

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	23/06/2023 13:09 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	22/06/2023 19:20 (SGT)
Exact Location of Accident	PIE, Singapore
Additional Location Information	TOWARDS TUAS AFTER STEVENS ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLT9380X
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TAY SIEW KHIM
NRIC No	SXXXX592A
Email Address	khimtay1@gmail.com
Mobile Phone No	(Phone) +65-91730886
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Wish
Variant	-
Exact purpose for which vehicle was being used at time of accident	Private use
Are you claiming under your own insurance policy for repair to your vehicle?	No - Claiming third party
Vehicle Category	Private car
Transmission	Auto
CC	1798

INSURANCE COMPANY

Name of Insurance Company	AIG Asia Pacific Insurance Pte. Ltd.
Policy Number / Cover Note Number	7220103825

DRIVER

Name of Driver	TAY SIEW KHIM
NRIC No	SXXXX592A
Date Of Birth	16/05/1965
Occupation	Indoor

Date Of Driving Pass	27/06/1983
Driving experience	40 YEARS
Gender	Female
Mobile Number	(Phone) +65-91730886
Alt. Phone Number	-
Email Address	khimtay1@gmail.com
Address	39 WESTWOOD WALK
Address complement	-
Postcode	648682
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)	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

PLEASE REFER TO POLICE REPORT T/20230623/7008

ATTACHMENT(S)

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	SH6692X
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Taxi
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	SLG7493K
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	TAY SIEW KHIM
Gender	Female
Phone No	(Phone) +65-91730886
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SLT9380X
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

Describe Circumstance of the Accident

REFER TO
POLICE REPORT
T/20230623/7008

Declaration

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

[Signature]

Policyholder's Signature / Date & Time

[Signature]

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

[Signature] 23/06/2023

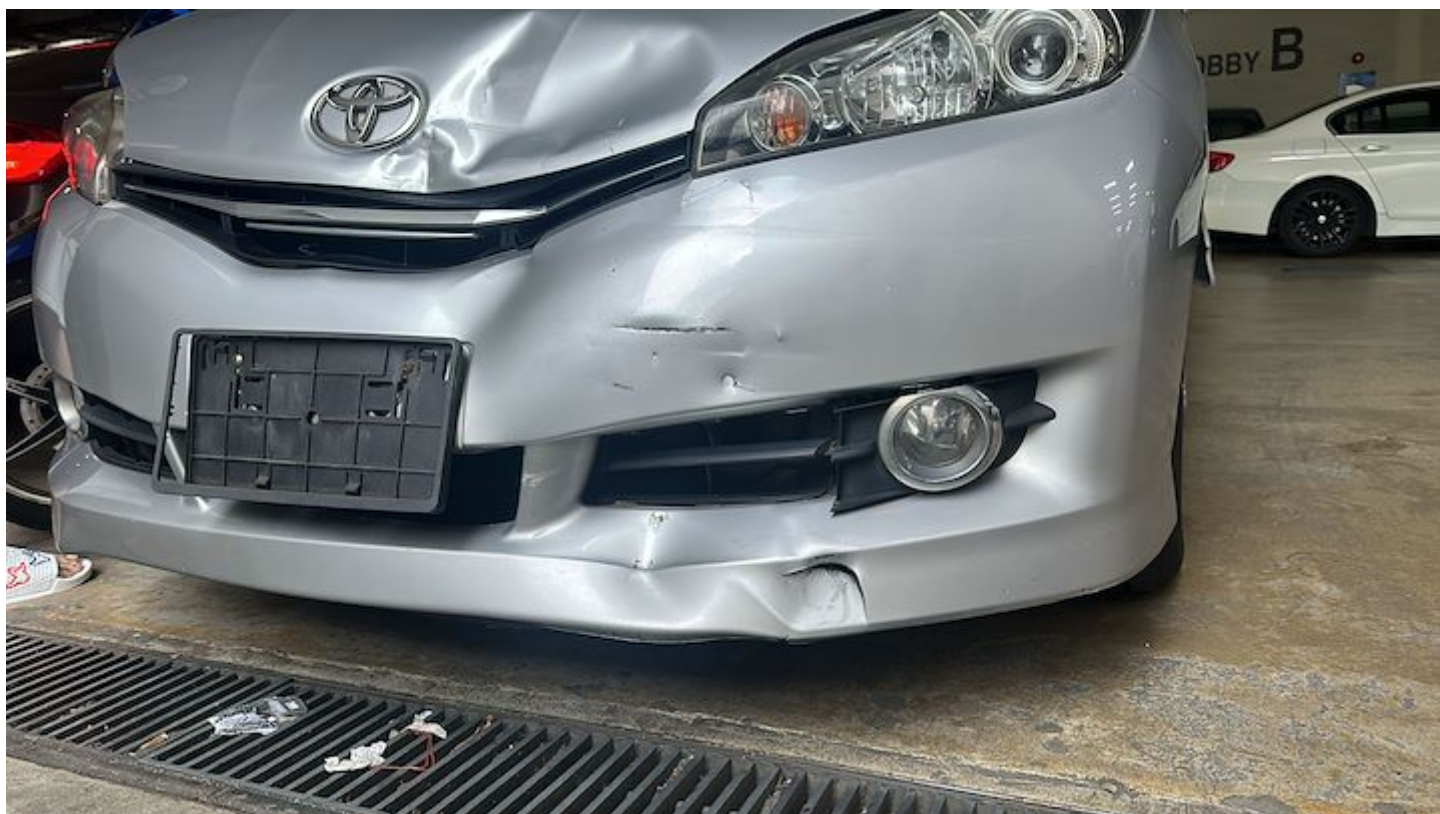
Witnessed by Reporting Centre Personnel

Scanned with CamScanner














**SINGAPORE
POLICE FORCE**

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



T/20230623/7008

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Report No. T/20230623/7008

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 23/06/2023 10:17	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: TAY SIEW KHIM			Address: 39 WESTWOOD WALK SINGAPORE 648682		
ID Type / ID No.: NRIC NO / S1719592A			Contact No.: Home/Office: Mobile: 91730886		
Nationality: SINGAPORE CITIZEN			Email: KHIMTAY1@GMAIL.COM		
Sex: Female	Age: 58	Date of Birth: 16/05/1965	Type of Informant: Driver		
Race: Chinese			Language: English		
Occupation: DIRECTOR			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: 22/06/2023 19:20	Type of Location: Straight Road
Location: PIE TOWARDS TUAS AFT STEVEN RD				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SH6692X	Car				Seriously Damaged	2
SLG7493K	Car				Seriously Damaged	2
SLT9380X	Car	TOYOTA	WISH 1.8 CVT	Silver	Seriously Damaged	0



**SINGAPORE
POLICE FORCE**



T/20230623/7008

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

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Report No. T/20230623/7008

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLT9380X	AIG ASIA PACIFIC INSURANCE PTE. LTD.	7220103825	17/11/2022	16/11/2023

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TAY SIEW KHIM	ID No.	S1719592A
Related Vehicle	SLT9380X (Car)	Contact No.	91730886
Hospital/Clinic	24 HOUR WALK-IN CLINIC	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	23/06/2023	Date	23/06/2023
No. of Days granted Medical Leave	03	Degree of	Serious

Brief Details.

ON THE STATED VENUE, DATE AND TIME, I, VEHICLE A, BEARING CAR PLATE SLT9380X WAS TRAVELLING STRAIGHT IN MY LANE ON LANE 1 ALONG PIE TOWARDS TUAS AFTER STEVEN RD.

THE VEHICLE IN FRONT SUDDEN BRAKE DUE TO TRAFFIC, SO I ALSO BRAKE AND STOP.

SUDDENLY, VEHICLE B, BEARING TAXI PLATE SH6692X BANG ONTO THE REAR PORTION OF MY VEHICLE, THE IMPACT CAUSED MY CAR TO PROPEL FORWARD AND BANG ONTO ANOTHER VEHICLE, BEARING CAR PLATE SLG7493K

WE EXCHANGED PARTICULARS AND TOOK PHOTOS OF THE ACCIDENT SCENE.

DUE TO THE ACCIDENT, I SUFFERED PAIN ON MY NECK AND LOWER BACK.

THE NEXT DAY, I WENT TO LOH & LOH CLINIC & SURGERY TO CONSULT A DOCTOR NEAR MY WORK PLACE LOCATED AT ANG MO KIO.

I RECEIVED 3 DAYS OF MC.

**SINGAPORE
POLICE FORCE**

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



T/20230623/7008

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Report No. T/20230623/7008

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TP1B /
LEE GUANG HUI
Contact No.: 65476204

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

Date/Time:
23/06/2023 10:17

Classification Of Case:

NP168