

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	01/06/2023 17:44 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	01/06/2023 14:15 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	TOWARDS CHANGI
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLA2017S
INSURED/POLICYHOLDER	
Is company?	No
Name Of Registered Owner	TOH AH SOON
NRIC No	SXXXX656F
Email Address	tonysoon28@gmail.com
Mobile Phone No	(Phone) +65-97647072
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Corolla
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	Private hire
Transmission	Auto
CC	1496

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMHCSNA00003282302

DRIVER

Name of Driver	TOH AH SOON
NRIC No	SXXXX656F
Date Of Birth	28/06/1970
Occupation	Outdoor

Date Of Driving Pass	09/11/1990
Driving experience	32 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97647072
Alt. Phone Number	-
Email Address	tonysoon28@gmail.com
Address	BLK 117B JALAN TENTERAM #12-515
Address complement	-
Postcode	322117
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	Raining
Road Surface	Wet

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?	No
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

PLEASE REFER TO SKETCH PLAN

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	WITH OWNER

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GBD2360C
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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	TOH AH SOON
Gender	Male
Phone No	(Phone) +65-97647072
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SLA2017S
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

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

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

01/04/2023

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

Sketch Plan

(A) SLA 2017 S

(B) GBD 2360 C

PIE TOWARDS CHANGI

Describe Circumstances of the Accident

On 1 June 2023 at around 2.15 PM, I was travelling straight along PIE towards Changi. Due to heavy traffic the vehicle in front of me slow down to a stop thus I follow suit to slow down and stop my vehicle (SLA 2017 S). Suddenly, I felt an impact from the rear of my vehicle (SLA 2017 S) and when I alighted from my vehicle I realise that vehicle B (GBD 2360 C) had collided onto the rear portion of my vehicle. (SLA 2017 S)

Declaration

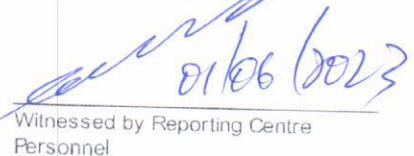
We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date & Time



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



01/06/2023

Witnessed by Reporting Centre Personnel

8

Personal Particulars of Owner & Driver (Vehicle A)

Date of Accident: 01/06/2023 (dd/mm/yy) Time of Accident: 14:15 (24-HR-FORMAT)
Vehicle No.: SLA2017S Vehicle Make & Model: TOYOTA COROLLA FIELDER
*Transmission: ☐ Manual ☒ Auto *C.c.: 1500
Exact location of Accident: PIE TOWARDS CHANGI
Policyholder's Name: TOH AH SOON NRIC/FIN/REG No.: S7021656F
*Policyholder's email address: tonysoon28@gmail.com
Driver's Name: TOH AH SOON NRIC/FIN/REG No.: S7021656F
*Driver's email address: tonysoon28@gmail.com
Driver's Contact No.: 97647072 Company Contact No (if any): -
Date of birth: 28/06/1970 Driving Pass Date: 09/11/1990
Driver's Address: BLK 117B JALAN TENTERAM #12-515 (S) 322117
Insurance Company: CHINA TAIPING
Policy No.: DMHCSNA00003282302 Type of Coverage: Comprehensive / Third Party / Third Party, Fire & Theft
Relationship between Owner & Driver: (Please CIRCLE one only)
Owner / Spouse / Children / Friend / Parents / Sibling / Relative / Employee / Hirer or Others specify: _____
What do you wish to claim? (Please TICK one only)
☐ Own Insurance / ☒ Other Vehicle (The one you want to claim against) / ☐ Reporting (For Record Purpose)
Type of Accident
☐ Chain Collision ☒ Head To Rear ☐ Side Swipe ☐ Other _____
Occupation (nature job) ☐ Indoor ☒ Outdoor *No. of Passengers / Including Driver: 1
*Passenger Name: _____ Gender: Male / Female
*Passenger Name: _____ Gender: Male / Female
Weather condition & Road conditions? (On the day of accident)
☐ Clear & Dry ☒ Raining & Wet / ☐ After-Rain & Wet / ☐ Drizzling & Wet / Others: _____
Was there any video captured by your car Car camera? ☒ Yes ☐ No
Any Injuries: ☒ Yes ☐ No (If YES) Injured Person's Name: TOH AH SOON
Injuries Sustain: Back, Neck, Shoulder, Chest Injured Person in Which Vehicle: SLA2017S
Police Report filed: ☐ Yes / ☐ No (If YES) Which Police Station: _____

The Other Party (S) Details:

1. Driver's Name / IC No: _____ Vehicle No: GBD2360C
Driver's Contact No: _____ Insurance Company: _____
2. Driver's Name / IC No (If Any): _____ Vehicle No: _____
Driver's Contact No: _____ Insurance Company: _____
*Independent Witness (If Any): _____ Contact No: _____
Preferred Workshop Name: _____ Contact No: _____



中国太平
CHINA TAIPING

中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Motor Hire Car

CERTIFICATE OF INSURANCE

Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189)
Motor Vehicles (Third-Party Risks and Compensation) Rules, 1960
Road Transport Act, 1987 (Malaysia)
Motor Vehicles (Third-Party Risks) Rules, 1959 (Malaysia)

MZ406L/B

R SN

AN0101A

Cov. Type:C

CERTIFICATE No.

DMHCSNA00003282302

Engine No.: 2NR8499848

Cha. No.: NRE1618001067

1. Index Mark and Registration
Number of Vehicle

SLA2017S

AUTOSAFE

2. Name of Policy Holder

TOH AH SOON

3. Effective date of the Commencement of
Insurance for the purposes of the Regulations,
Ordinance or Enactment

24/02/2023
(00:00:00)

Excess Sect. I. \$S1,250.00

Excess Sect. I (Outside Singapore) \$S2,500.00

Excess Sect. II \$S1,250.00

Excess Sect. II (Outside Singapore). \$S2,500.00

EX ON WINDSCREEN. \$S100.00

4. Date of Expiry of Insurance

23/02/2024

5. Persons or Classes of Persons entitled to drive*

As per Named Driver(s) stated below.

Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle.

TOH AH SOON

CHIN SWEE KWAN

6. Limitations as to use:*

(1) Use for the carriage of passengers or goods in connection with the Policyholder's business.

(2) Use for social domestic pleasure purposes and business purposes of any person to whom the vehicle is hired.

The Policy does not cover

(1) Use for racing, pace-making, reliability trial or speed-testing.

(2) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled mechanically propelled vehicle.

HIRE PURCHASE CO.: CHUAN LEE ENTERPRISES PTE LTD

* Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act 1987 (Malaysia), are not to be included under these headings.

I/We hereby Certify that the policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).

Please see reverse

For CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

Issued By: Muhammad Safwan Bin Mohamed

Authorised Officer

Authorised Signatory

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)
3 Anson Road #16-00 Springleaf Tower Singapore 079909

6389 6111

6222 1033

www.sg.cntaiping.com

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S7021656F



Name

TOH AH SOON

卓亞順

Race

CHINESE

Date of Birth

28-06-1970

Sex

M

Country of Birth
SINGAPORE



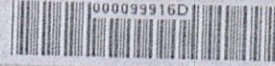
REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number S7021656F

Name TOH AH SOON

Birth Date: 28 Jun 1970

Issue Date: 08 Jan 2003



Land Transport Authority

VOCATIONAL LICENCE

Licence No: S7021656F

Name: TOH AH SOON

Issue Date: 6/5/2011

Please visit www.lta.gov.sg to check the status of this vocational licence



1680078

NRIC No: S7021656F



Blood Group Date of issue

B+ 16-02-1994

APT BLK 117B JALAN TENTERAM #12-515
SINGAPORE 322117

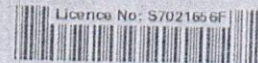
NRIC No: S7021656F

Date: 17/03/2017

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

		PASS DATE
Class 2B	Motorcycles not exceeding 200 cc	03 Apr 1995
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	09 Nov 1990
Class 4	Heavy Motor Cars and Motor Tractors the weight of which unladen exceeds 2500 kilograms	15 Oct 1991
Class 5	Motor Vehicles which are not constructed themselves to carry any load and the weight of which unladen exceeds 7250 kilograms	06 Jan 1992

NP 428A



This card is not transferable and is the property of the Land Transport Authority (LTA). It must be surrendered to LTA on request. If found, please return to LTA, 10 Sin Ming Drive, Singapore 575701.

Type	Description	Issue Date
03	BUS VL	21/02/2006
02	TAXI VL	16/05/2011
04	BUS ATTENDANT	1/02/2006



* > Back to OneMotoring

• Enquire PARF/COE Rebate for Registered Vehicle

Vehicle Owner Particulars

Owner ID Type:

Singapore NRIC

Owner ID:

656F

Vehicle Details

Vehicle No.:

SLA2017S

Vehicle to be Exported:

Yes

Intended Deregistration Date:

01 Jun 2023

Vehicle Make:

TOYOTA

Vehicle Model:

COROLLA FIELDER 1.5X CVT ABS AIRBAG 2WD

Primary Colour:

Blue

Manufacturing Year:

2015

Engine No.:

2NR8499848

Chassis No.:

NRE1618001067

Maximum Power Output:

80.0 kW (107 bhp)

Open Market Value:

\$15,756.00

Original Registration Date:

24 Feb 2016

First Registration Date:

24 Feb 2016

Transfer Count:

1

Actual ARF Paid:

\$10,756.00

Intended PARF Rebate Details

PARF Eligibility:

Yes

PARF Eligibility Expiry Date:

23 Feb 2026

PARF Rebate Amount:

\$6,453.00

Intended COE Rebate Details

COE Expiry Date:

23 Feb 2026

COE Category:

A - Car up to 1600cc & 97kW (130bhp)

COE Period(Years):

10

QP Paid:

\$43,000.00

COE Rebate Amount:

\$11,748.00

Total Rebate Amount:

\$18,201.00

The information contained herein is correct as at 01 Jun 2023

OK