

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 16:30 (SGT)
Reported by Actual Driver
Date of Accident 28/07/2023 10:15 (SGT)
Exact Location of Accident 33 Telok Blangah Way, Singapore
Additional Location Information -
Country/State of Loss Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number SKX1871P

INSURED/POLICYHOLDER

Is company? Yes
Name Of Registered Owner MODERN SALES & LEASING
Company Reg No 5XXXX316E
Email Address ADMIN@MODERNAUTOMOTIVE.COM.SG
Mobile Phone No (Phone) +65-67484422
Alternative Phone No -

VEHICLE PARTICULARS

Manufacturer Toyota
Model Corolla
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 hire
Transmission Auto
CC 1598

INSURANCE COMPANY

Name of Insurance Company Income Insurance Limited
Policy Number / Cover Note Number 5134254331

DRIVER

Name of Driver CHUA CHYE HUAT
NRIC No SXXXX656Z
Date Of Birth 12/09/1950
Occupation Outdoor

Date Of Driving Pass	30/05/1968
Driving experience	55 YEARS AND 2 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97979354
Alt. Phone Number	-
Email Address	ADMIN@MODERNAUTOMOTIVE.COM.SG
Address	BLK 33 TELOK BLANGAH WAY #11-1038
Address complement	-
Postcode	090033
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Hirer
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?	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

AS PER POLICE REPORT NO. T/20230729/7025

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	SJR6499S
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-

Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	SIM YEE BENG
NRIC No	SXXXX896Z
Contact Number	(Phone) +65-91161602
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	CHUA CHYE HUAT
Gender	Male
Phone No	(Phone) +65-97979354
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SKX1871P
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.



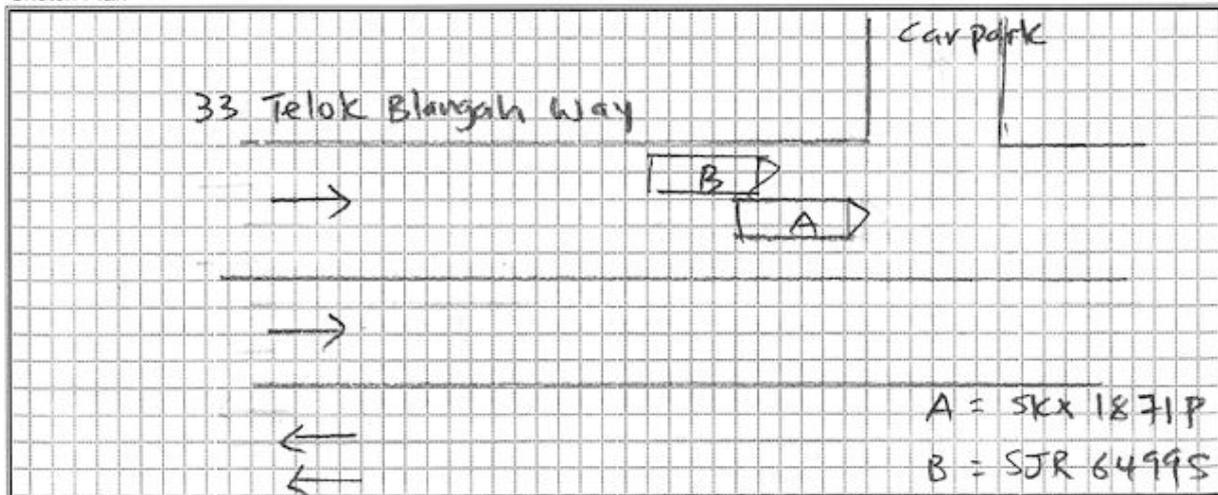
Policyholder's Signature / Date & Time

[Handwritten Signature]
28th JULY 2023
Actual Driver's Signature (if driver is not the policyholder) / Date & Time



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

Sketch Plan



vJun2022

1

Describe Circumstance of the Accident

I was driving straight along 33 Telok Blangah Way. Vehicle B was stationary at the road side without signal. When I passed by him, he swerved out suddenly without checking his blindspot and damaged the left rear door of my vehicle. The sudden impact caused my right side head (knocked the head of the seat belt pillar).

