# **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 witholding 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.

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   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 13/06/2023 14:22 (SGT) Reported by Both Policyholder and Actual Driver Date of Accident 12/06/2023 17:48 (SGT) Exact Location of Accident Singapore Additional Location Information **BUKIT BATOK AVE 6, AVE 3** Country/State of Loss Singapore

#### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number SMZ7154C

INSURED/POLICYHOLDER

Is company? No Name Of Registered Owner SEAN CHUN YUIN CHYI NRIC No S7700232D Email Address MASSIVETRD@GMAIL.COM Mobile Phone No (Phone) +65-91053307 Alternative Phone No

VEHICLE PARTICULARS

Manufacturer Kia Model Cerato Variant Exact purpose for which vehicle was being used at time of Private hire

accident Are you claiming under your own insurance policy for repair to

No - Claiming third party your vehicle? Vehicle Category Private hire Transmission Auto CC 1591

**INSURANCE COMPANY** 

Name of Insurance Company China Taiping Insurance (Singapore) Pte. Ltd. Policy Number / Cover Note Number DMHCSNA00001492301

DRIVER

Name of Driver SEAN CHUN YUIN CHYI NRIC No S7700232D Date Of Birth 05/01/1977 Occupation Outdoor

Date Of Driving Pass Driving experience Gender	19/05/1997 26 YEARS AND 1 MONTH Female
Mobile Number Alt. Phone Number	(Phone) +65-91053307
Email Address	- MASSIVETRD@GMAIL.COM
Address	APT BLK 460B BUKIT BATOK WEST AVE 9
Address complement	#04-43
Postcode	652460
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?	Yes
Was any injured conveyed to hospital by ambulance?	No
Was any other vehicle or property damaged?	Yes
Number of Passengers (Including Driver)	3
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	
THOOLINGER 2	
Name	UNKNOWN
Gender	Female
DETAILS OF POLICE ACTION	
Was the accident reported to the police?	Yes
Police Station Name	Hougang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004890999
Alt. Police Station Phone No	(Fax) +65-63128989
Police Station Address	60 Hougang Ave 9 Singapore 538775
Was notice of intended Prosecution given?	No
If yes, against whom?	-
CIRCUMSTANCES OF ACCIDENT	
PLEASE REFER TO ATTACHED STATEMENT	
ATTACHMENT(S)	

Yes Yes

Are accident photos available for attachment? Was there any video captured by Car Camera?

# **DETAILS OF OTHER VEHICLE PROPERTY 1**

Vehicle Registration Number	SNJ6432D
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	MOK SHI FU, FREDRIC
NRIC No	S9535664H
Contact Number	(Phone) +65-86542894
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 Gender Phone No Address Address Complement Post Code Approximate Age Years Old Injuries Sustained Injured person in which vehicle?	SEAN CHUN YUIN CHIYI Male (Phone) +65-91053307 APT BLK 460B BUKIT BATOK WEST AVE 9 #04-43 652460 - BACK&NECK PAIN SMZ7154C
Were seat belts worn? Was this injured conveyed to hospital by ambulance?	Yes No
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#### SKETCH PLAN

### IMPORTANT NOTICE

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- Consent under the Personal Data Protection Act (PDPA)

Lunderstand, acknowledge, agree and consent that :

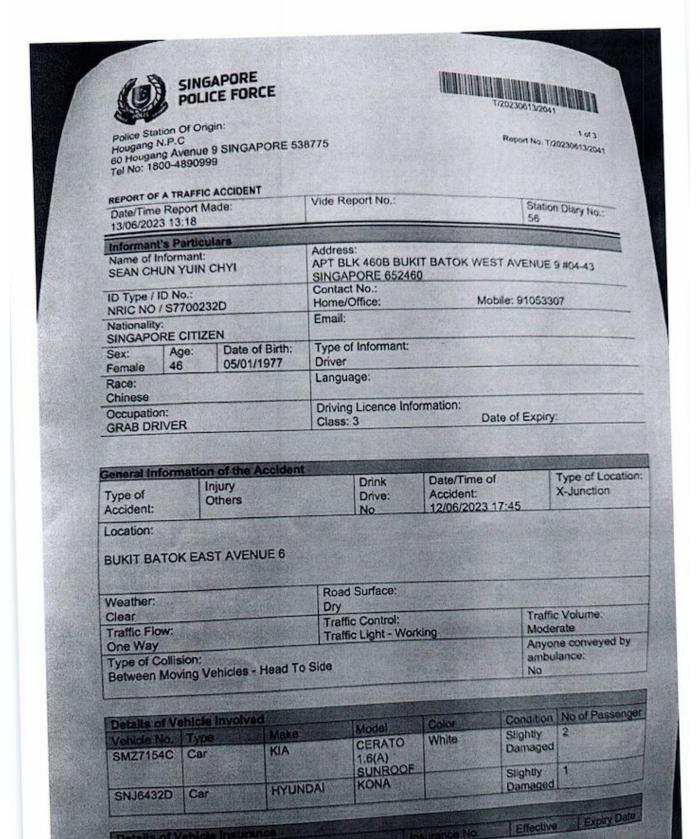
- (a) My insurer , my workshop and the General insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively 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' law yers/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;
- (ii) 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.

