

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	27/07/2023 14:50 (SGT)
Reported by	Actual Driver
Date of Accident	27/07/2023 00:35 (SGT)
Exact Location of Accident	Kampong Java Tunnel, Singapore
Additional Location Information	TOWARDS SLE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SHC3879B
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INSURED/POLICYHOLDER

Is company?	Yes
Name Of Registered Owner	COMFORT TRANSPORTATION PTE LTD
Company Reg No	199303821R
Email Address	fleetsafety@cdgtaxi.com.sg
Mobile Phone No	(Phone) +65-90991710
Alternative Phone No	(Office) +65-65508768

VEHICLE PARTICULARS

Manufacturer	Toyota
Model	Prius
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	Taxi
Transmission	Auto
CC	1798

INSURANCE COMPANY

Name of Insurance Company	HSBC Life (Singapore) Pte. Ltd
Policy Number / Cover Note Number	VFX/P2419138

DRIVER

Name of Driver	TAN KOK BOON
NRIC No	S1630090Z
Date Of Birth	19/04/1964
Occupation	Outdoor

Date Of Driving Pass	08/11/1984
Driving experience	38 YEARS AND 8 MONTHS
Gender	Male
Mobile Number	(Phone) +65-90991710
Alt. Phone Number	-
Email Address	fleetsafety@cdgtaxi.com.sg
Address	BLK 492 ADMIRALTY LINK #19 - 177
Address complement	-
Postcode	750492
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	RELIEF DRIVER
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)	3
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	UNKNOWN
Gender	Male

PASSENGER 2

Name	UNKNOWN
Gender	Female

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 TO POLICE REPORT
T /20230727/7012

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
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Was there any video captured by Car Camera? Yes
 Reasons for not uploading a video of the accident FILE IS NOT SUITABLE

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SKX2496H
 Vehicle Manufacturer Toyota
 Vehicle Model Corolla
 Vehicle Variant -
 Vehicle Colour White
 Vehicle Category Private hire
 Name of Driver CHUA KIM SONG (CAI JINSONG)
 NRIC No S8410525B
 Contact Number (Phone) +65-90257209
 Address -
 Address complement -
 Postcode -
 Insurance Company Name -
 Nature Of Damage REAR
 Details of property damaged in accident -
 No. Of Passenger (Including Driver) 2

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SJX9938R
 Vehicle Manufacturer Honda
 Vehicle Model Civic
 Vehicle Variant -
 Vehicle Colour -
 Vehicle Category Private car
 Name of Driver KUAN CHOON CHEIT
 NRIC No S7476814H
 Contact Number (Phone) +65-98371654
 Address -
 Address complement -
 Postcode -
 Insurance Company Name -
 Nature Of Damage FRONT
 Details of property damaged in accident -
 No. Of Passenger (Including Driver) 1

INJURED PERSONS DETAILS

INJURED 1

Name of injured person TAN KOK BOON
 Gender Male
 Phone No (Phone) +65-90991710
 Address BLK 492 ADMIRALTY LINK #19 - 177
 Address Complement -
 Post Code 750492
 Approximate Age Years Old 59
 Injuries Sustained BACK, ARMS AND LEGS
 Injured person in which vehicle? SHC3879B
 Were seat belts worn? Yes
 Was this injured conveyed to hospital by ambulance? No

INJURED 2

Name of injured person UNKNOWN
 Gender Female
 Phone No -
 Address -
 Address Complement -
 Post Code -
 Approximate Age Years Old -

Injuries Sustained	HEAD PAIN
Injured person in which vehicle?	SHC3879B
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

SKETCH PLAN**IMPORTANT NOTICE**

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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.

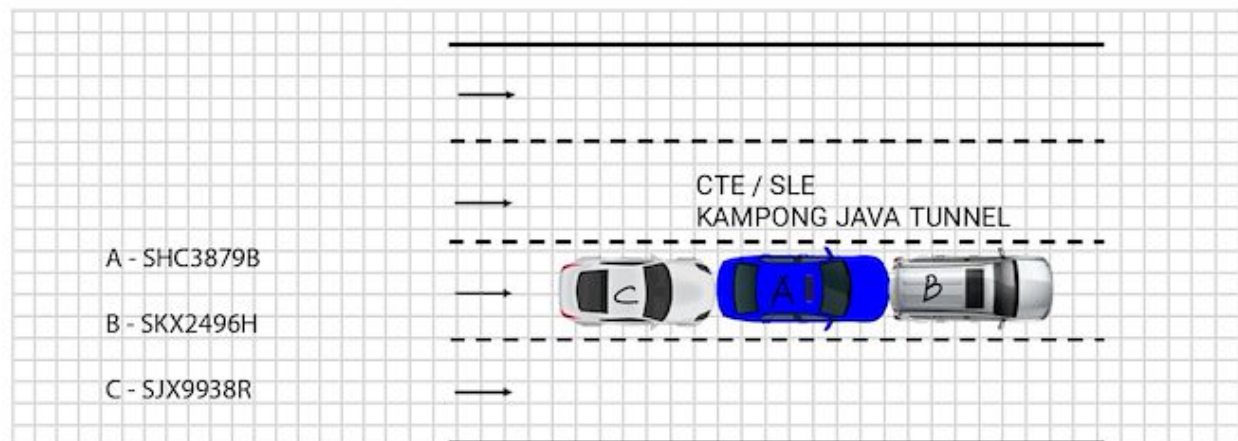
**FLASH ACCIDENT
REPORTING OFFICER
KYMI**



Policyholder's Signature / Date & Time

Driver's Signature (If driver is not the policyholder) / Date & Time
27.07.2023. 1320HRS

Witnessed by Reporting Centre Personnel

Sketch Plan

Describe Circumstances of the Accident

REFER TO POLICE REPORT
T/20230727/7012

Declaration

We declare the foregoing particulars are true in every respect.

[Signature]

