

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	26/05/2023 11:29 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	25/05/2023 10:50 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	Coleman street
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SME2945E
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	LEE SEONG KWANG ALAN
NRIC No	S0223194H
Email Address	SDQ3733@YAHOO.COM.SG
Mobile Phone No	(Phone) +65-98381854
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Hyundai
Model	Elantra
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private hire
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private hire
Transmission	Auto
CC	1600

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5119633970-02

DRIVER

Name of Driver	LEE SEONG KWANG ALAN
NRIC No	S0223194H
Date Of Birth	20/09/1954
Occupation	Outdoor

Date Of Driving Pass	01/12/1973
Driving experience	49 YEARS AND 5 MONTHS
Gender	Male
Mobile Number	(Phone) +65-98381654
Alt. Phone Number	-
Email Address	SDQ3733@YAHOO.COM.SG
Address	115 clementi st 13 #14-66
Address complement	-
Postcode	120115
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	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?	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

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	ADV TO UPLOAD ONTO MOTORVIDEO@INCOME.COM.SG

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHC3040D
Vehicle Manufacturer	-
Vehicle Model	-

Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Taxi
Name of Driver	UNKNOWN
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	1

SKETCH PLAN

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- 5 Any false reporting may be referred to the Traffic Police Department for investigation.
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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)

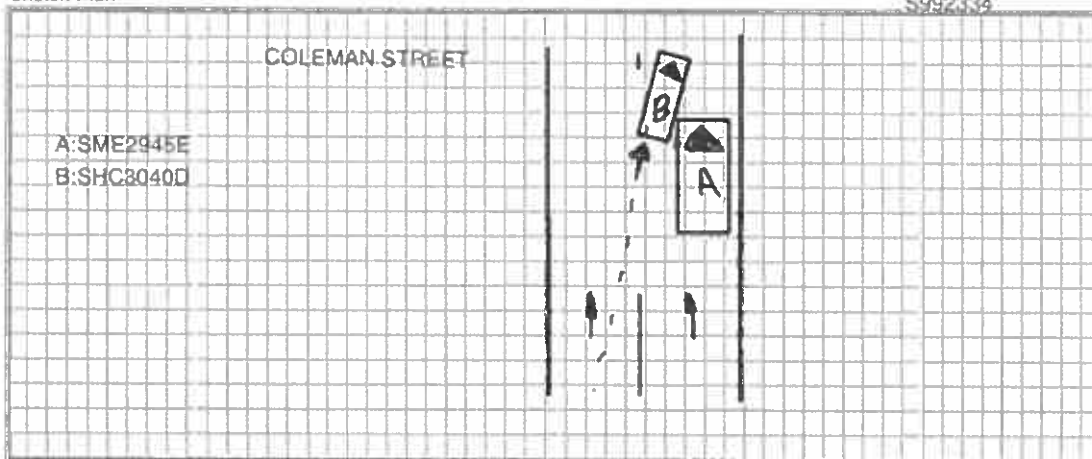
I understand, acknowledge, agree and consent that:

- (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

Policyholder's Signature / Date & Time
26/5/2023 1100
Sketch Plan

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

Witnessed by Reporting Centre Personnel
(Name as in NRIC/ID card) Tee Hong da
S992334

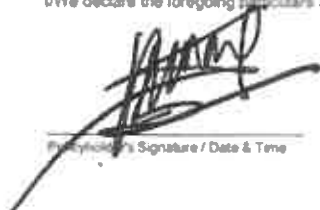


Describe Circumstance of the Accident

Refer to Police report

Declaration

I/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


Witnessed by Reporting Centre Personnel
(Name as in NRICAD card)
Tee Hong da S992334