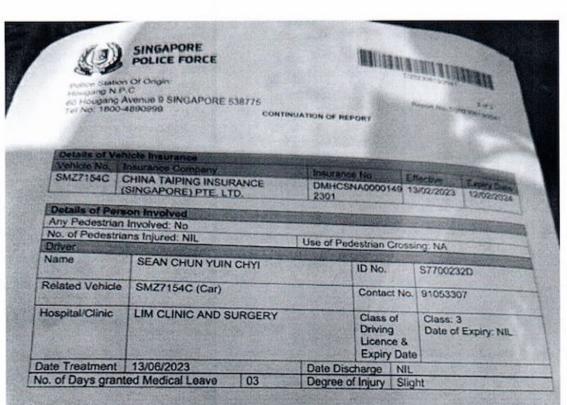
(collectively the "Purposes")

- (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 law yers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.

3/6/2023 Driver's Signature (If driver is not the policyholder) / Date Witnessed by Reporting Centre Policyholder's Signature / Date & & Time ukit batok ave b, Ave 3 Sketch Plan

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rear left of my cor.		
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Declaration		
I/We declare the foregoing particulars are true in every respect.	L	
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Cu hilly	W. W	13/6/2023
Policyholder's Signature / Date & Time Actual Driver's Signature / Date & Time	(Name #a lo NR	sporting Centre Personnel (IC/ID card)
		ex-modelen for
v.Jun2022	¥ 2	2
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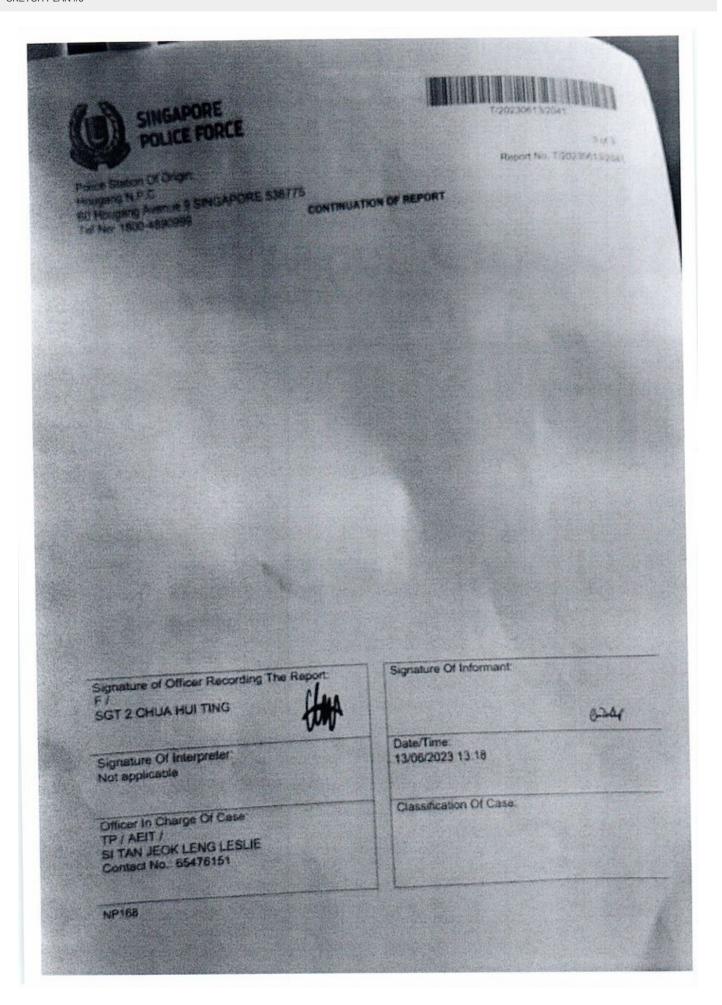