Declaration

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



Policyholder's Signature / Date & Time

[Signature]
20th July 2023

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



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





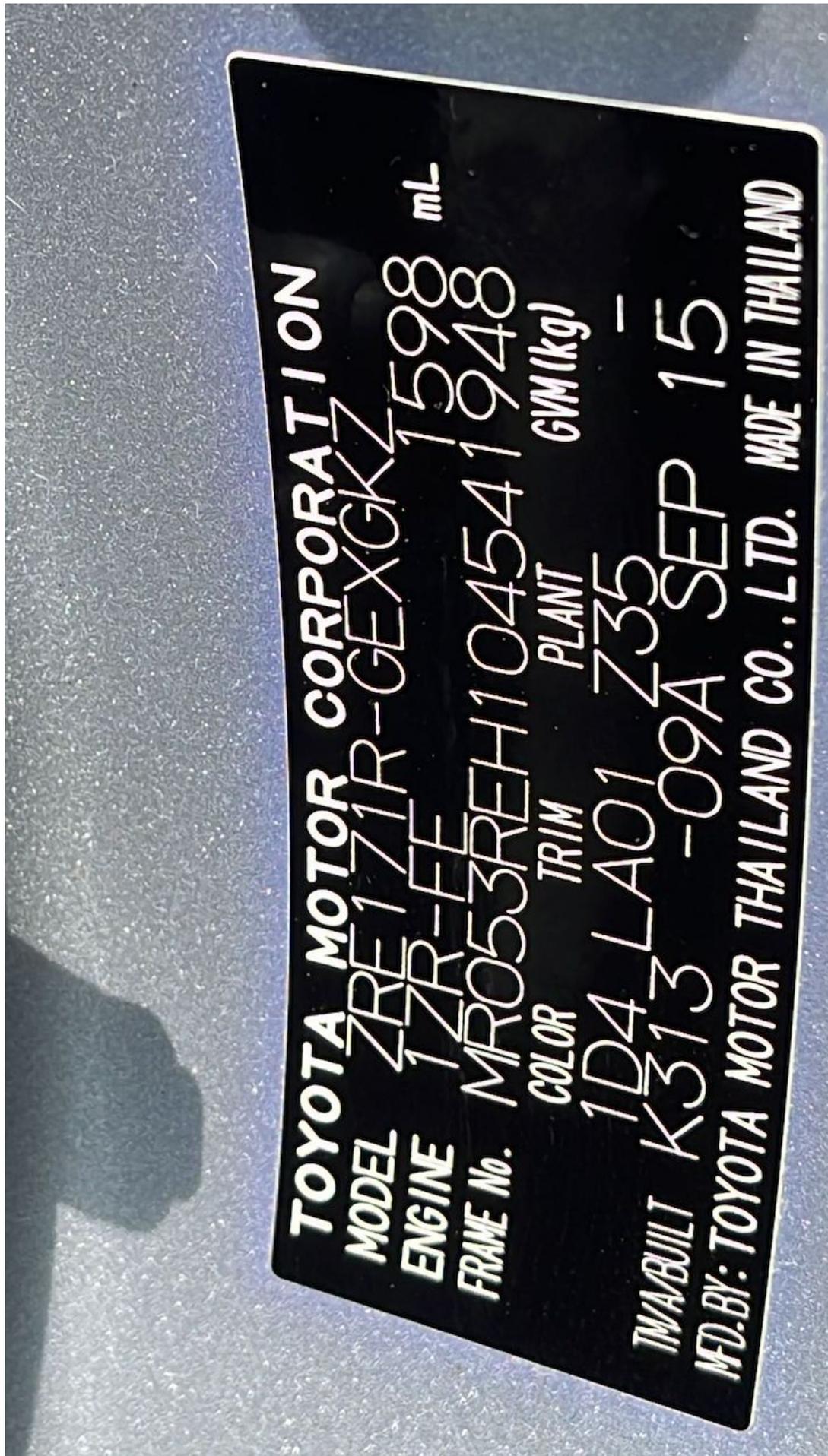
















**SINGAPORE
POLICE FORCE**



T/20230729/7025

1 of 3

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

Report No. T/20230729/7025

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/07/2023 13:02	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: CHUA CHYE HUAT		Address: 33 TELOK BLANGAH WAY #11-1038 SINGAPORE 090033	
ID Type / ID No.: NRIC NO / S0229656Z		Contact No.: Home/Office: Mobile: 97979354	
Nationality: SINGAPORE CITIZEN		Email: victorchua1950@gmail.com	
Sex: Male	Age: 72	Date of Birth: 12/09/1950	Type of Informant: Driver
Race: Chinese		Language: English	
Occupation: Private-hire car 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: 28/07/2023 10:15	Type of Location: Straight Road
Location: TELOK BLANGAH WAY				
Weather: Clear		Road Surface: Dry		
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Moving Vehicle Against - Others				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of
SJR6499S	Car			Grey	Slightly Damaged	0
SKX1871P	Car	TOYOTA	Altis	Silver	Seriously Damaged	0



**SINGAPORE
POLICE FORCE**



T/20230729/7025

2 of 3

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

Report No. T/20230729/7025

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKX1871P	NTUC Income Insurance Co-Operative Limited	5134254331	23/02/2023	26/04/2024

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	SIM YEE BENG		ID No.	S8934896Z
Related Vehicle	SJR6499S (Car)		Contact No.	91161602
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
Driver				
Name	CHUA CHYE HUAT		ID No.	S0229656Z
Related Vehicle	SKX1871P (Car)		Contact No.	97979354
Hospital/Clinic	ANTEH DISPENSARY		Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date	28/07/2023		Date	28/07/2023
No. of Days granted Medical Leave	03		Degree of	Slight

Brief Details.