26/5/2023 1100

2

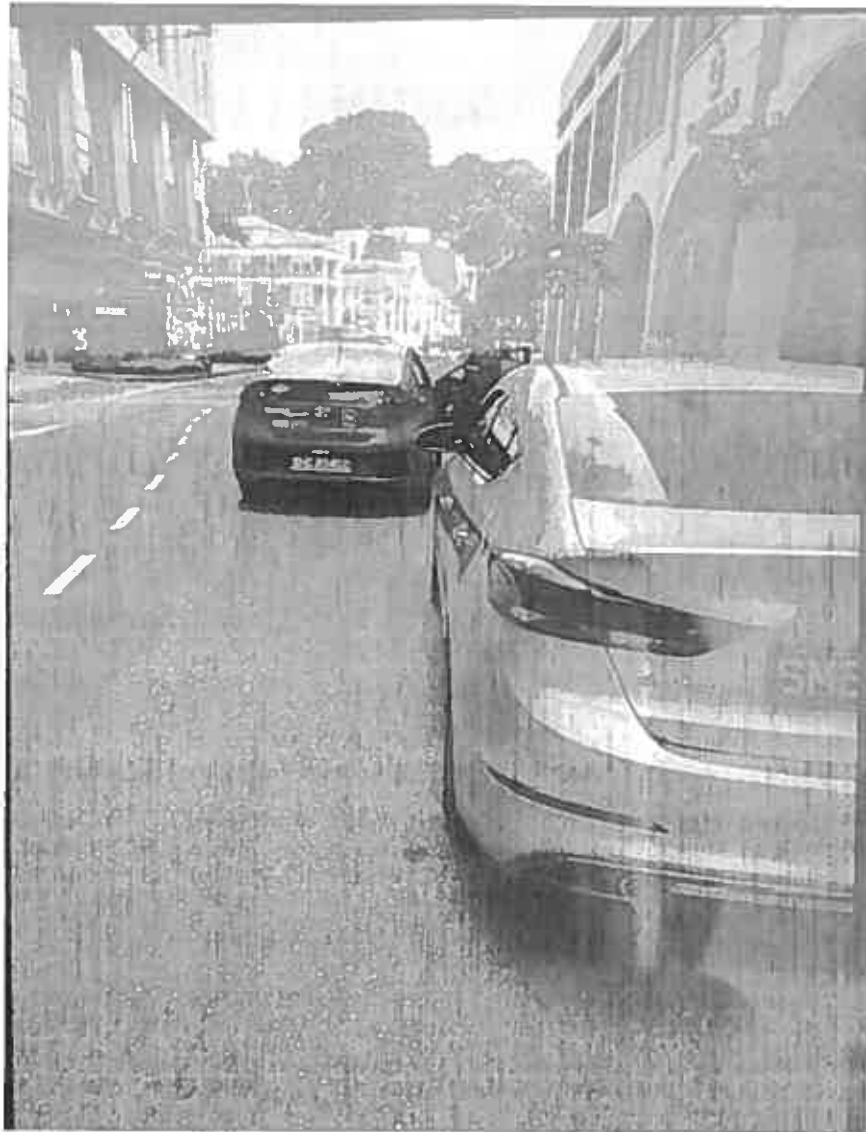
IMAGES



IMAGES #2



IMAGES #3



IMAGES #4



IMAGES #5



IMAGES #6



IMAGES #7



IMAGES #8





SINGAPORE POLICE FORCE



T/20230525/7082

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

1 of 3

Report No. T/20230525/7082

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/05/2023 22:06	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: LEE SEONG KWANG ALAN			Address: 115 CLEMENTI STREET 13 #14-66 SINGAPORE 120115		
ID Type / ID No.: NRIC NO / S0223194H			Contact No.: Home/Office: Mobile: 93831654		
Nationality: SINGAPORE CITIZEN			Email: SDQ3733@YAHOO.COM.SG		
Sex: Male	Age: 68	Date of Birth: 20/09/1954	Type of Informant: Driver		
Race: Chinese			Language: English		
Occupation: Taxi driver			Driving Licence Information: Class: 3 Date of Expiry: 25/05/2023		

General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive:	No	Date/Time of Accident:	25/05/2023 10:50	Type of Location:	Straight Road
Location: COLEMAN STREET							
Weather:		Road Surface: Dry					
Traffic Flow: One Way		Traffic Control: Not Controlled				Traffic Volume: Light	
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
SME2945E	Car	HYUNDAI	Elantra	Silver	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SME2945E	NTUC	5119633970-02	26/03/2023	25/03/2024



**SINGAPORE
POLICE FORCE**



T/20230525/7082

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

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Report No. T/20230525/7082

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved. No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LEE SEONG KWANG ALAN	ID No.	S0223194H
Related Vehicle	SME2945E (Car)	Contact No.	93831654
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: 25/05/2023
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

I am a Grab driver going to pick up my passenger at Grand Park City Hall hotel. As I was travelling very slowly on the extreme right lane toward the junction of Coleman Ln. I keep very right side of the road and then toward the hotel lobby. A taxi SHC3040D which was on my back left lane came very fast and swing into my path to get into the lobby. The Taxi then hit my front left hand side of my car. We (taxi driver and me) came down and look at the damage. The taxi driver claim that I was wrong. I told the taxi driver how to settle this problem and he did not even answer me. He took some pictures and as I was taking pictures he drove off without telling me or exchange particular. My passenger walk out and told me it was a small matter and whether I could still want to take the order. I agreed to drive him to Ritz Carlton Millenia hotel as I could not settle anything with the taxi driver who just drive away.



**SINGAPORE
POLICE FORCE**



T/20230525/7082

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

Report No. T/20230525/7082

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
RASHIDAH BINTE AZMAN
Contact No.: 65476902

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

Date/Time:
25/05/2023 22:06

Classification Of Case:

This report is lodged at West Coast NPP Kiosk
NP168

PRIVATE HIRE

