

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 First Submission	28/07/2023 09:17 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	27/07/2023 15:45 (SGT)
Exact Location of Accident	Singapore
Additional Location Information	CARPARK EXIT OF BLOCK 37
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKC3939B
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	SEAH BOON LIANG
NRIC No	SXXXX939J
Email Address	seah.liangwood@gmail.com
Mobile Phone No	(Phone) +65-97903939
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Rav4
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 - Reporting only
Vehicle Category	Private car
Transmission	Auto
CC	1987

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMPCSNW00063322301

DRIVER

Name of Driver	SEAH BOON LIANG
NRIC No	SXXXX939J
Date Of Birth	21/09/1961
Occupation	Outdoor

Date Of Driving Pass	17/11/1982
Driving experience	40 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97903939
Alt. Phone Number	-
Email Address	seah.liangwood@gmail.com
Address	110 BEDOK RESERVOIR ROAD , EUNOS VISTA
Address complement	# 11-292
Postcode	470110
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?	No
Was any injured conveyed to hospital by ambulance?	-
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 THE ATTACHED POLICE REPORT -T/20230727/2070

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes
Reasons for not uploading a video of the accident	WITH OWNER

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHD2019T
Vehicle Manufacturer	Toyota
Vehicle Model	Camry

Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	YEOW HOCK SENG
NRIC No	SXXXX646A
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	-
No. Of Passenger (Including Driver)	-

SKETCH PLAN

IMPORTANT NOTICE

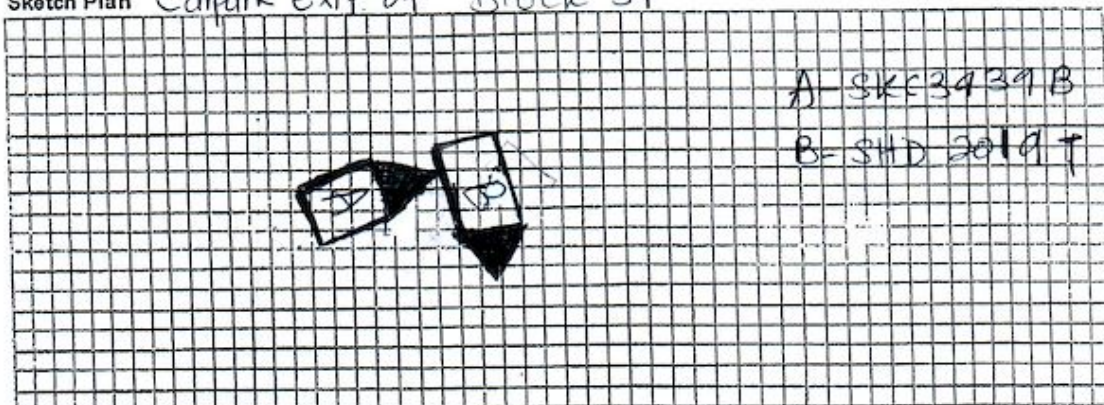
1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any willful misrepresentation or withholding of material facts may allow insurance companies to reputate 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. The 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.
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 an 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

Sketch Plan Carpark Exit of Block 37



Describe the Circumstance of the Accident

please refer to the attached
police Report
- 7120230727-2070 -

Declaration

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

 27/7/23
Policyholder's Signature / Date & Time

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

 28/7/2023
Witnessed by Reporting Centre Personnel
(Name as in NR/CAD card)

vija2022

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**SINGAPORE
POLICE FORCE**

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



T/20230727/2070

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Report No. T/20230727/2070

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKC3939B	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSNW000633 22301	28/05/2023	27/05/2024

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	Yeow Hock Seng	ID No.	S1768646A
Related Vehicle	SHD2019T (Car)	Contact No.	NIL
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	SEAH BOON LIANG	ID No.	S1513939J
Related Vehicle	SKC3939B (Car)	Contact No.	97903939
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

Brief Details.

On the abovementioned date and time, I was driving my car about to exit the carpark at Block 37 while the taxi was attempting to enter the carpark. However, we accidentally moved at the same time, and I ended up coming into contact with his vehicle, head to side. I was able to brake and in time and there was no hard collision. The damage cannot even be seen for both sides. He insisted in making a traffic report so we exchanged particulars. There were no injuries. That is all.



















**SINGAPORE
POLICE FORCE**



T/20230727/2070

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

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Report No. T/20230727/2070

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 27/07/2023 16:58		Vide Report No.:		Station Diary No.:
Informant's Particulars				
Name of Informant: SEAH BOON LIANG		Address: 110 BEDOK RESERVOIR ROAD #11-292 EUNOS VISTA SINGAPORE 470110		
ID Type / ID No.: NRIC NO / S1513939J		Contact No.: Home/Office: Mobile: 97903939		
Nationality: SINGAPORE CITIZEN		Email:		
Sex: Male	Age: 61	Date of Birth: 21/09/1961	Type of Informant: Driver	
Race: Chinese		Language:		
Occupation: Carpenter		Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 27/07/2023 15:45	Type of Location: Car Park
Location: MACTAGGART ROAD				
Weather: Clear		Road Surface: Dry		
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHD2019T	Car		CAMRY HYBRID 2.5 ASCENT CVT		No Damage	0
SKC3939B	Car	TOYOTA	RAV4 2.0 PREMIUM SUV (AUTO) (2WD)	Silver	No Damage	0



**SINGAPORE
POLICE FORCE**

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



T/20230727/2070

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Report No. T/20230727/2070

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKC3939B	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSNW000633 22301	28/05/2023	27/05/2024

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	Yeow Hock Seng	ID No.	S1768646A
Related Vehicle	SHD2019T (Car)	Contact No.	NIL
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	SEAH BOON LIANG	ID No.	S1513939J
Related Vehicle	SKC3939B (Car)	Contact No.	97903939
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

Brief Details.

On the abovementioned date and time, I was driving my car about to exit the carpark at Block 37 while the taxi was attempting to enter the carpark. However, we accidentally moved at the same time, and I ended up coming into contact with his vehicle, head to side. I was able to brake and in time and there was no hard collision. The damage cannot even be seen for both sides. He insisted in making a traffic report so we exchanged particulars. There were no injuries. That is all.

**SINGAPORE
POLICE FORCE**

Police Station Of Origin:
Traffic Police
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Tel No: 65470000



T/20230727/2070

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Report No. T/20230727/2070

CONTINUATION OF REPORT

Signature of Officer Recording The Report:
TP /
SC2 JUMILL NOEL MACADAEG
BIGUERAS

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / GIA /
SR STAFF SGT LEE GUANG HUI
Contact No.: 65476204

NP168

Signature Of Informant:

Date/Time:
27/07/2023 16:58

Classification Of Case: