

# 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 .....	23/05/2023 16:39 (SGT)
Reported by .....	Both Policyholder and Actual Driver
Date of Accident .....	22/05/2023 17:30 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	ROCHOR ROAD TOWARDS BENCOOLEN ST
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SLN9884R
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### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	TAN HENG POH (CHEN XINGBAO)
NRIC No .....	S7409712Z
Email Address .....	THP7591@GMAIL.COM
Mobile Phone No .....	(Phone) +65-81123090
Alternative Phone No .....	-

### VEHICLE PARTICULARS

Manufacturer .....	Toyota
Model .....	Corolla
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 your vehicle? .....	No - Claiming third party
Vehicle Category .....	Private hire
Transmission .....	Auto
CC .....	0

### INSURANCE COMPANY

Name of Insurance Company .....	Income Insurance Limited
Policy Number / Cover Note Number .....	5110955813-03

### DRIVER

Name of Driver .....	TAN HENG POH (CHEN XINGBAO)
NRIC No .....	S7409712Z
Date Of Birth .....	18/03/1974
Occupation .....	Outdoor

Date Of Driving Pass .....	05/03/1997
Driving experience .....	26 YEARS AND 2 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-81123090
Alt. Phone Number .....	-
Email Address .....	THP7591@GMAIL.COM
Address .....	887B WOODLANDS DRIVE 50 #02-591
Address complement .....	-
Postcode .....	732887
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 .....	2
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 .....	Woodlands East Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18007679999
Police Station Address .....	3 Woodlands Drive 63 Singapore 737890
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

#### REFER TO ATTACHED

#### 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 .....	SHD6679L
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-

Vehicle Category .....	NA / Unknown
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 HENG POH (CHEN XINGBAO)
Gender .....	-
Phone No .....	-
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	-
Injured person in which vehicle? .....	SLN9884R
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No

## Describe Circumstances of the Accident

On 22.05.2023 at about 5:30pm. I was travelling along Rocher Road towards Bencoolen Street. I was stationary due to the front traffic. Suddenly, Vehicle B (SHD 6679L) hit my vehicle (SLN 9884R) of the rear portion.

## Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time



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

23/05/23  
1:18pm

Witnessed by Reporting Centre Personnel

## SKETCH PLAN

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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.