FLASH ACCIDENT
REPORTING OFFICER
KYMI



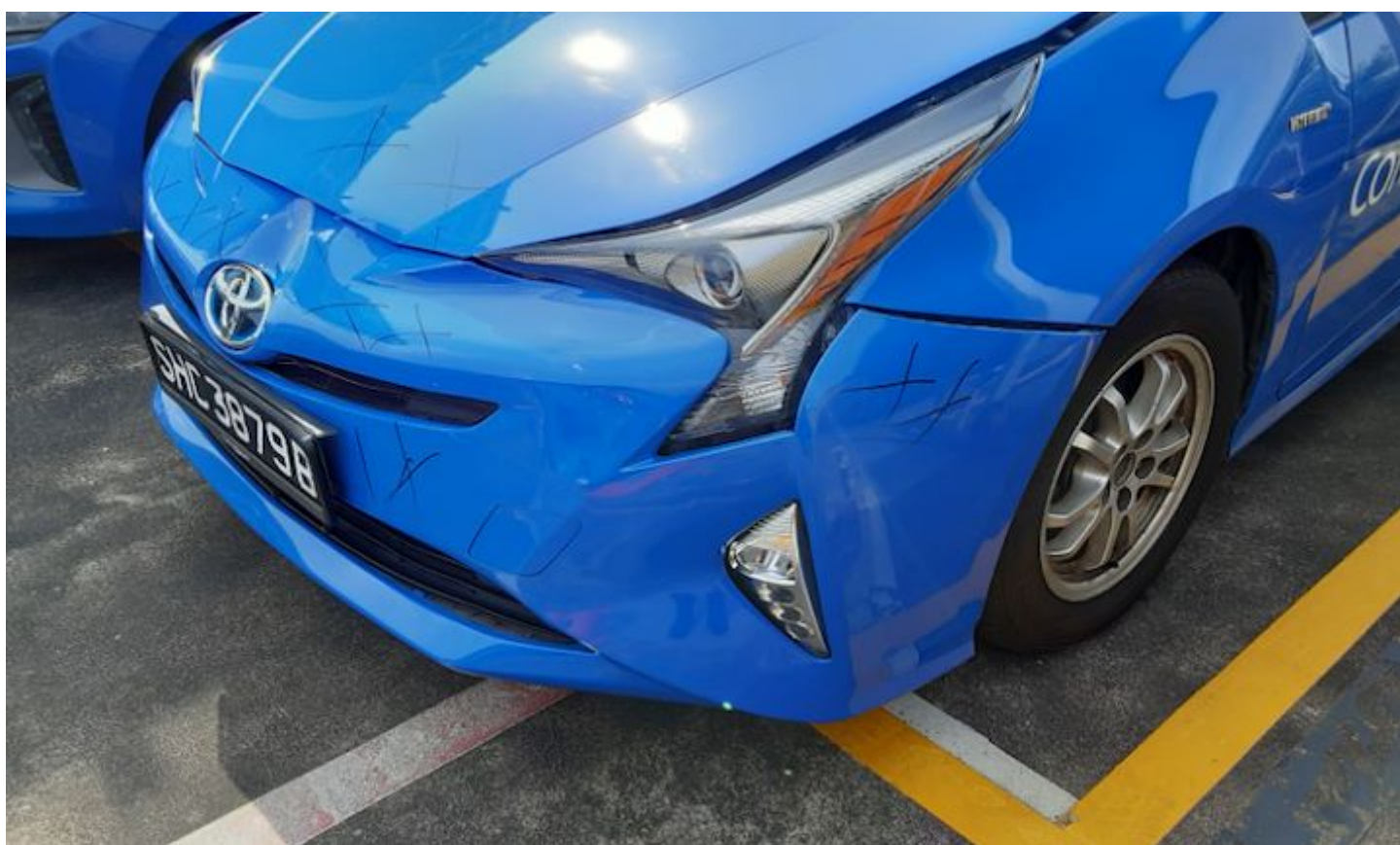
Policyholder's Signature / Date &
Time

Driver's Signature (If driver is not the policyholder) / Date
& Time 27.07.2023. 1330HRS