#### Brief Details.

On 12/06/2023 1748hrs, while I was driving my car (White KIA Cerato SMZ7154C) on Bukit Batok East Ave 6, going straight towards the other side of the cross junction, a White Hyundai Kona, SNJ6432D (GetGo Carsharing) dashed the red light from Bukit Batok East Avenue 3 turning right towards Bukit Batok East Avenue 6 and crashed into the left side of my car. The left passenger door of my car was dented and unable to open due to the crash. And the front of his car was crushed, and his car plate dropped. At that time, there were 2 grab passengers on my car, however I am unsure how many passengers were on his car. The driver (Mok Shi Fu, Fredric, S9535664H. 86542894) exited his car and made a check on his car. We both agreed on settling the accident through insurance. I went to Lim Clinic and Surgery as my back and neck fell pain after the accident and got 3 days MC.

I would like to add that I have the video footage of the accident from my dashcam. I am making this report for insurance purposes.

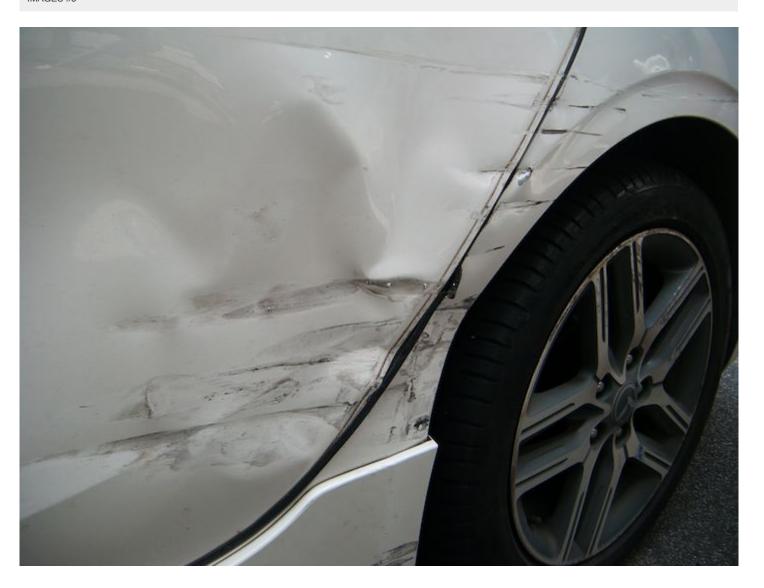




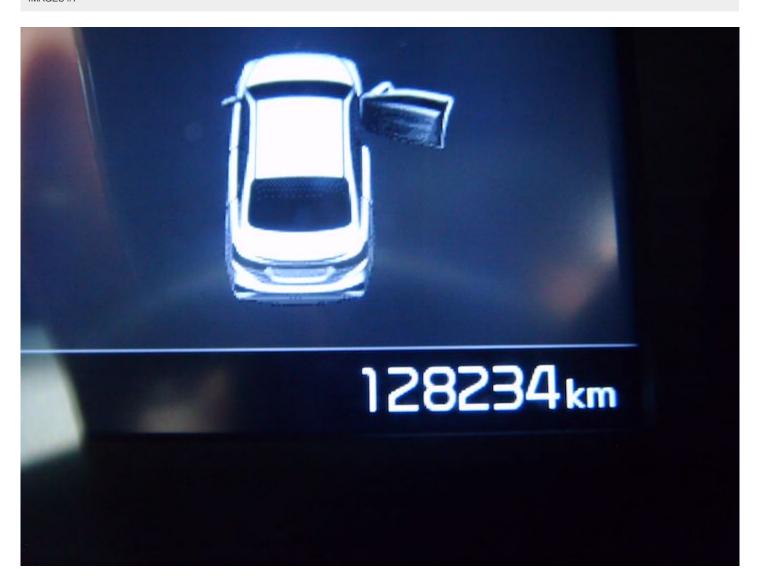




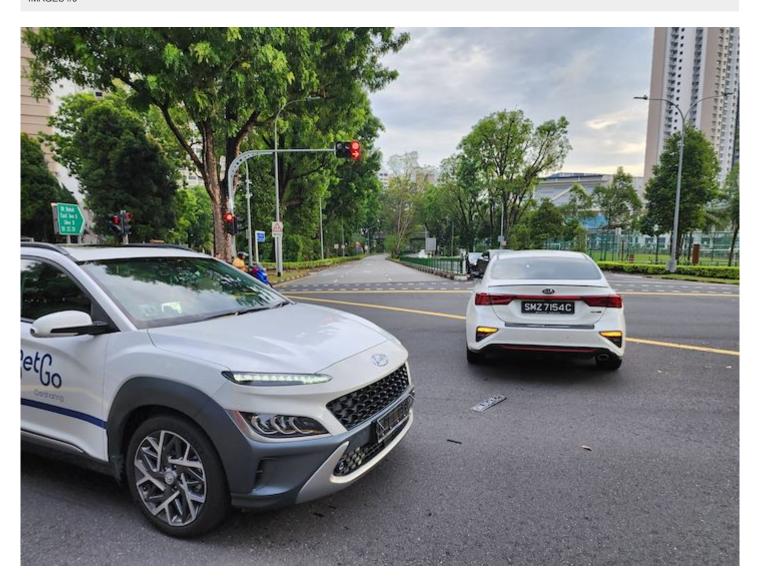




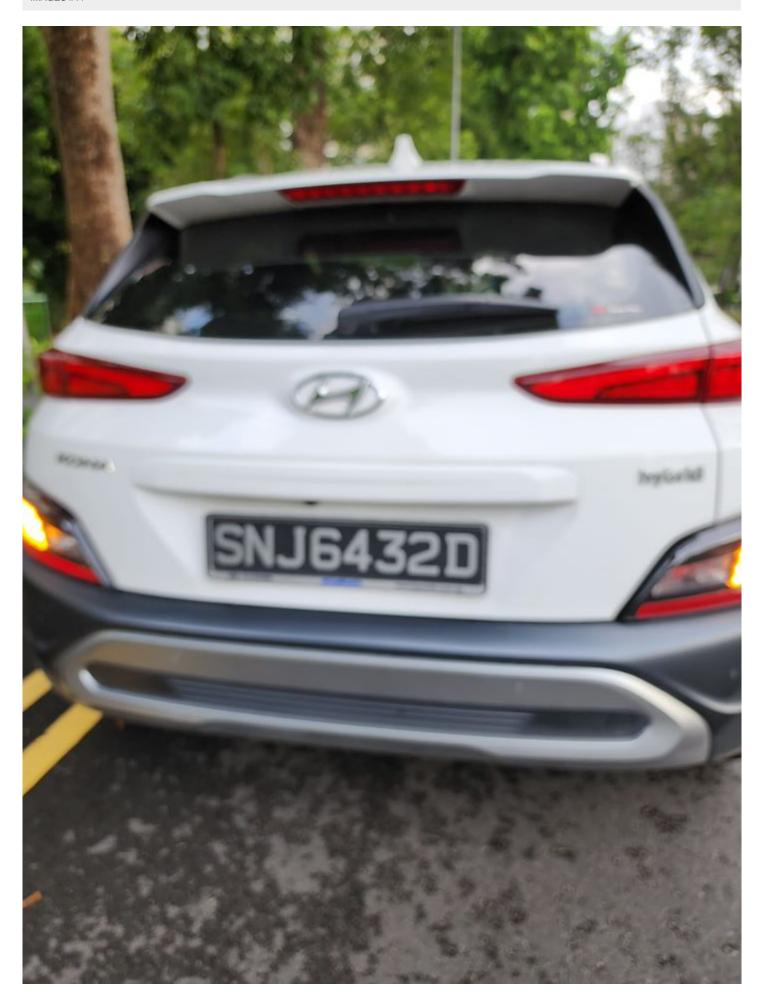


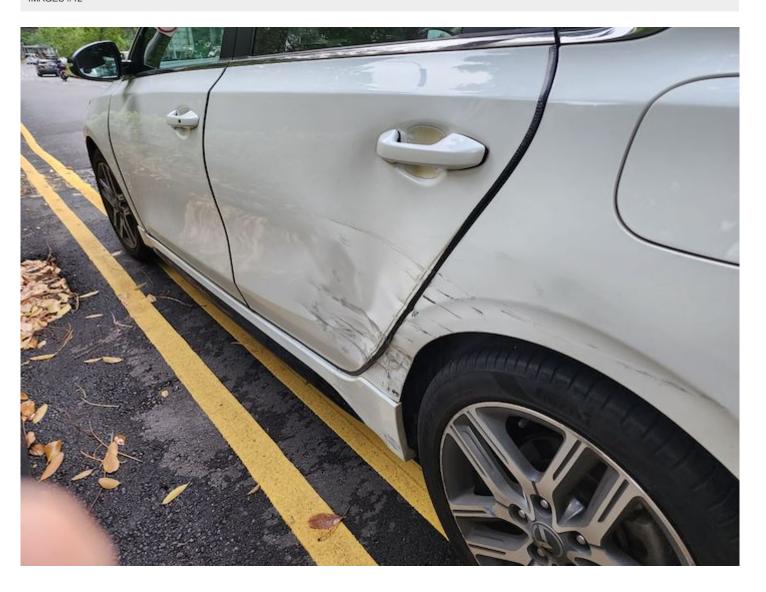


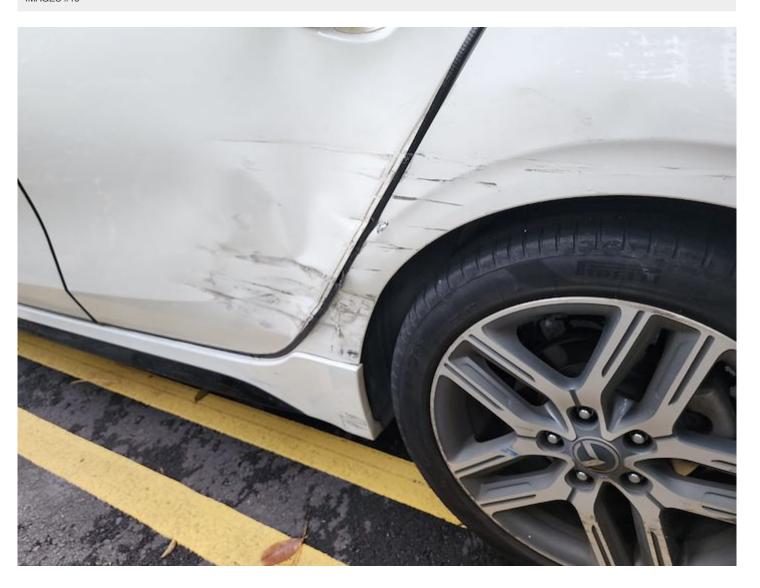














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I would like to add that I have the video footage of the accident from my dashcam. I am making this report for insurance purposes.



Police Station Of Origin: Hougang N.P.C 60 Hougang Avenue 9 SINGAPORE 538775 Tel No: 1800-4890999



1 of 3 Report No. T/20230613/2041

# REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: Vide Report No.: Station Diary No.: 56

	23 13.10			56
Informa	nt's Partic	ulars	THE PARTY OF THE P	
Name of	Informant: HUN YUIN		Address: APT BLK 460B BUKIT BATOR SINGAPORE 652460	WEST AVENUE 9 #04-43
ID Type /	ID No.: 7 S77002	32D	Contact No.: Home/Office:	Mobile: 91053307
Nationalit SINGAPO	ty: ORE CITIZ	EN	Email:	
Sex: Female	Age: 46	Date of Birth: 05/01/1977	Type of Informant: Driver	
Race: Chinese			Language:	
Occupation: GRAB DRIVER			Driving Licence Information: Class: 3	Date of Expiry:

General Information of the Accident					
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 12/06/2023 17:45	Type of Location: X-Junction	

# BUKIT BATOK EAST AVENUE 6

Location:

Weather:
Clear
Traffic Flow:
One Way
Type of Collision:
Between Moving Vehicles - Head To Side

Road Surface:
Dry
Traffic Control:
Traffic Control:
Traffic Light - Working
Moderate
Anyone conveyed by ambulance:
No

Details of V	enicie invo		Model	Color	Condition	No of Passenger
Vehicle No.	Type	Make	LA LA SACRA	The state of the s	Slightly	2
SMZ7154C Car	Car	KIA	CERATO 1.6(A)	White	Damaged	
			SUNROOF		Slightly 1	1
SNJ6432D	Car	HYUNDAI	KONA		Damaged	

Details of V	ehicle Insurance	Insurance No	Effective Expiry Date
Vehicle No.	Insurance Company		