*[Signature]*

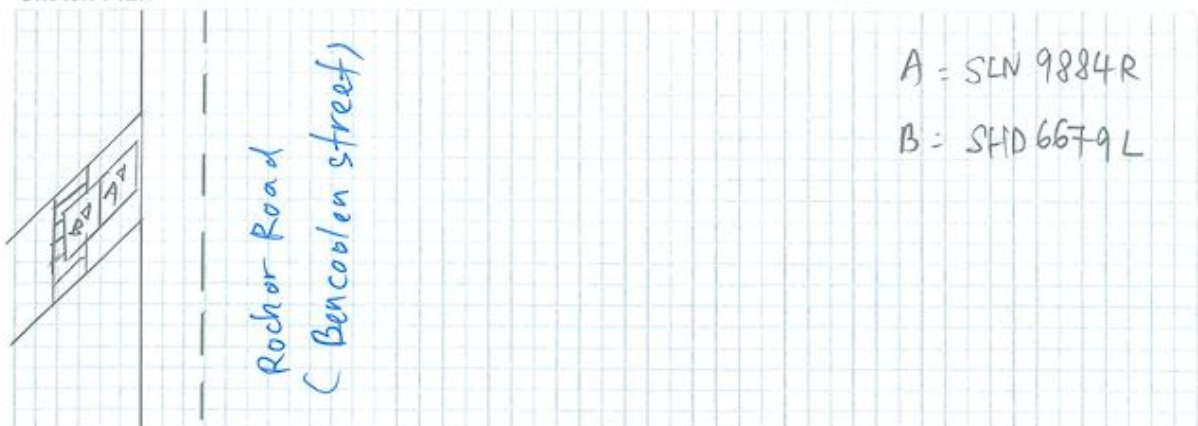
Policyholder's Signature / Date & Time

*[Signature]*

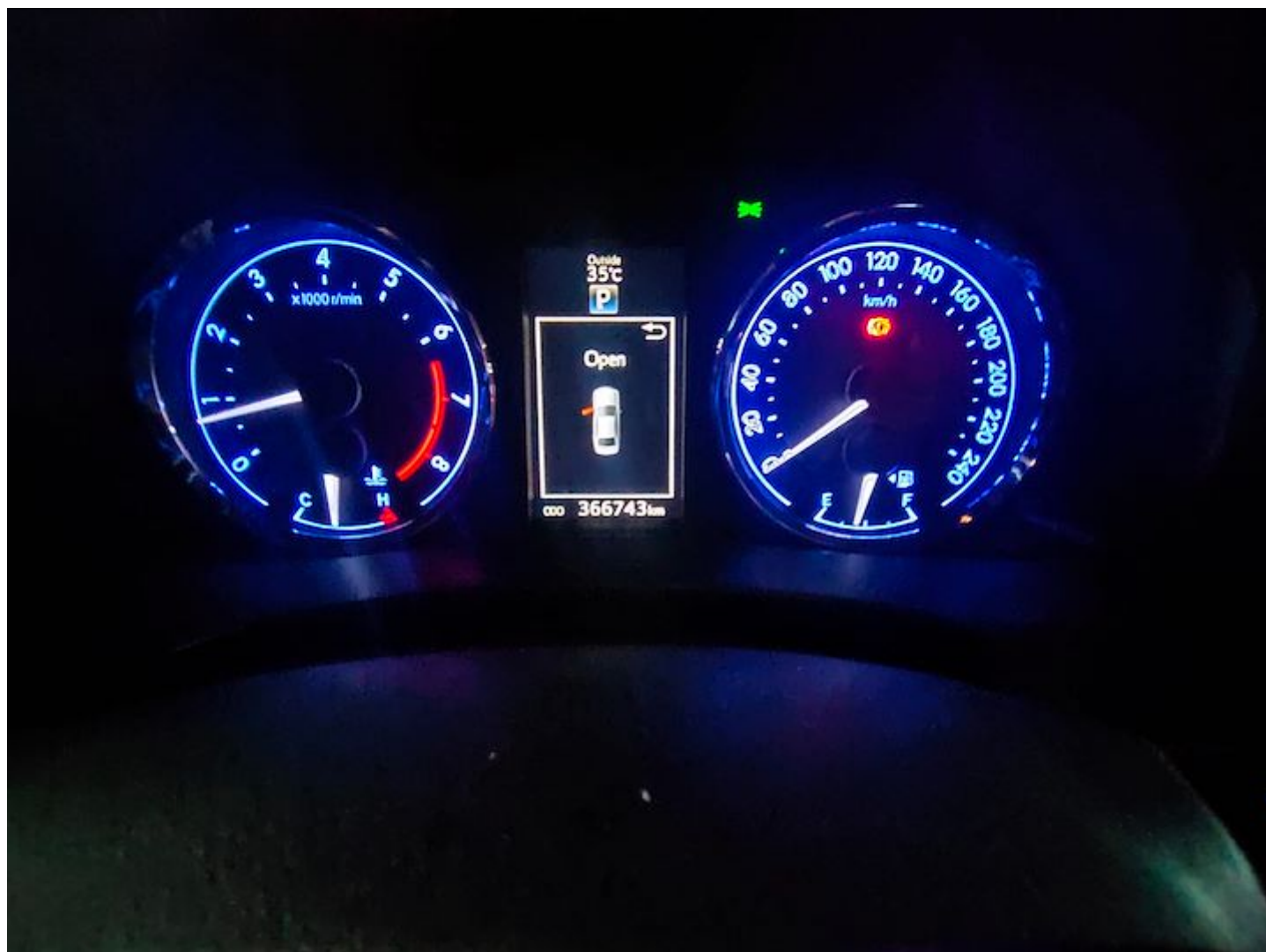
Driver's Signature (if driver is not the policyholder) / Date & Time