On 28 July 2023 at about 1015hrs, I was driving along Telok Blangah Way toward Henderson Road before the HDB entrance to Blk 33 Telok Blangah Way. I was on right lane and there was a grey saloon car SJR6499S on left lane with his hazard light on. The grey vehicle was stationary on the left lane. As I drove beside him, the grey vehicle suddenly swerved to right and hit my left rear passenger door. The impact caused me to hit my head against the seat belt pillar, I blacked out from the impact. After I regained my consciousness, I felt dizzy.

I managed to exchange particular with the driver, his particular are SIM YEE BENG S8934896Z residing at Blk 526D Pasir Ris St 51 #05-539 Singapore 514526. There is a big dent on my left rear passenger door. The grey vehicle has damage on the right front bumper.

I went to a clinic as the right side of my head was swollen, I was given 3 days of MC.

I wish to state that the vehicle that I was driving belong to Modern Sales & Leasing.



**SINGAPORE
POLICE FORCE**



T/20230729/7025

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

3 of 3
Report No. T/20230729/7025

CONTINUATION OF REPORT

Signature Of Officer Recording The Report: Not applicable
Signature Of Interpreter: Not applicable
Officer In Charge Of Case: TP / TPIB / MUHAMMAD NOOR BIN ABDUL RAHMAN Contact No.: 65476219

Signature Of Informant: The identity of the person making this report has been authenticated by Singpass. No signature is required.
Date/Time: 29/07/2023 13:02
Classification Of Case:

NP168





IMPORTANT NOTE: Please submit the completed Addendum form to the same Accident Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No: SM02237S0004 Vehicle Registration No: SKX1871P
 Name (as shown in NRIC): Modern Sales & Leasing NRIC/FIN/Passport No: 53324316E
 (*Vehicle-Driver/Policyholder) (*) Please delete as appropriate
 Address: _____ Singapore ()
 Contact (Tel): 6748 4422 Mobile No.: _____
 Email Address: admin@modernautomotive.com.sg
 Date of Accident: 28/7/23 Time of Accident: 10:15
 Place of Accident: Telok Blauyah Way
 Insurance Company: ICOME

(B) ADDITIONAL INFORMATION /AMENDMENTS:

I have made a report on the above-mentioned accident and would like to include additional information or make the following amendments:

To attach police report

MODERN SALES & LEASING
 BLK 3023A UBI ROAD 1
 #01-61, SINGAPORE 408717
 TEL: 6747 4422 FAX: 6747 6720

Policyholder / Actual Driver's Signature
 Date: 31/7/23



Reporting Centre Personnel's Signature
 Name (as in NRIC/ID card):
 Date: 31/7/23