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.
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	19/06/2023 13:32 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	19/06/2023 08:25 (SGT)
Exact Location of Accident	Bukit Timah Expy, Singapore
Additional Location Information	BKE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SNB361G

INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TAN QI HAO, DESMOND (CHEN QIHAO)
NRIC No	SXXXX261C
Email Address	DESTIEN7@GMAIL.COM
Mobile Phone No	(Phone) +65-97974650
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Sienta
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	1496

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5123060298-01

DRIVER

Name of Driver	TAN QI HAO, DESMOND (CHEN QIHAO)
NRIC No	SXXXX261C
Date Of Birth	04/09/1987
Occupation	Indoor

Date Of Driving Pass	06/06/2009
Driving experience	14 YEARS
Gender	Male
Mobile Number	(Phone) +65-97974650
Alt. Phone Number	-
Email Address	DESTIEN7@GMAIL.COM
Address	286ACOMPASSVALE CRESCENT #10-83
Address complement	-
Postcode	541286
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	Chain Collision
Weather Conditions	Clear
Road Surface	Dry

OTHER INFORMATION

Was any foreign vehicle involved in the accident?	No
Number of vehicles involved in the accident	3
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)	2
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	PASSENGER
Gender	Male

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Bishan Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18005529999
Alt. Police Station Phone No	(Fax) +65-65561905
Police Station Address	20 Bishan Street 23 Singapore 579757
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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SGM8588S
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)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMC4810H
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)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	TAN QI HAO, DESMOND (CHEN QIHAO)
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	GRANTED FOR 5 DAYS MC
Injured person in which vehicle?	SNB361G
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

IMPORTANT NOTICE

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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 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.

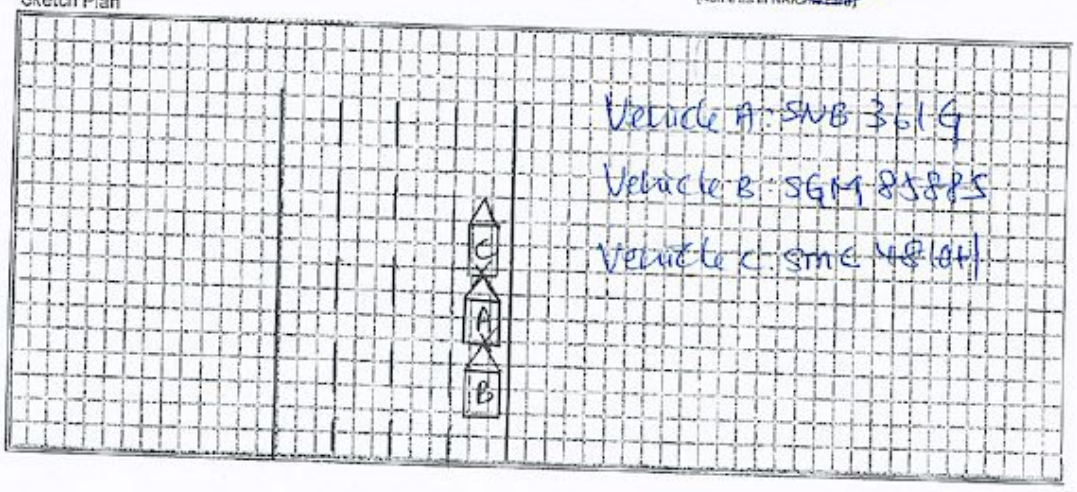
Policyholder's Signature / Date & Time

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

ABWIN SERVICE PTE Co. Reg. No. 201316865G

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

Sketch Plan



1

Describe Circumstance of the Accident:

REFER TO POLICE REPORT
T/20230619/2033
and
T/20230619/2034

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

ABWIN SERVICE PTE LTD Co. Reg. No. 201316885G

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

2

IMAGES

IMAGES #2

IMAGES #3


TOYOTA MOTOR CORPORATION JAPAN
MODEL 6AA-NHP170G-MWXNB
ENGINE 1NZ-EXE 1496 mL
FRAME No. NHP170-7180558
COLOR 070 TRIM FB20 PLANT N21 OPTION 663
TRANS./AXLE P510 -02A

IMAGES #5

IMAGES #6

IMAGES #7

IMAGES #8

IMAGES #9

T/20230619/2034

Report No. T/20230619/2034

Case Summary Form (CSF For NP168)

Manual NP168 Form Serial No	1
Report Number	T/20230619/2034
Vide Report Number	T/20230619/2033
Date/Time of Report Made	19/06/2023 12:04
Place Report Lodged	Traffic Police
Type of Informant	Driver
Name of Informant	Tan Qi Hao,Desmond
ID Type / ID No.	NRIC NO / S8727261C
Home/Office	
Mobile	97974650
Email	
Type of Accident	Injury / Others
Drink Drive	No
Anyone conveyed by ambulance	No
Date/Time of Accident	19/06/2023 08:25
Accident Location	BUKIT TIMAH EXPRESSWAY

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGM8588S	Car					0
SMC4810H	Car					0
SNB361G	Car	TOYOTA	SIENTA HYBRID 1.5X CVT	White	Seriously Damaged	1

Details of Person Involved

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

T/20230619/2034

Report No. T/20230619/2034

Continuation of CSF For NP168

Driver				
Name	Zheng Zuan		ID No.	S7962823I
Related Vehicle	SGM8588S (Car)		Contact No.	88510907
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL	
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL	

Driver				
Name	Tan Qi Hao,Desmond		ID No.	S8727261C
Related Vehicle	SNB361G (Car)		Contact No.	97974650
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	19/06/2023	Date Discharge	19/06/2023	
No. of Days granted Medical Leave	05	Degree of Injury	Slight	

Brief Facts.

This report is lodged to amend the vehicle involved column of the master report T/20230619/2033.

SINGAPORE POLICE FORCE

T/20230619/2033

Report No. T/20230619/2033

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made:	Vide Report No.:	Station Diary No.:
19/06/2023 11:41		52

Informant's Particulars

Name of Informant: TAN QI HAO, DESMOND			Address: APT BLK 286A COMPASSVALE CRESCENT #10-83 SINGAPORE 541286
ID Type / ID No.: NRIC NO / S8727261C			Contact No.: Home/Office: Mobile: 97974650
Nationality: SINGAPORE CITIZEN			Email:
Sex: Male	Age: 35	Date of Birth: 04/09/1987	Type of Informant: Driver
Race: Chinese			Language:
Occupation: PRIVATE HIRE DRIVER			Driving Licence Information: Class: Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 19/06/2023 08:25	Type of Location: Straight Road
Location: BUKIT TIMAH EXPRESSWAY				
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 Passengers
SGM8588S	Car					0
SMC4810H	Car				Seriously Damaged	0
SNB361G	Car	TOYOTA	SIENTA HYBRID 1.5X CVT	White		0

SINGAPORE POLICE FORCE

T/20230619/2033

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

Report No. T/20230619/2033

CONTINUATION OF REPORT

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
SNB361G	NTUC Income Insurance Co-Operative Limited	5123060298-01	28/07/2022	27/07/2023

Details of Person Involved

Any Pedestrian Involved: No

No. of Pedestrians Injured: NIL | Use of Pedestrian Crossing: NA

Driver

Name	zheng zuan	ID No.	S7962823I
Related Vehicle	SGM8588S (Car)	Contact No.	88510907
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Driver

Name	TAN QI HAO, DESMOND	ID No.	S8727261C
Related Vehicle	SNB361G (Car)	Contact No.	97974650
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	19/06/2023	Date Discharge	19/06/2023
No. of Days granted Medical Leave	05	Degree of Injury	Slight

Brief Details.

On 19/06/2023 at around 0825hrs, I was driving vehicle(SNB361G) on lane 1 along BKE(PIE) near Dairy Farm Exit. The traffic was heavy and I was moving slowly. Subsequently, a vehicle (SMC4810H) in front of me stopped. As such, I followed suit. I then felt an impact from my rear which caused me to move forward and hit the rear of the front vehicle.

I then came down to make a check. I saw that vehicle(SGM8588S) had knocked my rear. The other driver(front vehicle) had come down to make a check and left. I did not manage to check with her if her vehicle was ok and do not have her particulars. I then exchanged particulars with the rear driver and took some photographs before taking my leave. My vehicle's rear portion was dented in due to the impact. I have both the front and rear in car camera and it is working. After the incident, I felt some pain at my head, neck and back. Thus, I went to see a doctor. I received 5 days MC. I have one passenger and he is fine.

I am lodging this report for insurance claims and Traffic Police investigation.

SINGAPORE POLICE FORCE

T/20230619/2033

3 of 3

Report No: T/20230619/2033

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

CONTINUATION OF REPORT

Signature of Officer Recording The Report: E / SGT 3 KHAIRUL SYAZWAN BIN SAHAK	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 19/06/2023 11:41
Officer In Charge Of Case: TP / AEIT / SR STAFF SGT FAHKRUL RAZI BIN SUHAIME Contact No.: 65470000	Classification Of Case:

NP168

PRIVATE HIRE

income
made yours

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)
ROAD TRANSPORT (AMENDMENT) ACT, 2019 (MALAYSIA)
MOTOR VEHICLES (THIRD PARTY RISKS) RULES, 1959 (MALAYSIA)

Certificate Number: 5123060298-01 **Cover** : drivo CLASSIC

1. Index mark and Registration Number of Vehicle : **SNB361G**
   Chassis Number : NHP1707180558
2. Name of Policyholder : TAN QI HAO, DESMOND (CHEN QIHAO)
3. Effective Date of Insurance : 28 Jul 2022
4. Expiry Date of Insurance : 27 Jul 2023
5. Persons or Classes of Persons entitled to drive#
   (a) The Policyholder.
   (b) Any other person who is driving on the Policyholder's order or with his/her permission.
   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.
6. Limitations as to Use#
   (a) Use for social domestic and pleasure purposes and in connection with the Policyholder's or Hirer's business.

This Policy does not cover

(a) Use for racing, pace-making, reliability trial or speed-testing.
(b) Use for the carriage of goods (other than samples) in connection with any trade or business.
(c) Use for any purpose in connection with the Motor Trade.

Limitations rendered inoperative by Section 8 of the Motor Vehicle (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.

This Policy, the Schedule, Endorsement and the Certificate of Insurance are to be read together as one document.

EXCESS (SECTION 1)	: S$2,000
EXCESS (SECTION 2)	: S$1,500
WINDSCREEN EXCESS	: S$100
ADDITIONAL EXCESS	: N/A
REPAIR AT OWNER'S PREFERRED WORKSHOP	: NO
INSURE WITH COE	: YES
NCD PROTECTION	: NO
ROADSIDE ASSISTANCE AND WELLNESS COVER	: YES
TRANSPORT ALLOWANCE	: NO
EXCESS WAIVER	: NO
PRIMARY DRIVER	: TAN QI HAO, DESMOND (CHEN QIHAO)
NAMED DRIVER (1)	: N/A
NAMED DRIVER (2)	: N/A
HIRE PURCHASE COMPANY	: N/A
SUM INSURED	: MARKET VALUE OF INSURED VEHICLE AT TIME OF LOSS

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)

Agency : S & M ALLIANCE PTE. LTD. (00000614373)
Date of Issue : 14 Jul 2022 12:52 hrs

For NTUC INCOME INSURANCE CO-OPERATIVE LIMITED

Chief Executive