

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	29/05/2023 09:58 (SGT)
Reported by	Actual Driver
Date of Accident	26/05/2023 17:35 (SGT)
Exact Location of Accident	1 Pasir Ris Cl, Singapore 519599
Additional Location Information	DOWNTOWN EAST
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHF233T
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	Strides Taxi Pte Ltd
Company Reg No	1XXXXX369K
Email Address	AUTO-SVCS-TARC@SMRT.COM.SG
Mobile Phone No	(Phone) +65-68662671
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Prius
Variant	-
Exact purpose for which vehicle was being used at time of accident	-
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Taxi
Transmission	Auto
CC	1800

INSURANCE COMPANY

Name of Insurance Company	MS First Capital Insurance Ltd
Policy Number / Cover Note Number	D-23100854MFSH

DRIVER

Name of Driver	TAN KHIANG CHIANG
NRIC No	SXXXX213H
Date Of Birth	05/09/1980
Occupation	Outdoor

Date Of Driving Pass	03/04/2010
Driving experience	13 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-68662672
Alt. Phone Number	-
Email Address	AUTO-SVCS-TARC@SMRT.COM.SG
Address	11
Address complement	-
Postcode	-
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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)	4
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	Female

PASSENGER 2

Name	UNKNOWN
Gender	Female

PASSENGER 3

Name	UNKNOWN
Gender	Female

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?	No
If yes, against whom?	-

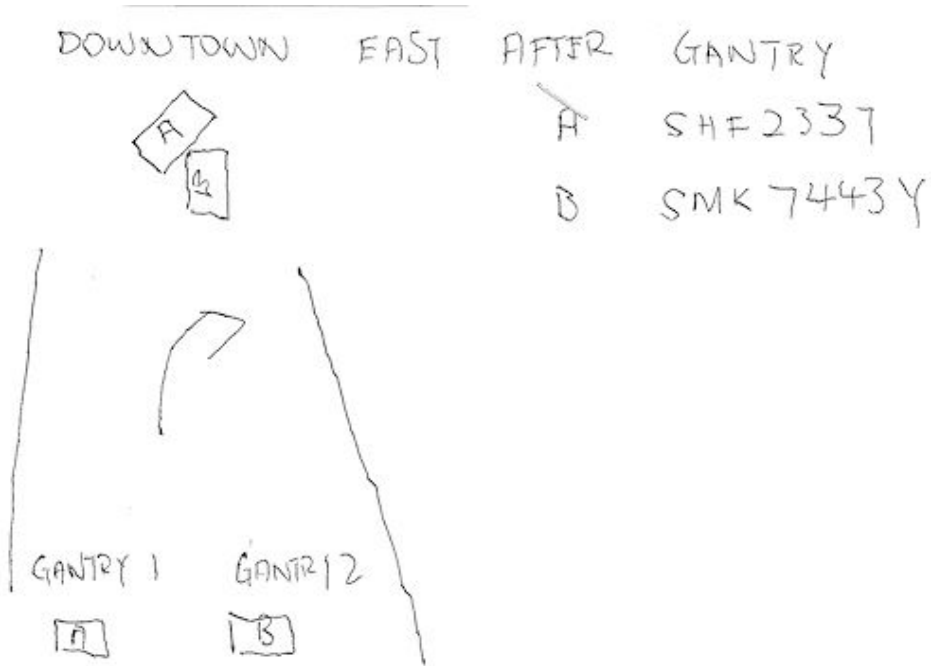
CIRCUMSTANCES OF ACCIDENT

REFER TO POLICE REPORT - T/20230527/7065

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 SMK7443Y
Vehicle Manufacturer -
Vehicle Model -
Vehicle Variant -
Vehicle Colour -
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) -



Blank lined area for additional notes or details.

Declaration

I/We declare the foregoing particulars are true in every respect.



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)

[Signature] 27/05/23

[Signature] 27.5.2023

SKETCH PLAN**IMPORTANT NOTICE**

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6. 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.
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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 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.



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

vJun2022

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**SINGAPORE
POLICE FORCE**



T/20230527/7065

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

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Report No. T/20230527/7065

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 27/05/2023 21:06		Vide Report No.: G/20230526/0168		Station Diary No.:	
Informant's Particulars					
Name of Informant: TAN KIANG CHIANG			Address: 436A FERNVALE ROAD #08-192 SINGAPORE 791436		
ID Type / ID No.: NRIC NO / S8027213H			Contact No.: Home/Office: Mobile: 93723933		
Nationality: SINGAPORE CITIZEN			Email: patricktankc80@gmail.com		
Sex: Male	Age: 42	Date of Birth: 05/09/1980	Type of Informant: Driver		
Race: Chinese			Language: English		
Occupation: Taxi driver			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 26/05/2023 17:35	Type of Location: Bend
Location: PASIR RIS CLOSE				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Conditio	No of
SHF233T	Car	TOYOTA	Prius	Brown	Slightly Damaged	4

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20230527/7065

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

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Report No. T/20230527/7065

CONTINUATION OF REPORT

Driver			
Name	TAN KIANG CHIANG		ID No. S8027213H
Related Vehicle	SHF233T (Car)		Contact No. 93723933
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Class: NIL Date of Expiry: NIL
Date	NIL		Date NIL
No. of Days granted Medical Leave	NIL		Degree of NIL

Brief Details.

I'm entering downtown east on the left side carpark gantry. There's another car entering on the right side gantry. I'm of length car ahead and it's suppose to be merging into one lane and when I turn to the right to the drop off point. The car half length behind me surge forward and hit me on the centre of the right side of my taxi with his left front of his car. He reversed back and move on. I thought he will stop in front to wait for me to drop off passengers but he did not and move off. After I drop the passenger I try to find the car in the multi storey carpark and also the chalet carpark but cannot find him. I called 999 to report the case and police officers came down to retrieve my memory card and took the photos which I had taken the car hit me by the side. It's a blue Renault car plate SMK7443Y.



**SINGAPORE
POLICE FORCE**

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



T/20230527/7065

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Report No. T/20230527/7065

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
KWOK WEI JIE, DANIEL
Contact No.: 89220186

Signature Of Informant:
The identity of the person making this report has
been authenticated by Singpass. No signature is
required.

Date/Time:
27/05/2023 21:06

Classification Of Case:

NP168