

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	26/06/2023 12:50 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	24/06/2023 22:30 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	LORONG 1 TOA PAYOH
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLU7339A
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	TAN JUAN KIN
NRIC No	S1434745C
Email Address	TANJUANKIN@GMAIL.COM
Mobile Phone No	(Phone) +65-81891051
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Volkswagen
Model	Golf
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?	Yes
Vehicle Category	Private car
Transmission	Auto
CC	999

INSURANCE COMPANY

Name of Insurance Company	Allianz Insurance Singapore Pte. Ltd.
Policy Number / Cover Note Number	SP2003114636

DRIVER

Name of Driver	YEO KENG SAI
NRIC No	S2511113C
Date Of Birth	14/02/1958
Occupation	Indoor

Date Of Driving Pass	21/05/1980
Driving experience	43 YEARS AND 1 MONTH
Gender	Male
Mobile Number	(Phone) +65-96333304
Alt. Phone Number	-
Email Address	TANJUANKIN@GMAIL.COM
Address	BLK 4 WOODLEIGH LANE #08-13
Address complement	-
Postcode	357686
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	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)	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

REFER SKETCH PLAN

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	SLB959G
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 SWEE HIN VICTOR
Gender	Male
Phone No	(Phone) +65-96873671
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	PASSENGER OF SLB959G 5 DAYS MC
Injured person in which vehicle?	SLB959G
Were seat belts worn?	-
Was this injured conveyed to hospital by ambulance?	No



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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

Sketch Plan

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

Witnessed by Reporting Centre Personnel



 - SLB959G
 - SLU7339A

Describe Circumstances of the Accident

refer attached

Declaration

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

[Signature]
 Policyholder's Signature / Date & Time

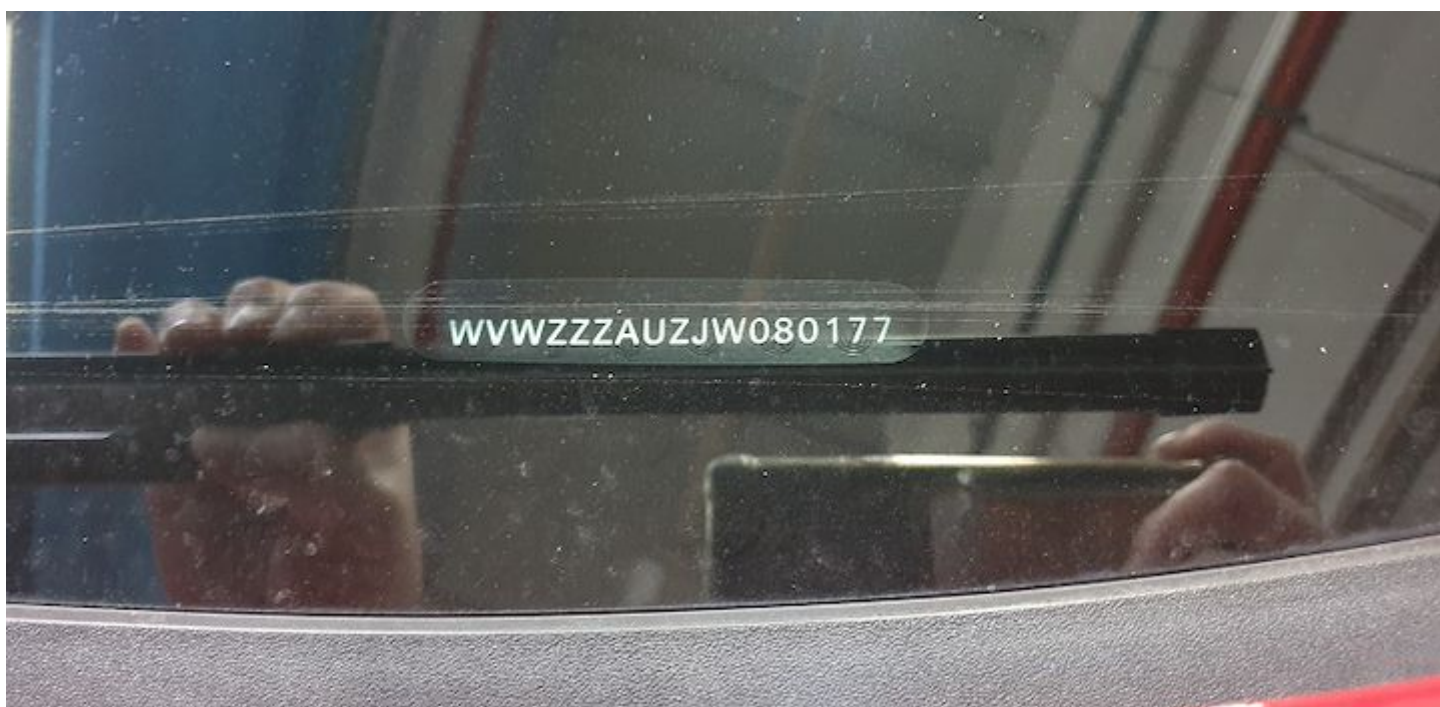
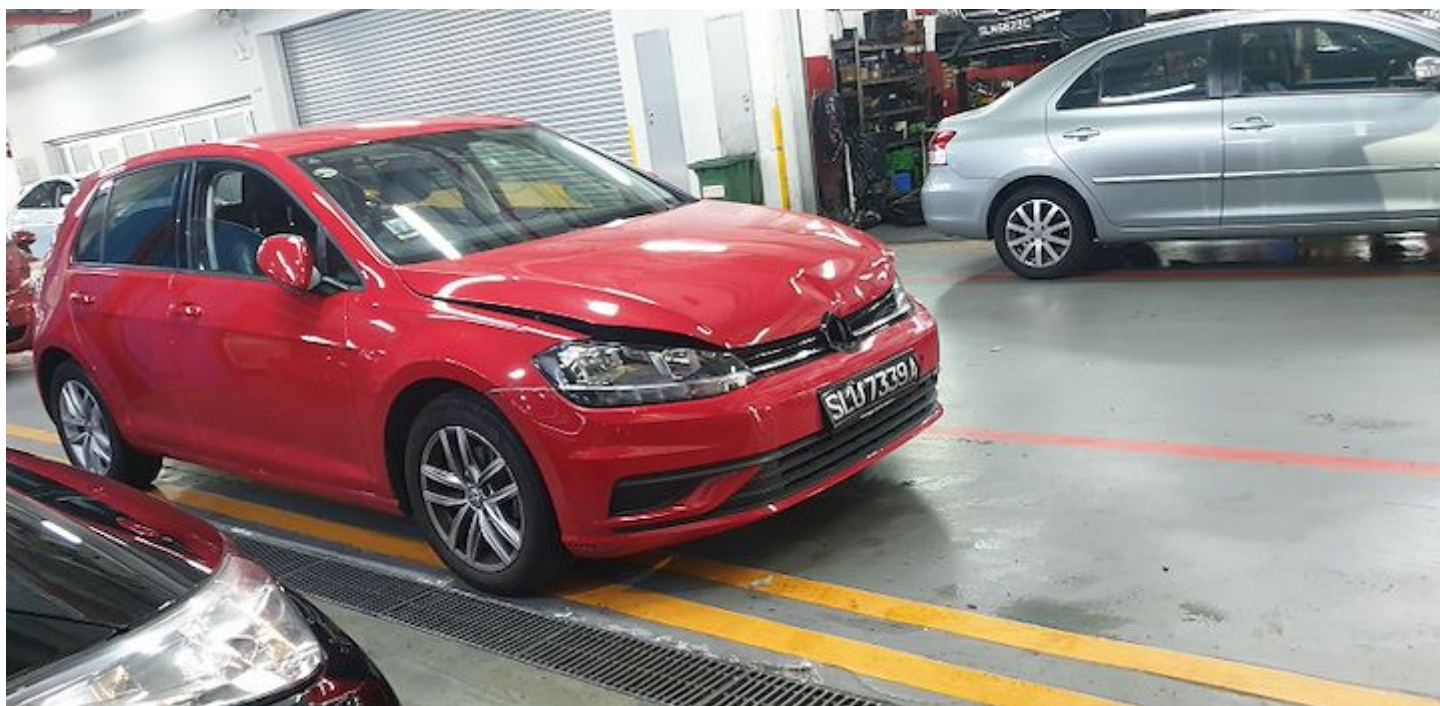
[Signature]
 Driver's Signature (If driver is not the policyholder) / Date & Time

