

# 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 .....	12/05/2023 17:54 (SGT)
Reported by .....	Actual Driver
Date of Accident .....	11/05/2023 07:23 (SGT)
Exact Location of Accident .....	Tuas Rd, Singapore
Additional Location Information .....	-
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	CB8231B
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### INSURED/POLICYHOLDER

Is company? .....	Yes
Name Of Registered Owner .....	READY GO TRADING
Company Reg No .....	5XXXX672K
Email Address .....	connect3lau@gmail.com
Mobile Phone No .....	(Phone) +65-81007700
Alternative Phone No .....	-

### VEHICLE PARTICULARS

Manufacturer .....	Mitsubishi
Model .....	BE639JRMHDEA
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 - Claiming third party
Vehicle Category .....	Bus
Transmission .....	Manual
CC .....	3908

### INSURANCE COMPANY

Name of Insurance Company .....	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number .....	DMB1SNW00015482203

### DRIVER

Name of Driver .....	DALI BIN SALLEH
NRIC No .....	SXXXX936E
Date Of Birth .....	04/02/1960
Occupation .....	Outdoor

Date Of Driving Pass .....	26/01/1995
Driving experience .....	28 YEARS AND 4 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-80420059
Alt. Phone Number .....	-
Email Address .....	connect3lau@gmail.com
Address .....	BLK 469 ANG MO KIO AVENUE 10 #2-958
Address complement .....	-
Postcode .....	560469
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 .....	Hit and run / Vandalism / Damaged whilst parked
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) .....	8
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 .....	UNKNOWN
Gender .....	Male

#### PASSENGER 2

Name .....	UNKNOWN
Gender .....	Male

#### PASSENGER 3

Name .....	UNKNOWN
Gender .....	Male

#### PASSENGER 4

Name .....	UNKNOWN
Gender .....	Male

#### PASSENGER 5

Name .....	UNKNOWN
Gender .....	Male

#### PASSENGER 6

Name .....	UNKNOWN
Gender .....	Female

#### PASSENGER 7

Name .....	UNKNOWN
Gender .....	Female

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	Yes
Police Station Name .....	Teck Ghee Neighbourhood Police Post
Police Station Address .....	Blk 321 Ang Mo Kio Street 31 Singapore 560321
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO POLICE REPORT T/20230511/2119

#### 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 .....	SKR842L
Vehicle Manufacturer .....	Ssangyong
Vehicle Model .....	Actyon
Vehicle Variant .....	-
Vehicle Colour .....	Gray
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) .....	-

**SKETCH PLAN**

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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 making 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/trail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.
- (b) collectively the "Purposes";
- (c) 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
- (d) my Personal Information may/are 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.

READY GO TRADING  
25 DUNE ROAD #01-17  
SINGAPORE 115021

Policyholder's Signature / Date & Time

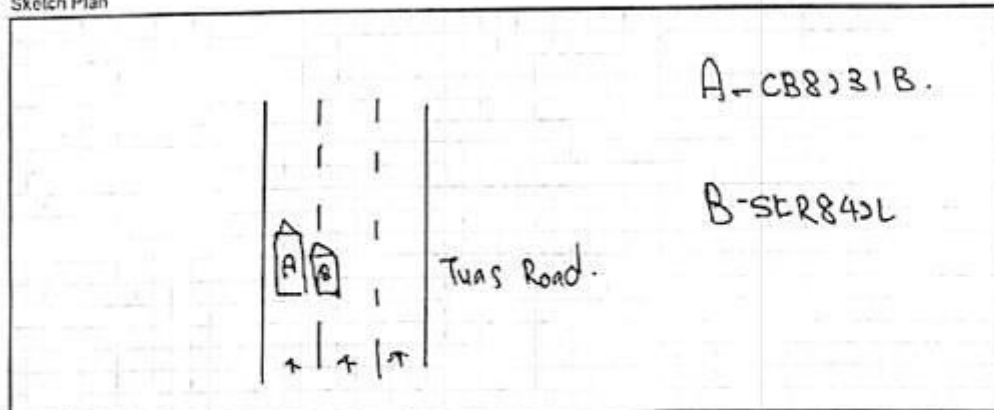
*[Signature]*

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

*[Signature]* 12/05/2023

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

**Sketch Plan**



v3.0-2022

Describe Circumstance of the Accident

Please refer to Police Report: T/20230511/2119

Declaration  
 (We declare the foregoing particulars are true in every respect)

READY GO TRADING  
 25 ELIAS ROAD #07-12  
 SINGAPORE 110011

X 

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)

 12/05/2023





CHASSIS NO	:	BE639JD000356	
UNLADEN WT	:	3760	KG
MAY LADEN WT	:	6100	KG
PASSENGER CAP	:	1 DRIVER	23 OTHER
TYRE SIZE	:	(F) 205-80R-17.5	
		(R) 205-80R-17.5(D)	







































**SINGAPORE POLICE FORCE**

Police Station Of Origin:  
Teck Ghee NEP  
321 Ang Mo Kio Street 31 SINGAPORE  
560321  
Tel No: 1800-4509999

Report No: T202305112119

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:  
11/05/2023 20:15

Vide Report No.:

Station Diary No.:  
24

**Informant's Particulars**

Name of Informant:  
DALI BIN SALLEH

Address:  
APT BLK 469 ANG MO KIO AVENUE 10 #02-958  
SINGAPORE 560469

ID Type / ID No.  
NRIC NO / S1463938E

Contact No.:  
Home/Office: Mobile: 90420059

Nationality:  
SINGAPORE CITIZEN

Email:

Sex: Male Age: 63 Date of Birth: 04/02/1960

Type of Informant:  
Driver

Race: Malay

Language:

Occupation:  
PRIVATE BUS DRIVER

Driving Licence Information:  
Class: Date of Expiry:

**General Information of the Accident**

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 11/05/2023 07:20	Type of Location: Straight Road
Location: TUAS ROAD				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
CB8231B	Bus/Coach/M nibus	MITSUBISHI	BE639JRMH DEA	White	Slightly Damaged	8
SKR842L	Car	SSANGYONG	ACTYON 2.3 AT ABS D/AB SR 2WD (BI- FUEL)	Grey	Slightly Damaged	0

**SINGAPORE POLICE FORCE**

Police Station Of Charge:  
Traffic (DASH) Unit  
301 Rong Mui Road, Street 31 SINGAPORE  
600021  
Tel No: 1-800-4589998

**CONTINUATION OF REPORT**

Police No: 1-0000000000000000

<b>Details of Person Involved</b>		Use of Pedestrian Crossing: NA	
Any Pedestrian Involved: No		ID No. S14619006	
No. of Pedestrians Injured: NIL		Contact No. 80420055	
Name	DALI BIN SALLEH	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Rented Vehicle	NIL	Date Discharge	NIL
Hospital/Clinic	NIL	Degree of Injury	NIL
Date Treatment	NIL	No. of Days granted Medical Leave	NIL

**Brief Details:**  
On 11/5/2023, at about 0723hrs, I was driving my company bus (CB8231B) along Tuas Road. I was driving on the third lane when suddenly, a grey KIA car from the second lane (SKR842L) hit the side of my bus. I honked at him to stop but he just drove away.

Afterwards, I tried to drive ahead and see if he was ahead but to no avail. My bus suffered minor dents and scratches on the right side. I was driving with 8 passengers but none of them were injured as a result of the collision.

My company (Ready Go Trading) asked me to make a report to insurance, who then informed me to make a police report.



SINGAPORE POLICE FORCE	
Police Station Of Origin Teik Ghee Nee 321 Ang Mo Kio Street 31 SINGAPORE 801321 Tel No: 1800-4599999	CONTINUATION OF REPORT
Report No. 1020/0541/0215	
Signature of Officer Recording The Report: F/ SGT 2 AFIQ SYAHIRAN BIN ABDUL MALIK	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 11/05/2023 20:35
Officer In Charge Of Case: TP / HRT / STAFF SGT SUFIYAN BIN KHAIRI Contact No.: 65476148	Classification Of Case:
NP158	