Witnessed by Reporting Centre Personnel

### Sketch Plan



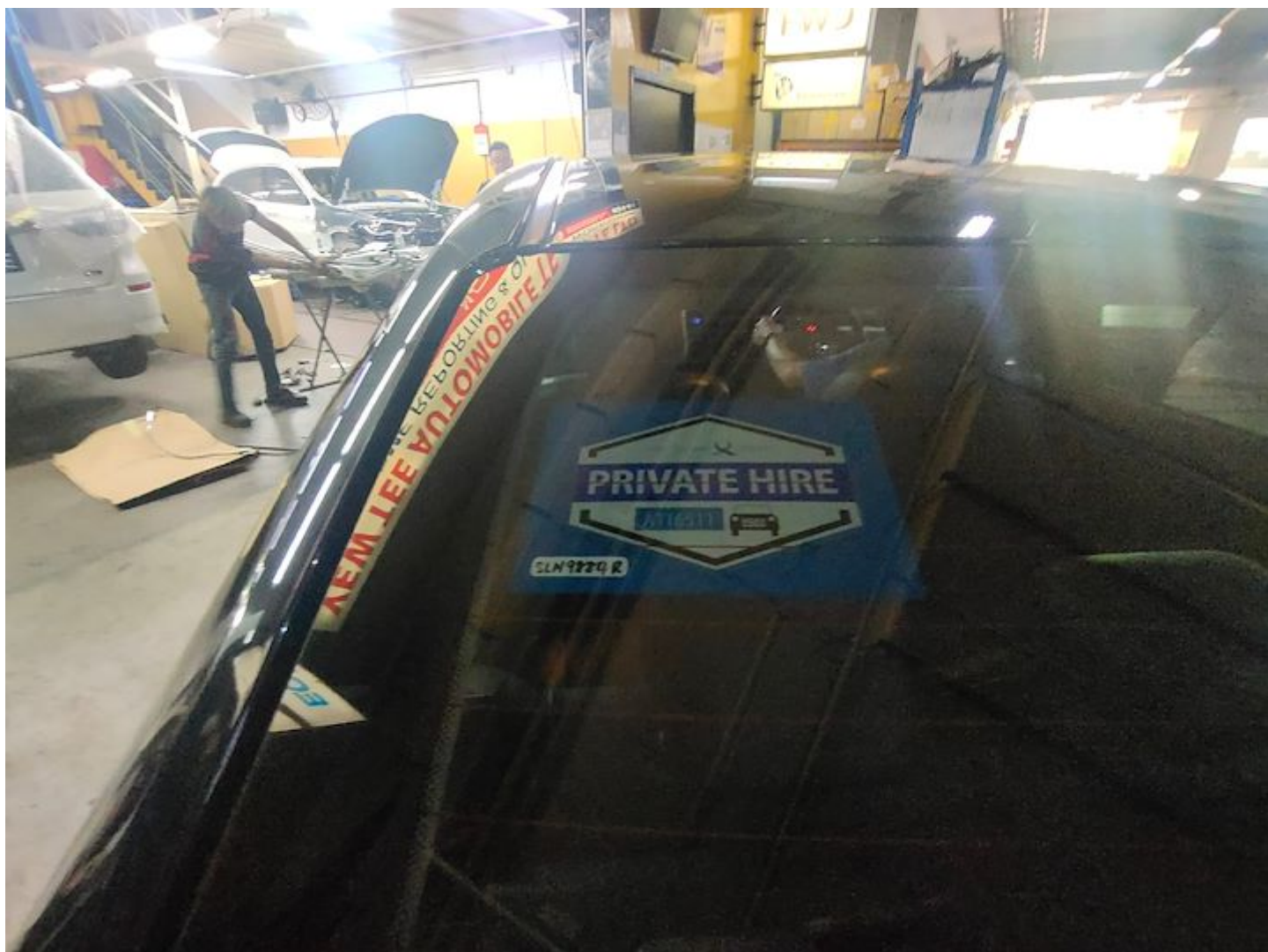