[Signature]
 Witnessed by Reporting Centre Personnel











**SINGAPORE
POLICE FORCE**



T/20230625/7028

1 of 3

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

Report No. T/20230625/7028

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/06/2023 19:49	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: YEO KENG SAI			Address: 4 WOODLEIGH LANE #08-13 SINGAPORE 357686		
ID Type / ID No.: NRIC NO / S2511113C			Contact No.: Home/Office: Mobile: 96333304		
Nationality: SINGAPORE CITIZEN			Email: donyeo@djyengrg.com.sg		
Sex: Male	Age: 65	Date of Birth: 14/02/1958	Type of Informant: Driver		
Race: Chinese			Language: English		
Occupation: Company director			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

General Information of the Accident:				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 24/06/2023 22:30	Type of Location: Bend
Location: LORONG 1 TOA PAYOH				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Light
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
SLB959G	Car	HONDA	VEZELE- Hev1.5X CVT SUV	Red	Slightly Damaged	4
SLU7339A	Car					0

Details of Vehicle Insurance



**SINGAPORE
POLICE FORCE**



T/20230625/7028

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

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Report No. T/20230625/7028

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLB959G		CN016681	04/03/2023	03/03/2024

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TAN SWEE HIN VICTOR	ID No.	S1345052H
Related Vehicle	SLB959G (Car)	Contact No.	96873671
Hospital/Clinic	KHOO TECK PUAT HOSPITAL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	24/06/2023	Date	24/06/2023
No. of Days granted Medical Leave	05	Degree of	Slight
Driver			
Name	YEO KENG SAI	ID No.	S2511113C
Related Vehicle	SLU7339A (Car)	Contact No.	96333304
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details:

Just turn right at traffic junction from toa payoh lor 1 to lor 2 slowly keeping left to exit Toa Payoh to PIE / Changi beside Toa Payoh Green. There's no pedestrian crossing Saw another vehicle in front also exiting. Turning head to right to check for oncoming traffic on side road road before exiting to road then PIE. Did not realise that front vehicle stop. Try to apply brake but could not prevent the collision.



**SINGAPORE
POLICE FORCE**

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



T/20230625/7028

3 of 3

Report No. T/20230625/7028

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPB /
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:
25/06/2023 19:49

Classification Of Case:

NP168



Allianz Insurance Singapore Pte. Ltd.

POLICY SCHEDULE
ALLIANZ MOTOR PROTECT

ORIGINAL

Date	:	25 November 2022		
Policy Number	:	SP2003114636		
Type of Cover	:	ALLIANZ MOTOR PROTECT		
Plan Type	:	Comprehensive		
Policyholder	:	TAN JUAN KIN		
Correspondence Address	:	4 WOODLEIGH LANE 08-13 SINGAPORE 357686		
Replacing Cover Note No.	:	NA		
Period of Insurance	:	From 12/12/2022 To 11/12/2023 (Both Dates Inclusive)		
Premium Payable	:	S\$ 732.94		
GST 7%	:	S\$ 51.31		
Total Premium Payable	:	S\$ 784.25		
Make and Model	:	Volkswagen GOLF		
Agreed Value	:	MARKET VALUE	Off Peak Car	: No
Registration No.	:	SLU7339A	Good Driver Discount	: Yes
Year of Manufacture	:	2017	Body Type	: Hatchback
Engine Capacity	:	999.0	Engine No.	: CHZ567845
Chassis No.	:	WVWZZZAUZJW080177	Windscreen	: UNLIMITED
Hire Purchase Owner	:	NA	No Claims Discount	: 50 %
Additional Cover	:	Medical Expenses Personal Accident Benefits		
Named Drivers	:	TAN JUAN KIN YEO KENG SAI YEO SHU HUI TOW JIA MING		
Excess	:	Own Damage	S\$	600.00
	:	Windscreen Damage	S\$	100.00