Witnessed by Reporting Centre
Personnel





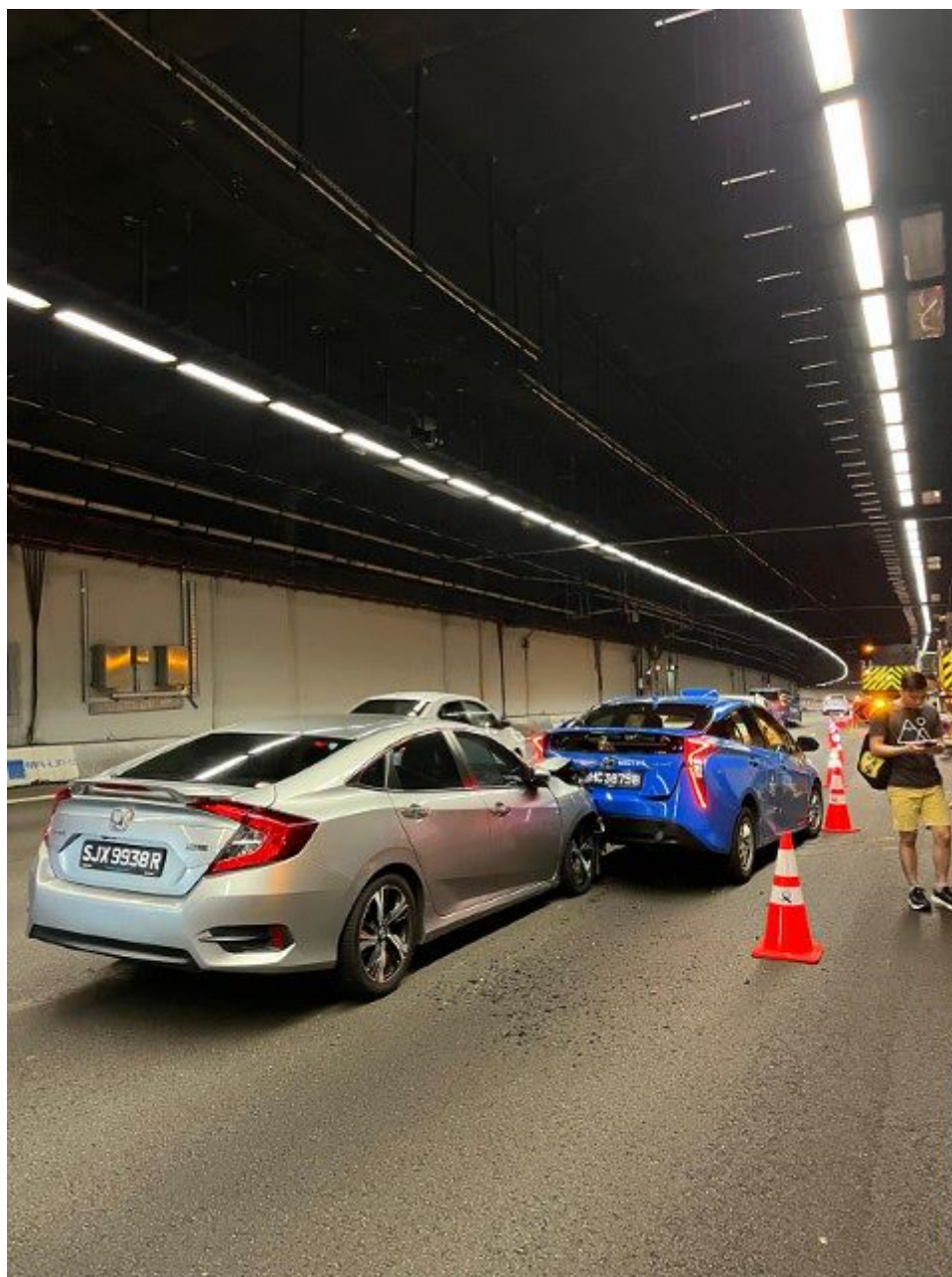


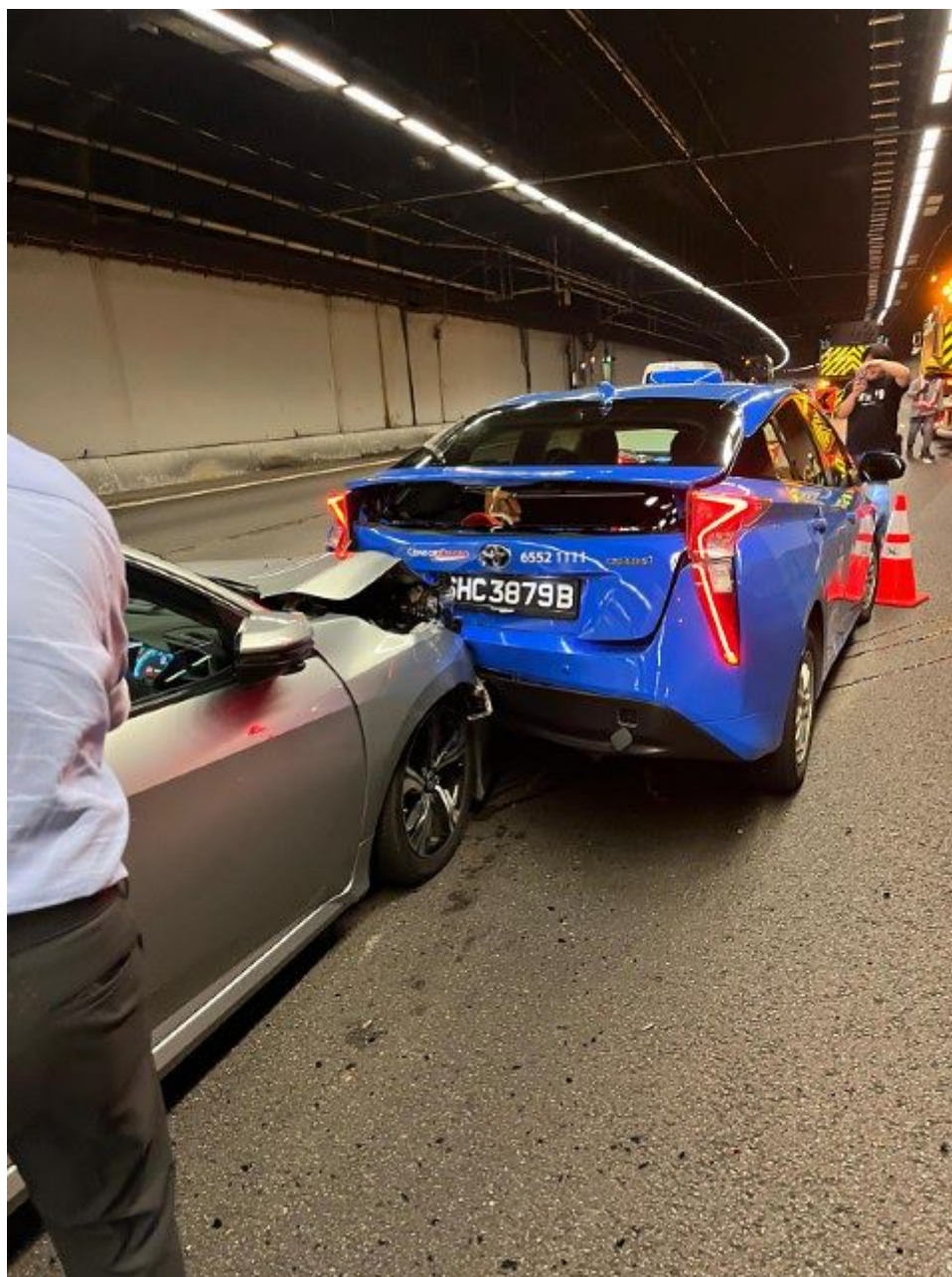


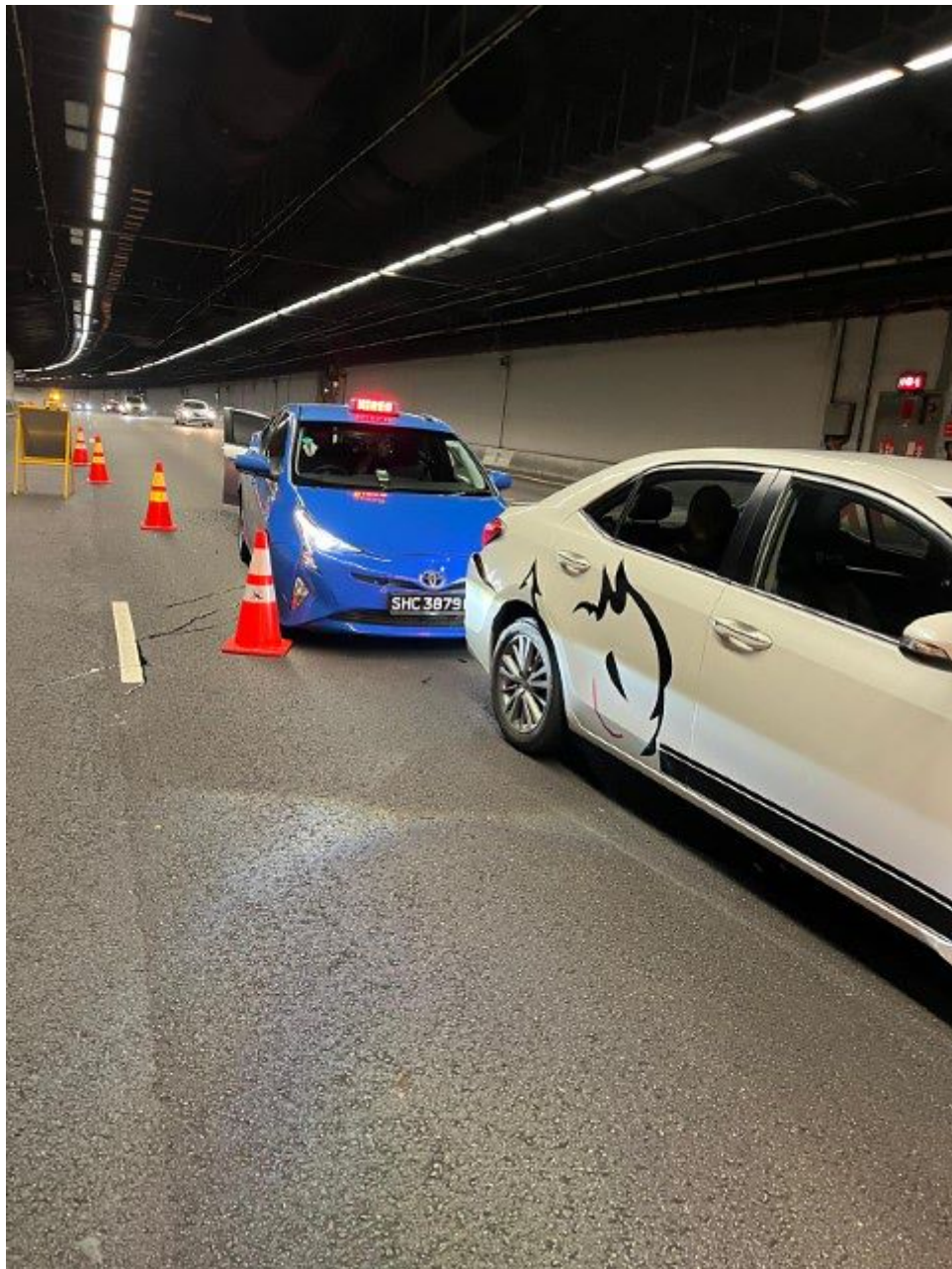


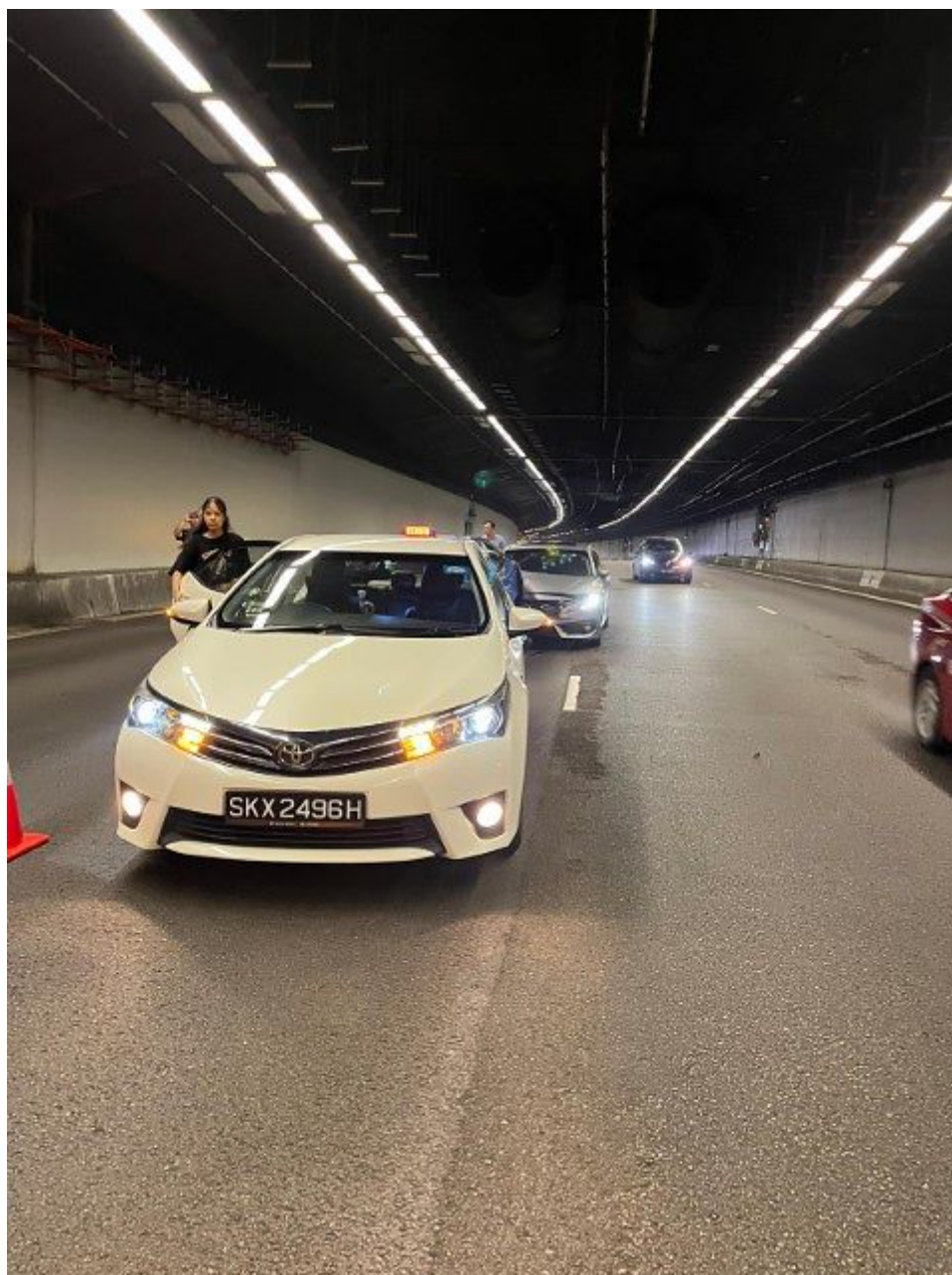


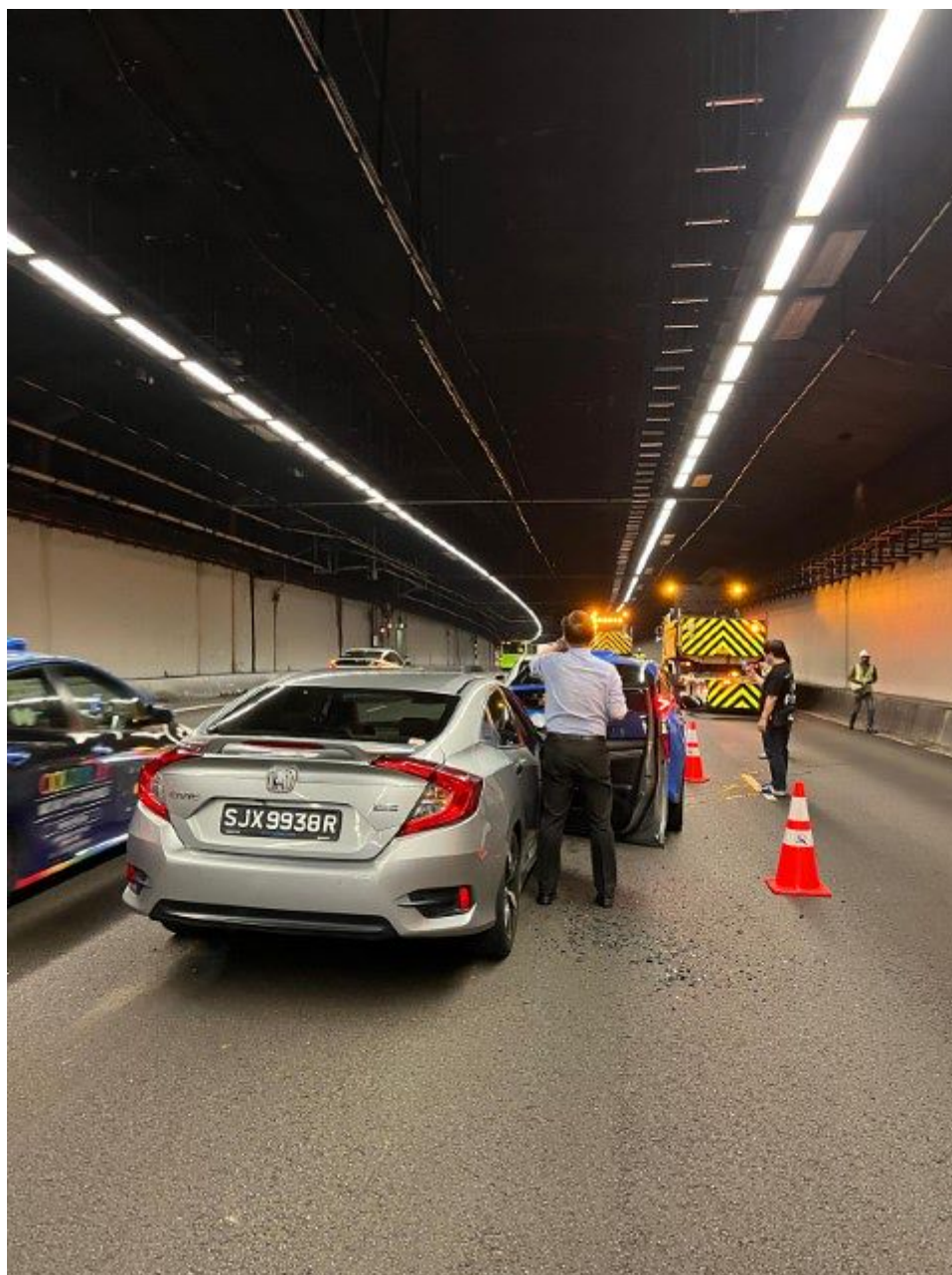


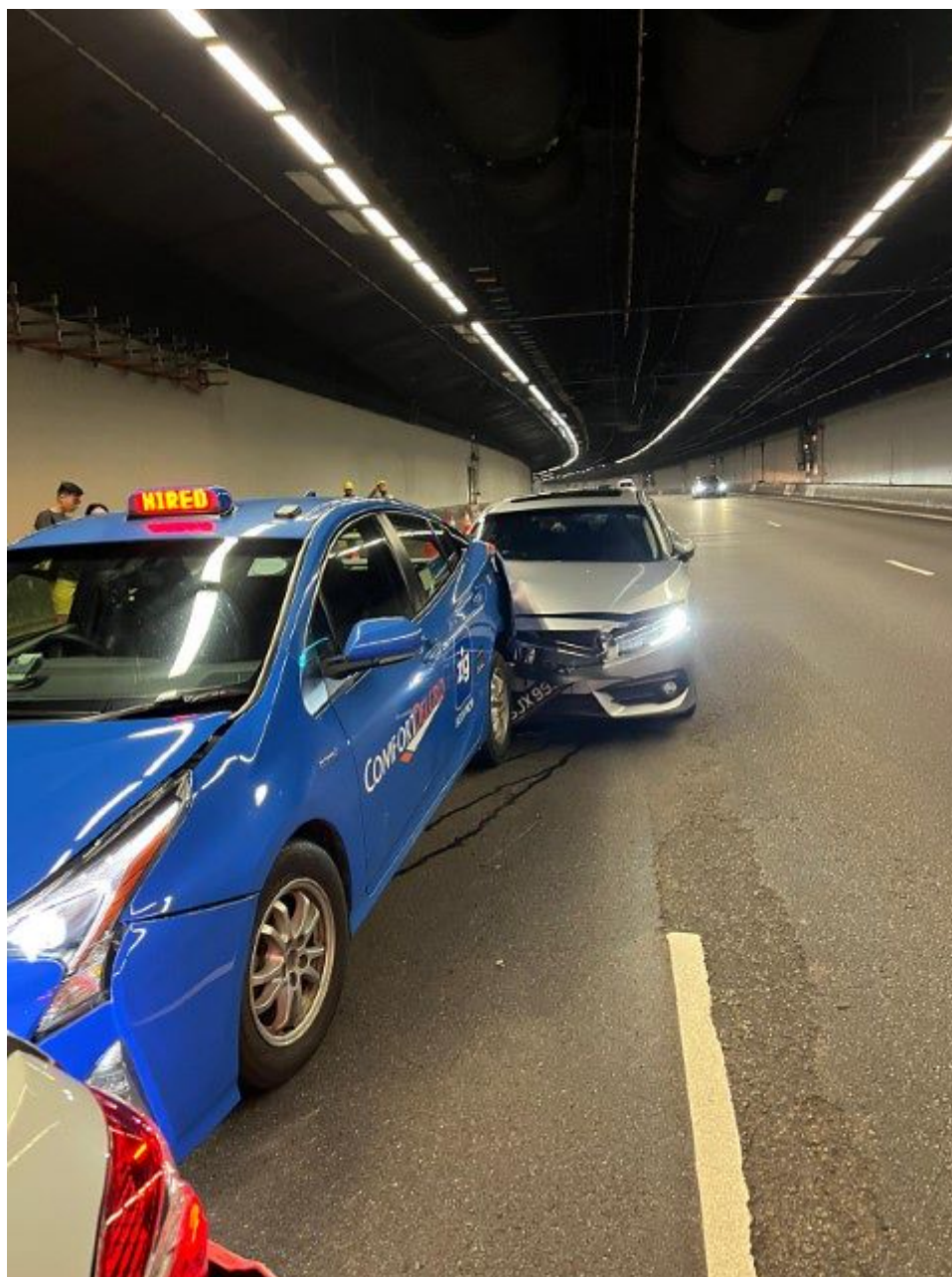


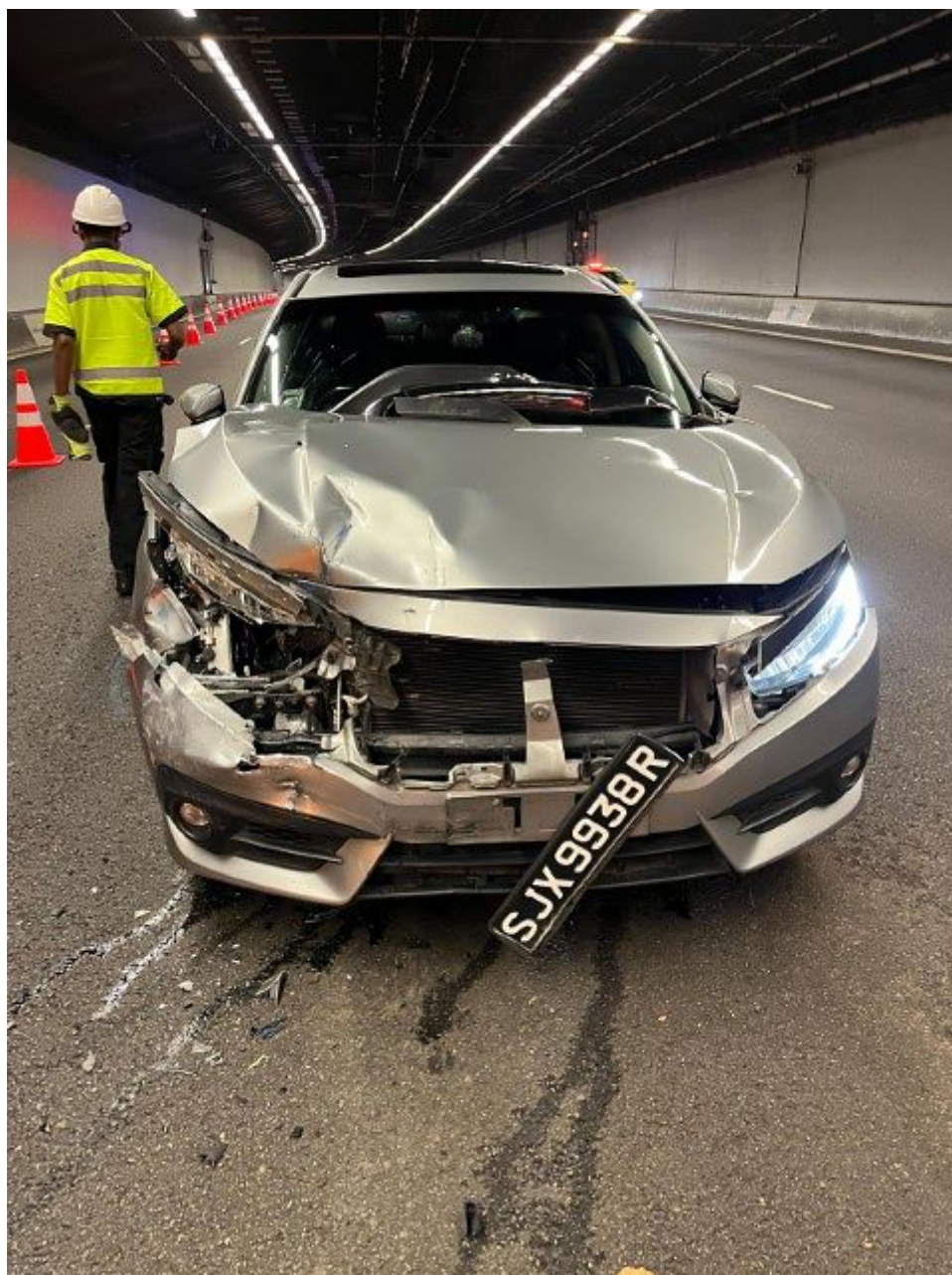




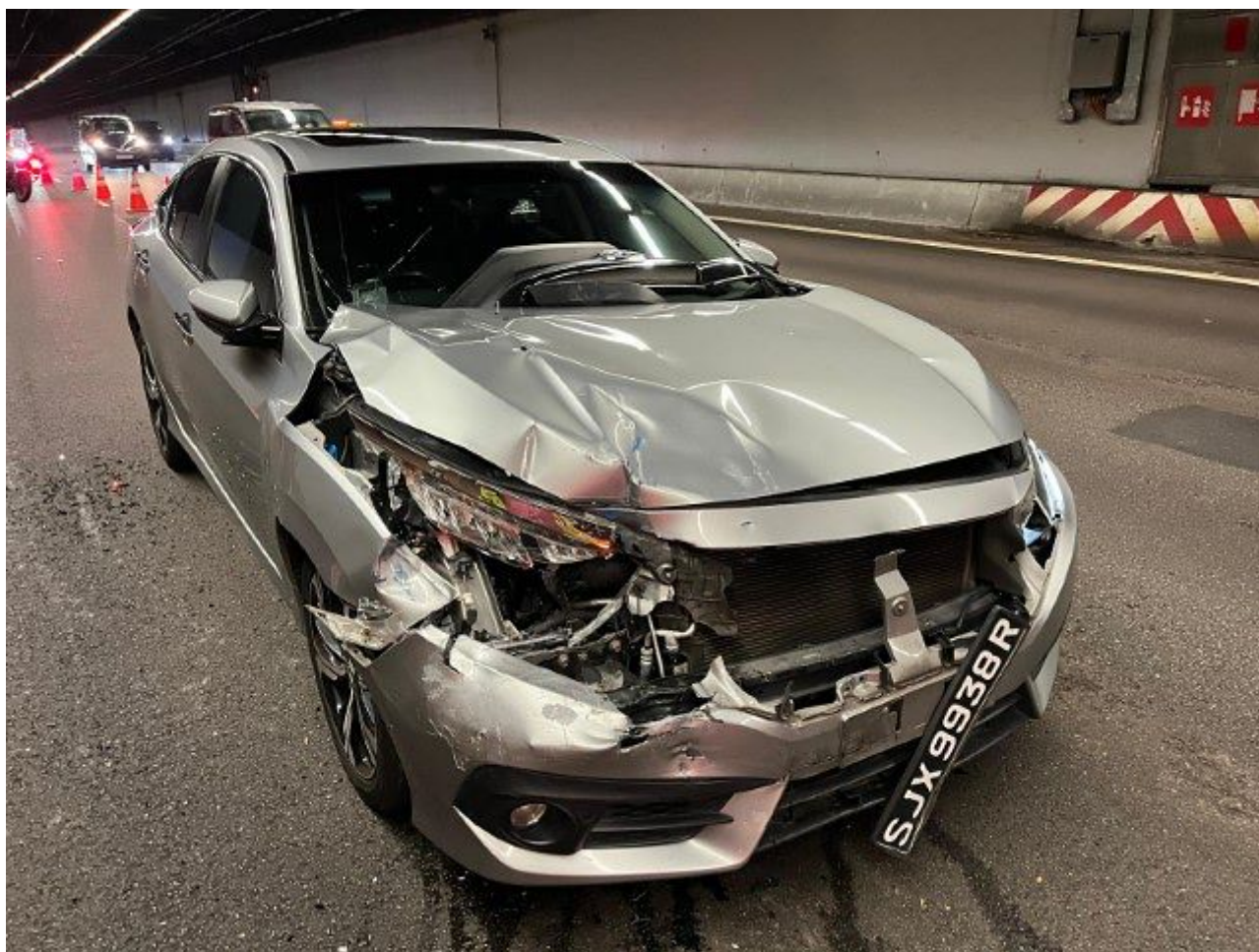




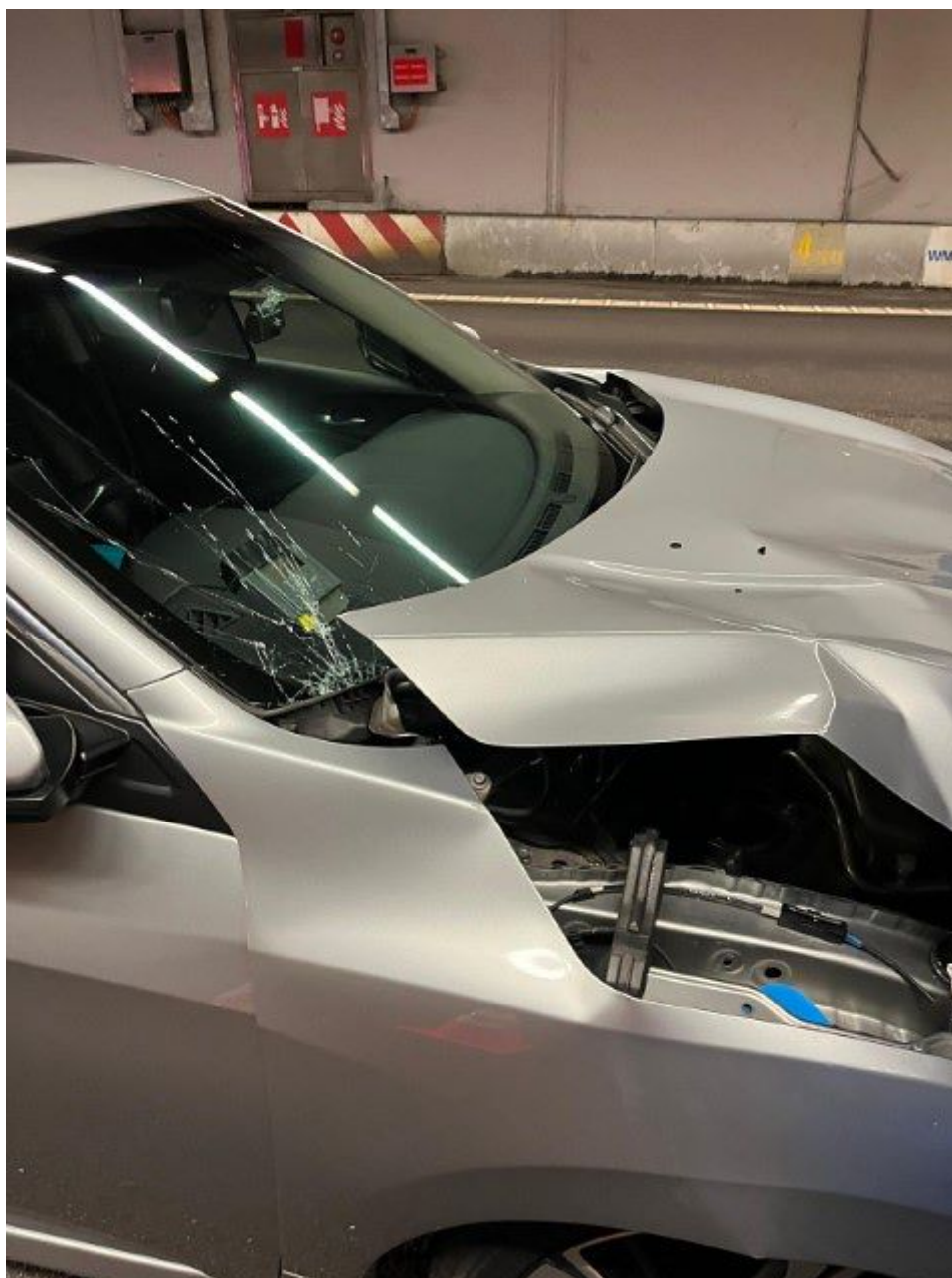


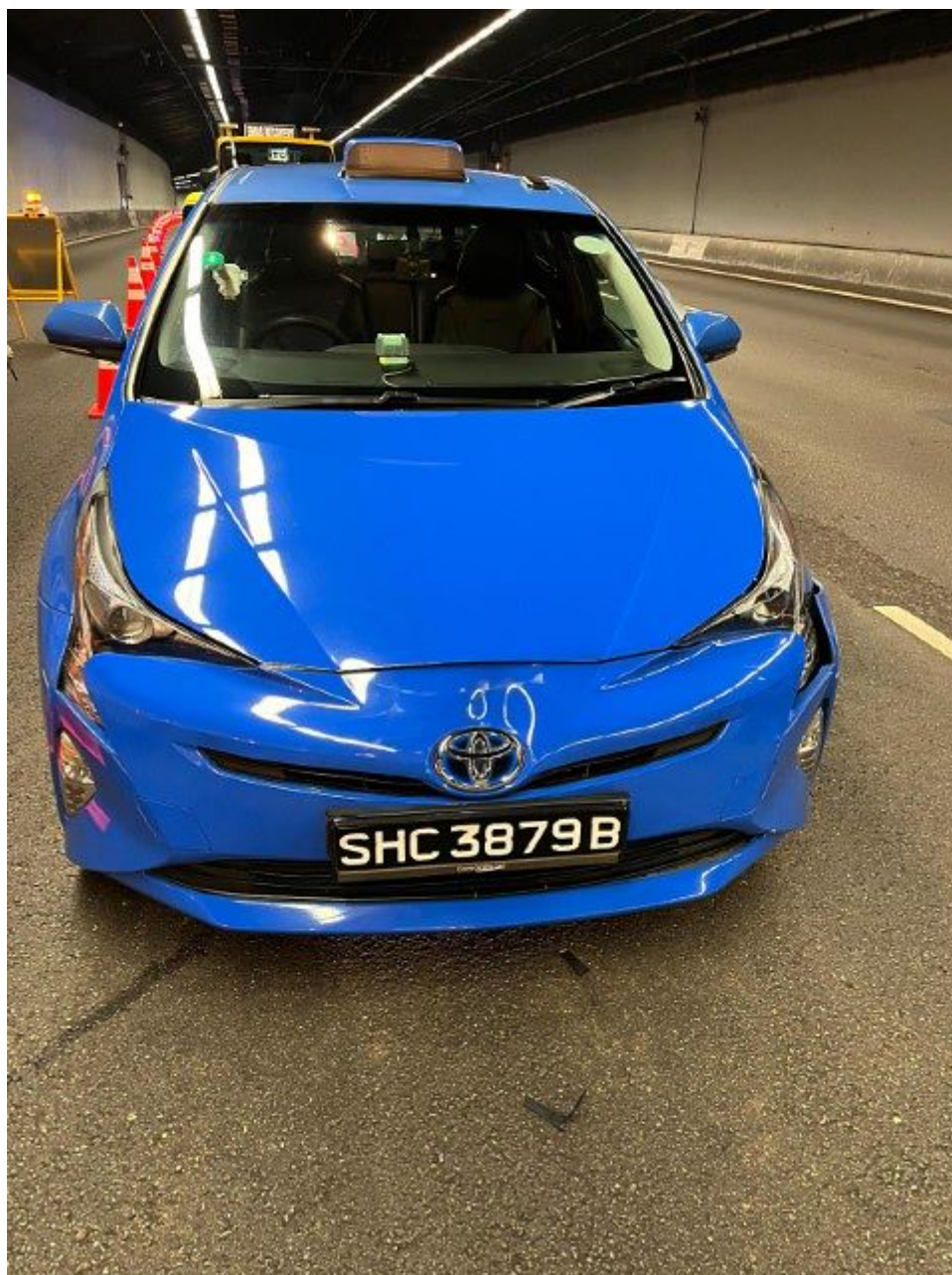


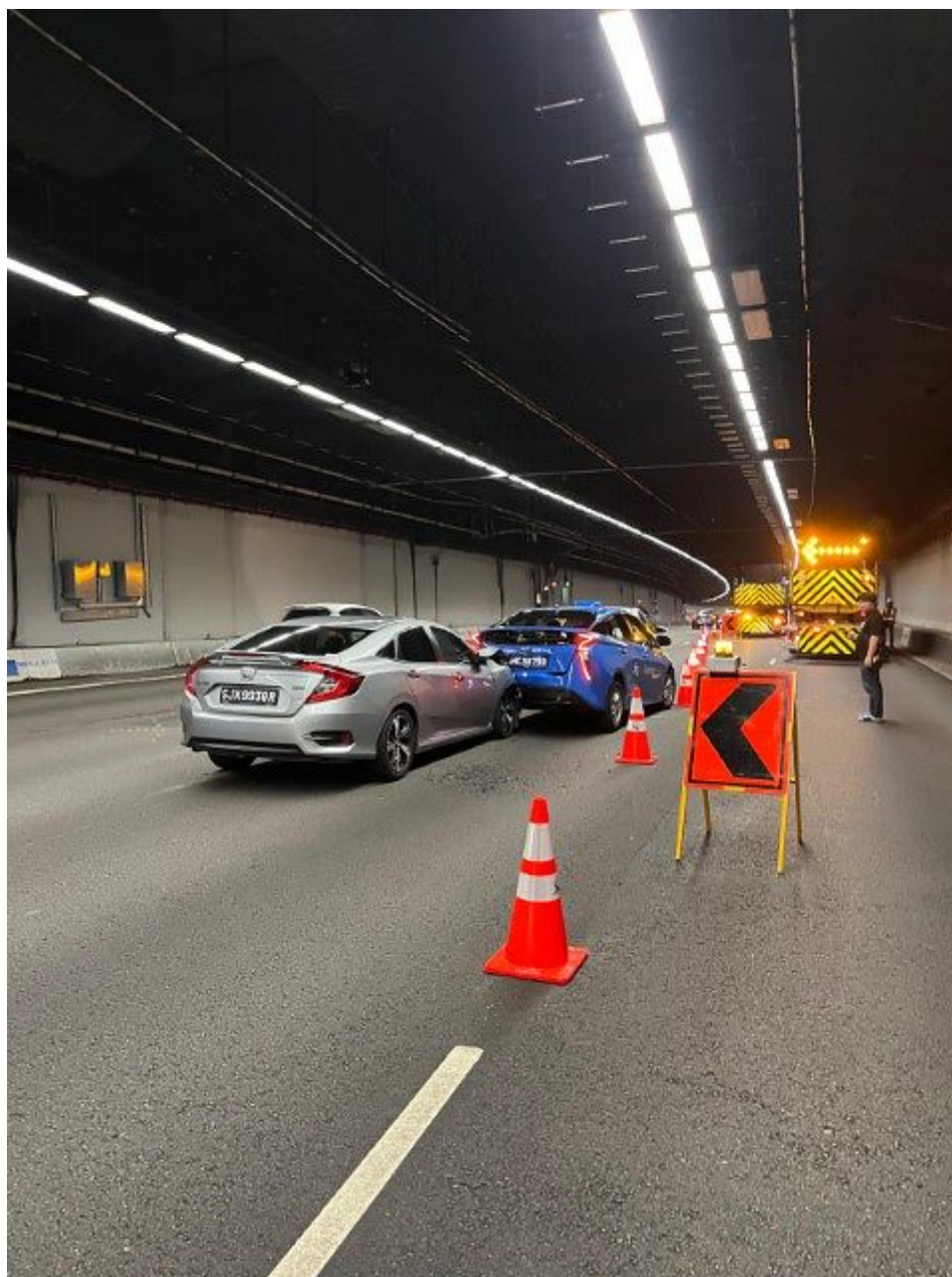


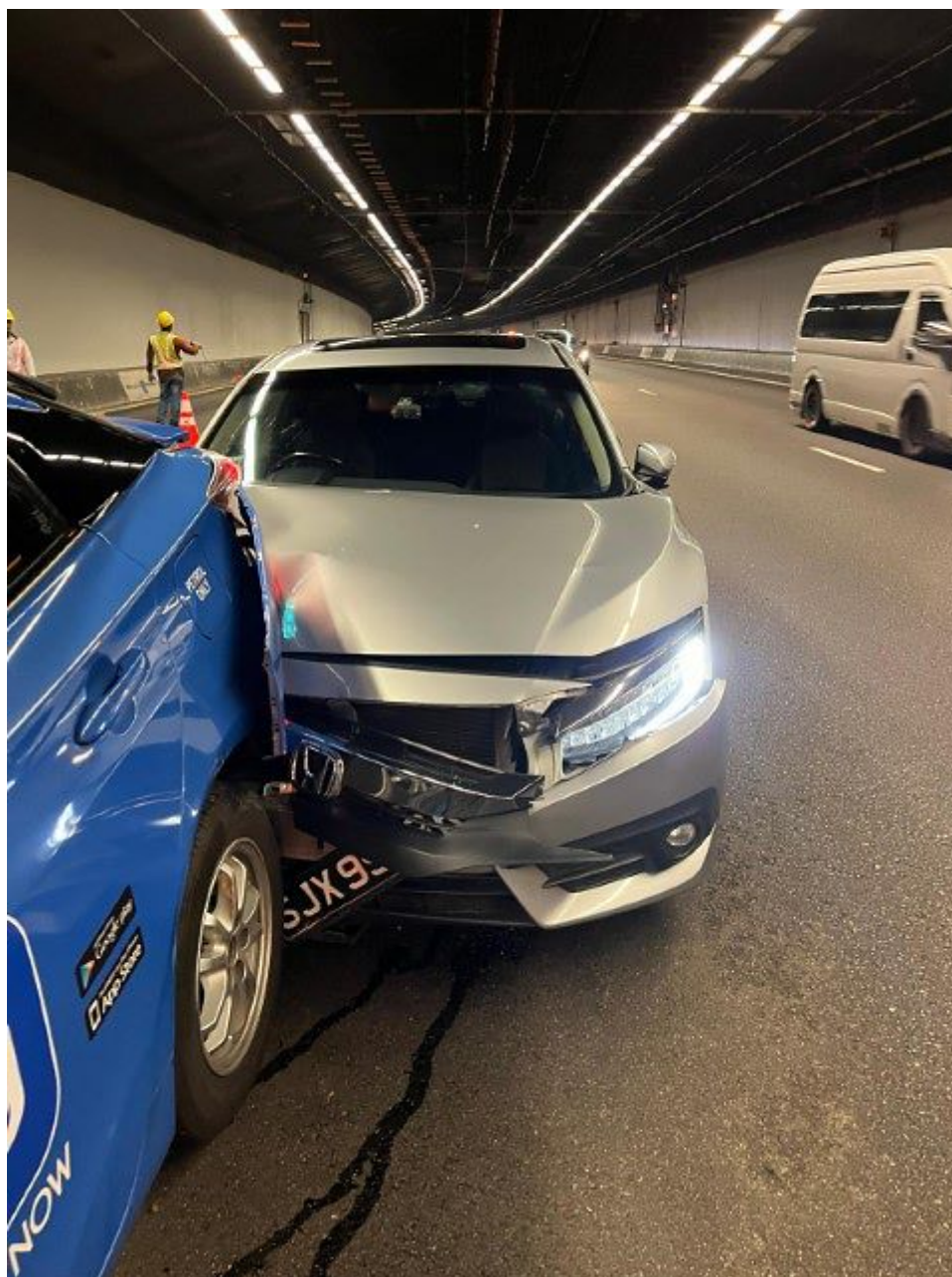


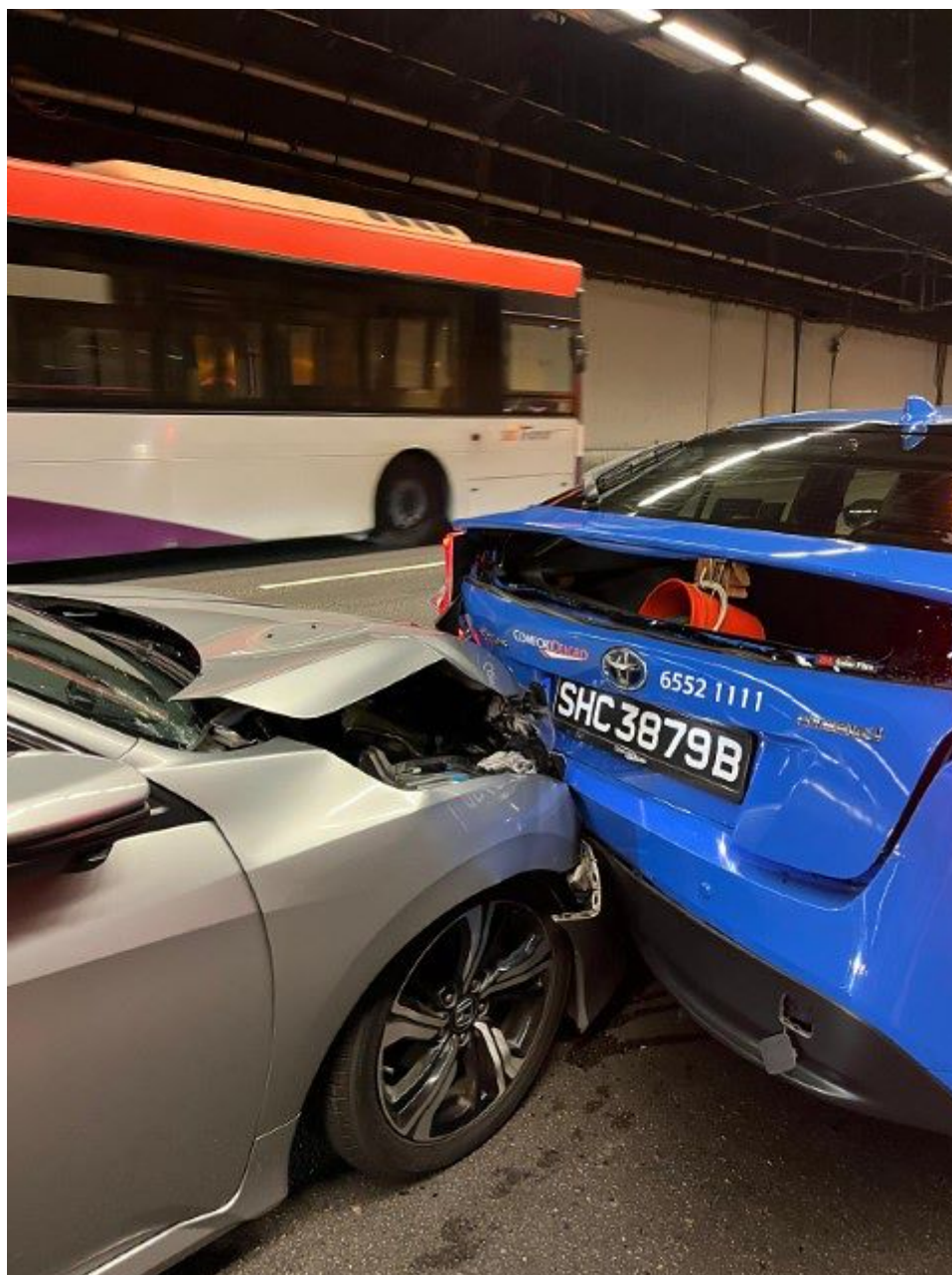














**SINGAPORE
POLICE FORCE**



T/20230727/7012

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

1 of 4

Report No. T/20230727/7012

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 27/07/2023 11:39		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: TAN KOK BOON			Address: 492 ADMIRALTY LINK #19-177 SINGAPORE 750492		
ID Type / ID No.: NRIC NO / S1630090Z			Contact No.: Home/Office: Mobile: 90991710		
Nationality: SINGAPORE CITIZEN			Email: tankb1919@gmail.com		
Sex: Male	Age: 59	Date of Birth: 19/04/1964	Type of Informant: Driver		
Race: Chinese			Language: English		
Occupation: TAXI DRIVER			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: 27/07/2023 00:35	Type of Location: Straight Road
Location: KAMPONG JAVA TUNNEL TOWARDS SLE				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: CHAIN COLLISION				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SHC3879B	Car	TOYOTA	PRIUS	Blue	Seriously Damaged	2
SJX9938R	Car	HONDA		Silver	Seriously Damaged	0
SKX2496H	Car	TOYOTA		White	Slightly Damaged	0



**SINGAPORE
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T/20230727/7012

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

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Report No. T/20230727/7012

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TAN KOK BOON	ID No.	S1630090Z
Related Vehicle	SHC3879B (Car)	Contact No.	90991710
Hospital/Clinic	OUR FAMILY PHYSICIAN CLINIC & SURGERY	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	27/07/2023	Date	27/07/2023
No. of Days granted Medical Leave	05	Degree of	Slight
Driver			
Name	KUAN CHOON CHEIT	ID No.	S7476814H
Related Vehicle	SJX9938R (Car)	Contact No.	98371654
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL
Driver			
Name	CHUA KIM SONG	ID No.	S8410525B
Related Vehicle	SKX2496H (Car)	Contact No.	90257209
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	NIL	Date	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

On 27/7/2023 at about 0035 Hrs, i was driving my taxi SHC3879B along Kampong Java Tunnel towards SLE with 2 passenger onboard. I was traveling at Lane 2 and at the point of time Lane 1 and Lane 2 was having roadwork and was Lane close.

In front of me a vehicle SKX2496H slow down and stopped so i follow slow down and almost near stationery. Suddenly i felt a great impact from behind and the impact push my taxi forward and collided onto the front Vehicle. I alighted my taxi and discover that a vehicle SJX9938R cannot stop on time and rear ended my taxi rear portion.

My neck, back, hand and legs pain due to the impact of the accident and morning when i



**SINGAPORE
POLICE FORCE**



T/20230727/7012

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

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Report No. T/20230727/7012

CONTINUATION OF REPORT

wake up the pain more worse so i consult doctor and was given 5 days MC.



**SINGAPORE
POLICE FORCE**



T/20230727/7012

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Tel No: 65470000

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Report No. T/20230727/7012

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPB /
TAY CHUN KEEN
Contact No.: 65476436

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

Date/Time:
27/07/2023 11:39

Classification Of Case:

NP168