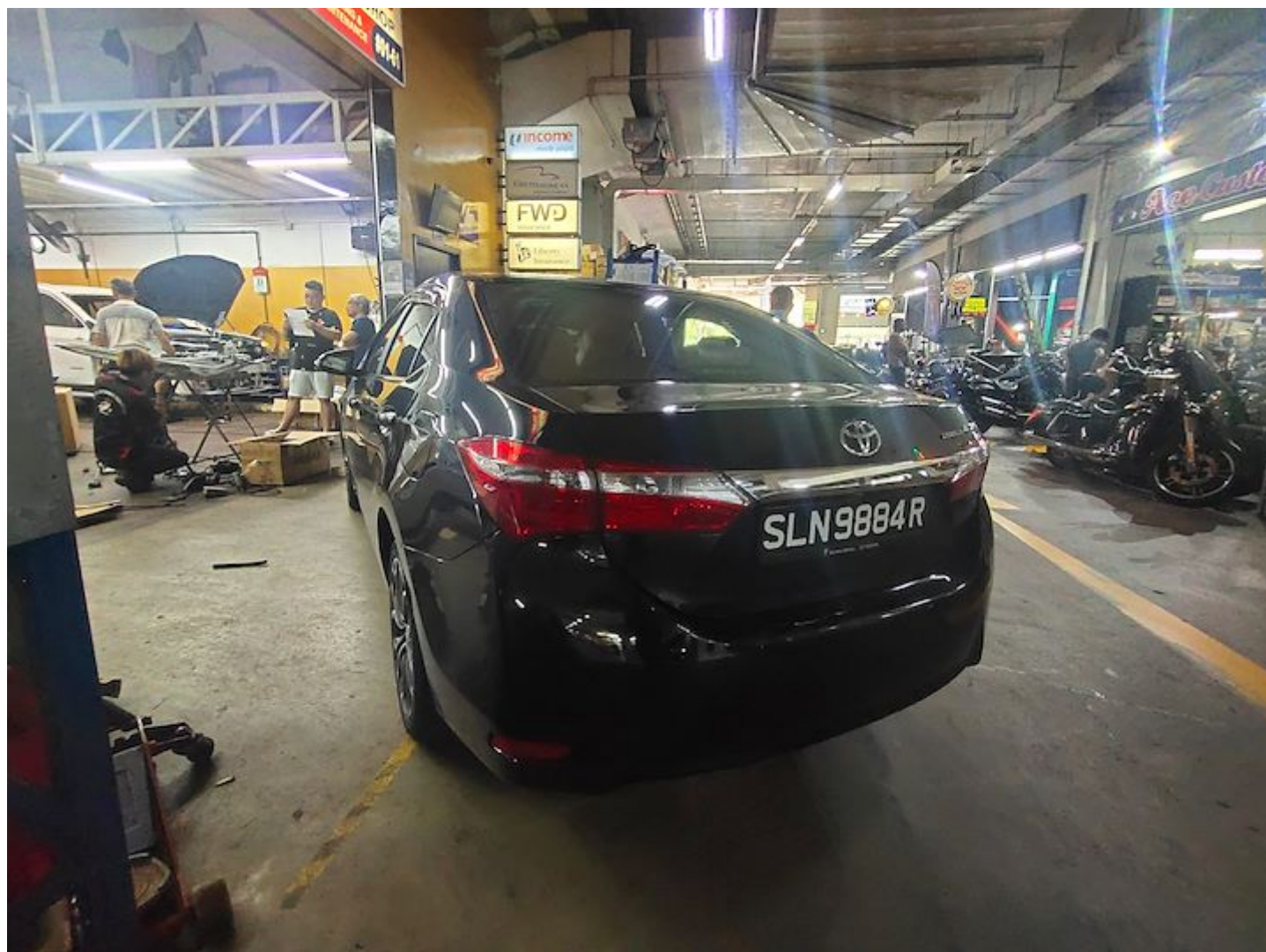














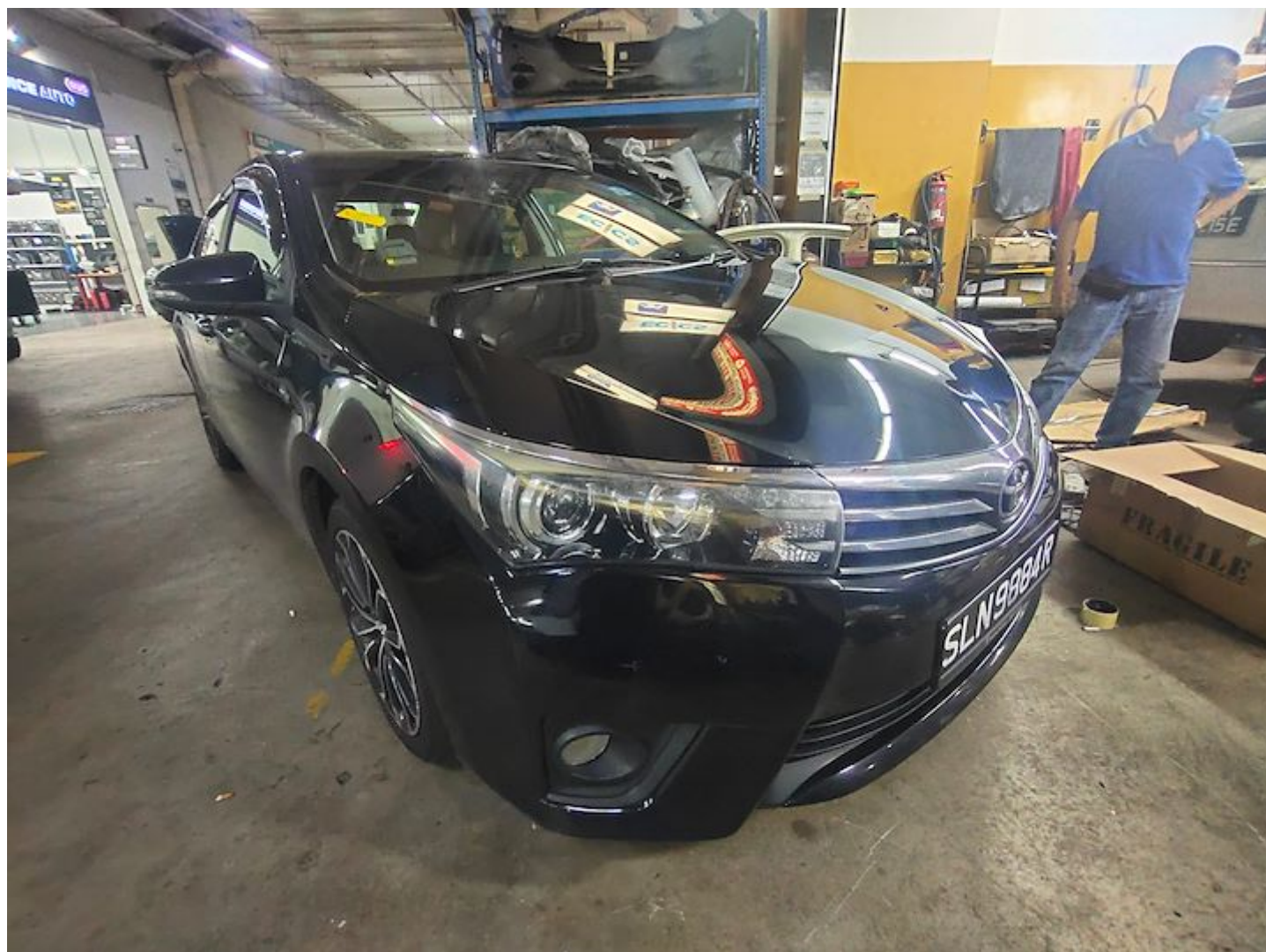
















**SINGAPORE  
POLICE FORCE**



T/20230523/2063

Police Station Of Origin:  
Woodlands East N.P.C.  
3 Woodlands Drive 63 SINGAPORE 737890  
Tel No: 1800-7679899

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Report No. T/20230523/2063

CONTINUATION OF REPORT

Signature of Officer Recording The Report:  
L /  
SR STAFF SGT MUHAMAD  
NAZREE BIN JABAR

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / GIA /  
SR STAFF SGT MUHAMMAD NOOR BIN  
ABDUL RAHMAN  
Contact No.: 65476219

NP168

Signature Of Informant:

Date/Time:  
23/05/2023 15:10

Classification Of Case:

Galaxy Note20 5G





**SINGAPORE  
POLICE FORCE**

Police Station Of Origin:  
Woodlands East N.P.C.  
3 Woodlands Drive 63 SINGAPORE 737890  
Tel No: 1800-7679999



T/20230523/2083

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Report No. T/20230523/2083

**CONTINUATION OF REPORT**

Details of Vehicle Insurance		Insurance No	Effective	Expiry Date
Vehicle No.	Insurance Company	5110955813-03	24/11/2022	23/11/2023
SLN9884R	NTUC Income Insurance Co-Operative Limited			

Details of Person Involved		Use of Pedestrian Crossing: NA	
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL			
Driver		ID No.	S6915133G
Name	SATVINDER SINGH S/O S JAGIR SINGH	Contact No.	91689554
Related Vehicle	SHD6679L (Car)	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Hospital/Clinic	NIL	Date Discharge	NIL
Date Treatment	NIL	Degree of Injury	NIL
No. of Days granted Medical Leave	NIL		

Driver		ID No.	S7409712Z
Name	TAN HENG POH	Contact No.	81123090
Related Vehicle	SLN9884R (Car)	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Hospital/Clinic	NOVENA MEDICAL CENTER FAMILY CLINIC	Date Discharge	23/05/2023
Date Treatment	23/05/2023	Degree of Injury	Slight
No. of Days granted Medical Leave	07		

**Brief Details.**

On 22/5/2023 at about 1730hrs, while I was driving along Rochor Road, I filter out to the left to turn into Bencoolen Street. The traffic was heavy, thus I waited awhile to filter out.

While waiting, a taxi came from the back and hit onto the rear of my vehicle. No Police or ambulance were called in. I exchange particulars with the said driver and we left the location.

I then sought for medical attention and was given 7 days of Medical leave.

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**SINGAPORE  
POLICE FORCE**


T/20230523/2063

1 of 3

Police Station Of Origin:  
Woodlands East N.P.C.  
3 Woodlands Drive 63 SINGAPORE 737890  
Tel No: 1800-7679999

Report No. T/20230523/2063

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made:  
23/05/2023 15:10

Vide Report No.:

Station Diary No.:  
78

**Informant's Particulars**

Name of Informant:  
TAN HENG POH

Address:  
APT BLK 887B WOODLANDS DRIVE 50 #07-591  
SINGAPORE 732887

ID Type / ID No.:  
NRIC NO / S7409712Z

Contact No.:  
Home/Office: Mobile: 81123090

Nationality:  
SINGAPORE CITIZEN

Email:

Sex: Male Age: 49 Date of Birth: 18/03/1974

Type of Informant:  
Driver

Race:  
Chinese

Language:

Occupation:  
PRIVATE HIRE DRIVER

Driving Licence Information:  
Class: 3 Date of Expiry:

**General Information of the Accident**

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 22/05/2023 17:30	Type of Location: Filter road
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Location:

ROCHOR ROAD

Weather:  
Clear

Road Surface:  
Dry

Traffic Flow:  
One Way

Traffic Control:  
Not Controlled

Traffic Volume:  
Heavy

Type of Collision:  
Between Moving Vehicles - Head To Rear

Anyone conveyed by ambulance:  
No

**Details of Vehicle Involved**

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHD6679L	Car				No Damage	1
SLN9884R	Car	TOYOTA	COROLLA ALTIS 1.6 CVT	Black	Slightly Damaged	0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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