

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	07/07/2023 10:14 (SGT)
Reported by	Actual Driver
Date of Accident	06/07/2023 05:40 (SGT)
Exact Location of Accident	Admiralty Rd W, Singapore
Additional Location Information	TOWARDS SEMBAWANG ROAD
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJN473B
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	GOH CHEE BOON
NRIC No	SXXXX538J
Email Address	24leonardho@gmail.com
Mobile Phone No	(Phone) +65-83382207
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Civic
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	1799

INSURANCE COMPANY

Name of Insurance Company	Sompo Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	D22MTPV01009795

DRIVER

Name of Driver	TAN KENNER
NRIC No	SXXXX199H
Date Of Birth	29/01/1997
Occupation	Indoor

Date Of Driving Pass	07/04/2016
Driving experience	7 YEARS AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-83382207
Alt. Phone Number	-
Email Address	24leonardho@gmail.com
Address	BLK 120B CANBERRA CRESCENT #12-371
Address complement	-
Postcode	752120
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Friend
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?	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 SKETCH AND POLICE REPORT T/20230706/7075

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	YN5653M
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	TAN KENNER
Gender	Male
Phone No	(Phone) +65-83382207
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	SLIGHT INJURY
Injured person in which vehicle?	SJN473B
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN

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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

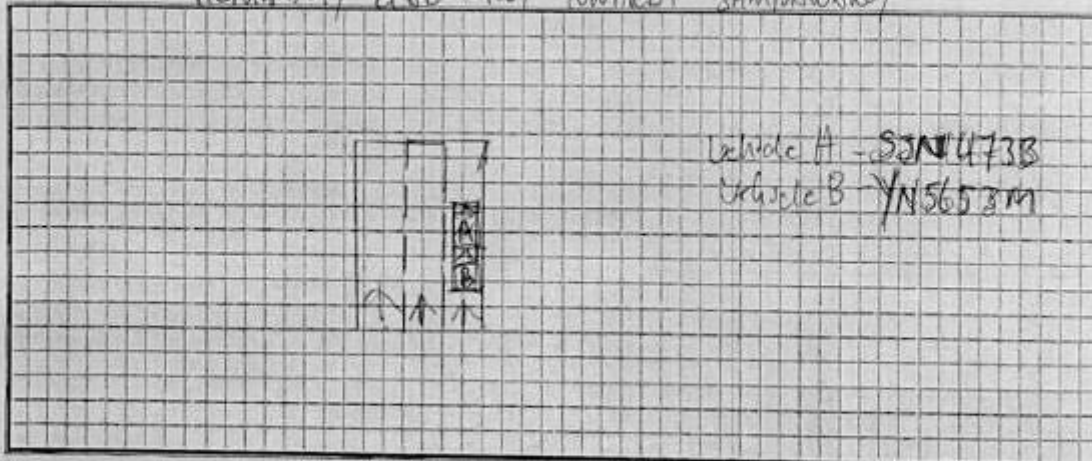
Driver's Signature (if driver is not the policyholder) / Date & Time

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

Sketch Plan

ACCIDENT SCENE ROAD WAS TOWARDS

SAMBAWANG



Describe Circumstance of the Accident

On the stated time and date, I was travelling along the stated location. As I was approaching the traffic junction, I slowed down. Suddenly I felt an huge impact from my rear.

I Alighted and found vehicle B 'YNS653M' collided onto my rear causing damages.

Police Report T/90230706/7075

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 NRIC/ID card)

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**SINGAPORE
POLICE FORCE**



T/20230706/7075

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

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Report No. T/20230706/7075

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 06/07/2023 19:50	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: TAN KENNER			Address: 120B CANBERRA CRESCENT #12-371 SINGAPORE 752120		
ID Type / ID No.: NRIC NO / S9706199H			Contact No.: Home/Office: Mobile: 83382207		
Nationality: SINGAPORE CITIZEN			Email: KENNERTAN@GMAIL.COM		
Sex: Male	Age: 26	Date of Birth: 29/01/1997	Type of Informant: Driver		
Race: Chinese			Language: English		
Occupation: Student			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 06/07/2023 05:35	Type of Location:
Location: ADMIRALTY ROAD WEST				
Weather:		Road Surface:		
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision:				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SJN473B	Car					0

Details of Person Involved

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



**SINGAPORE
POLICE FORCE**



T/20230706/7075

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

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Report No. T/20230706/7075

CONTINUATION OF REPORT

Driver			
Name	TAN KENNER		ID No. S9706199H
Related Vehicle	SJN473B (Car)		Contact No. 83382207
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Class: NIL Date of Expiry: NIL
Date	NIL		Date NIL
No. of Days granted Medical Leave	05	Degree of	Serious

Brief Details:

On the stated date and time I vehicle SJN473B was travelling straight on lane 1.

I was travelling along Admiralty Road West towards Sembawang direction.

As I was approaching the junction I slowed down in anticipation of the traffic lights turning red.

Suddenly vehicle YN5653M came from behind and hit onto my vehicle's rear portion.

The impact was great and caused my left knee to hit onto my dashboard, both my wrist slipped and hit onto my steering.

After a while I start to feel pain on my neck, shoulders and back areas.

Later late afternoon the pain worsen and I proceeded to Norwood Medical Clinic to seek treatment and i was given 5 days MC.

**SINGAPORE
POLICE FORCE**

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



T/20230706/7075

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Report No. T/20230706/7075

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
FAHKRUL RAZI BIN SUHAIME
Contact No.: 65470000

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

Date/Time:
06/07/2023 19:50

Classification Of Case:

NP168