 6391







Police Station Of Origin: Bedok N.P.C 30 Bedok North Road SINGAPORE 469676 Tel No: 1800-2449999 2 of 3 Report No. T/20230503/2061

CONTINUATION OF REPORT

Details of Perso Any Pedestrian Ir		が 100mm 10		HEISTER	September 1	
No. of Pedestrian		Use of Pe	destrian	Cross	ing: NA	
Driver	Barton St. State Sp. St. 1990	Bernath Line	Bertine	475	Charles and the Party of the	
Name	VEERAPPAN CHANDRA	KIII DONING CHEEK	ID No.		G7287645N	
Related Vehicle	GBA4946R (Lorry)		Contact No.		84388843	
Hospital/Clinic	NIL	10	Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL	
Date Treatment	NIL	Date Disc	harge	NIL		
No. of Days gran	ted Medical Leave NIL	Degree o	f Injury	NIL		
Driver		医自己 对对此	History)	The state	NOTICE AND SERVICE	
Name	TAN HOCK LIANG, ADAM		ID No.		S8105034A	
Related Vehicle	SLV5310P (Car)	100	Contact No.		96501925	
Hospital/Clinic	NIL		Class Driving Licence Expiry	e &	Class: 3 Date of Expiry: NIL	
Date Treatment	NIL	Date Disc		NIL		
No. of Days gran	ted Medical Leave NIL	Degree o	f Injury	NIL		

Brief Details.

On 03/05/2023 at about 0750hrs, I was driving on the first lane of 4 lanes along PIE towards Tuas at the 20,5km mark when suddenly I got side swiped by a lorry with registration plate no. GBA4946R from my left side. The traffic volume during that point of time was moderate.

I then called for ambulance as one of the passengers was injured. Subsequently, traffic police and ambulance came down. I have in-car camera in my car, and I have given the footage to the officer. I was then advice to lodge a Traffic Accident report. The supervisor of the driver is Eric, hp: 97385400 as the driver can speak little English.







Police Station Of Origin: Bedok N.P.C 30 Bedok North Road SINGAPORE 469676 Tel No: 1800-2449999 3 of 3 Report No. T/20230503/2061

CONTINUATION OF REPORT

Signature of Officer Recording The Report:
G /
SR STAFF SGT NUR FARHANA
BINTE JAKARIA

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIT /
STAFF SGT SYED MUHAMMAD ISA BIN
OMAR ALHABSHEE
Contact No.: 65476187

Date/Time:
03/05/2023 13:27

Classification Of Case:

CS CamScanner

NP168





Police Station Of Origin: Bedok N.P.C

30 Bedok North Road SINGAPORE 469676 Tel No: 1800-2449999

Report No. T/20230503/2061

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 03/05/2023 13:27			Vide Report No.: Station Diary No.: E/20230503/0030 45				
Informa	nt's Particu	ilars	的有机性和整理的技术的	在675年的 加州的			
	Informant: CK LIANG,	ADAM	Address: 4 SIGLAP LINK #11-01 SINGAPORE 448879				
ID Type / ID No.: NRIC NO / S8105034A Nationality: SINGAPORE CITIZEN			Contact No.: Home/Office: Mobile: 96501925				
			Email:				
Sex: Age: Date of Birth: Male 42 16/02/1981			Type of Informant: Driver				
Race: Chinese Occupation: SAF			Language: English				
			Driving Licence Information: Class: 3	Date of Expiry:			

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 03/05/2023 07:50	Type of Location: Straight Road	
Location: PAN-ISLAND Weather: Clear	EXPRESSWAY	Road Surface:			
				Traffic Volume: Moderate	
Traffic Flow: One Way		Traffic Control: Not Controlled			

Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
GBA4946R	Lorry	TOYOTA	DYNA 150 MANUAL	White	Seriously Damaged	
SLV5310P	Car	HONDA	FREED HYBRID 1.5G AUTO	Black	Seriously Damaged	0

Details of V	ehicle Insurance		AL ENGINEER PROPERTY.	
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLV5310P	NTUC Income Insurance Co-Operative Limited	5121618385-01	29/06/2022	28/12/2023



CS CamScanner

CASE CARD

Report Number: E 202305031

POLICE FORCE

SINGAPORE

SAFEGUARDING EVERY DAY

Traffic Accident along PIE TUS

Involving vehicles: GBB 494

On 3/5/23 at about

am / pm.

With reference to the above, you are advised to lodge a traffic accident report online via the Police E-Services website (https://eservices.police.gov.sg) within 24 hours. NP319E(2019)



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE

Tel (65) 6224 0010 Fax (65) 6224 0030 Operating Hours: Monday to Friday, 09:00 – 17:00 UEN: \$66550020G / GST Reg. No.: M400017735

<u>IMPORTANT NOTE</u>: Please submit the completed Addendum form to the <u>same</u> Authorised Reporting Centre with whom you submitted the Original Report.

			ADDEND	UM	
1)	PARTICULARS OF PERSO	NMAKINGTH	EAMENDMENT	rs:	
	Original Report No :	SY03235	3000M	Vehicle Registration N	0: STA Z310b
	Name(as shownin NRIC) :	Tan Hock	Liang, Ad	MRIC/FIN/Passport No	: S 8105034A
	(*Vehicle Driver/Vehicl				
	Address :	4 Siglap	Link # 11	1-01	Singapore(44 8879)
	Contact (Tel) :	9650 10	925	Mobile No. :	
	Email Address : _ C	adam long	e arrow (a gmail. com	
	Date of Accident :	03.05.2	023	Time of Accident :	07:50 am
					ornie road flyove
	Insurance Company:				3311
	- Crange	10 = 10	-3 (11-	020503 2001)
	Hanco	-	_	Deli	. 17.7
	Policyholder / Driver's S Date:	ignature	rest.	Reporting Centre Name: NRIC/FIN No.:	Personnel's Signature

Accident report SY032353000M