

## 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 .....	29/08/2024 12:24 (SGT)
Reported by .....	Both Policyholder and Actual Driver
Date of Accident .....	28/08/2024 16:30 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	KOON SENG ROAD & TEMBELING ROAD
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SLP672J
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#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	POH TEONG LIOU
NRIC No .....	S1540388H
Email Address .....	chaneltanxt@gmail.com
Mobile Phone No .....	(Phone) +65-97890116
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Nissan
Model .....	QASHQAI 1.2 DIG-T CVT ABS 2WD 5DR
Variant .....	-
Exact purpose for which vehicle was being used at time of accident .....	-
Are you claiming under your own insurance policy for repair to your vehicle? .....	No - Claiming third party
Vehicle Category .....	Private car
Transmission .....	Auto
CC .....	1197
Vehicle Fuel .....	-
First Registration Date .....	-
Chassis no .....	-
Effective Date/Time of Ownership .....	-

#### INSURANCE COMPANY

Name of Insurance Company .....	India International Insurance Pte Ltd
Policy Number / Cover Note Number .....	D22MPC0009378_01

#### DRIVER

Name of Driver .....	POH TEONG LIOU
NRIC No .....	S1540388H
Date Of Birth .....	26/10/1962
Occupation .....	Indoor
Driving Pass Date .....	02/01/1980
Driving License Pass Class .....	3
Driving License Validity .....	Valid
Driving experience .....	44 YEARS AND 7 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-97890116
Alt. Phone Number .....	-
Email Address .....	chaneltanxt@gmail.com
Address .....	27 SIMEI STREET 3 #07-07 S 529900
Address complement .....	-
Postcode .....	-
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 .....	Collision - Major/Minor Rd
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 TO ATTACHED POLICE REPORT

#### 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 .....	SHC4077S
Vehicle Manufacturer .....	-
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Taxi
Name of Driver .....	MR GOH
Contact Number .....	(Phone) +65-90217290
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 .....	POH TEONG LIOU
Gender .....	Male
Phone No .....	(Phone) +65-97890116
Address .....	-
Address Complement .....	-
Post Code .....	-
Approximate Age Years Old .....	-
Injuries Sustained .....	-
Injured person in which vehicle? .....	-
Were seat belts worn? .....	Yes
Was this injured conveyed to hospital by ambulance? .....	No

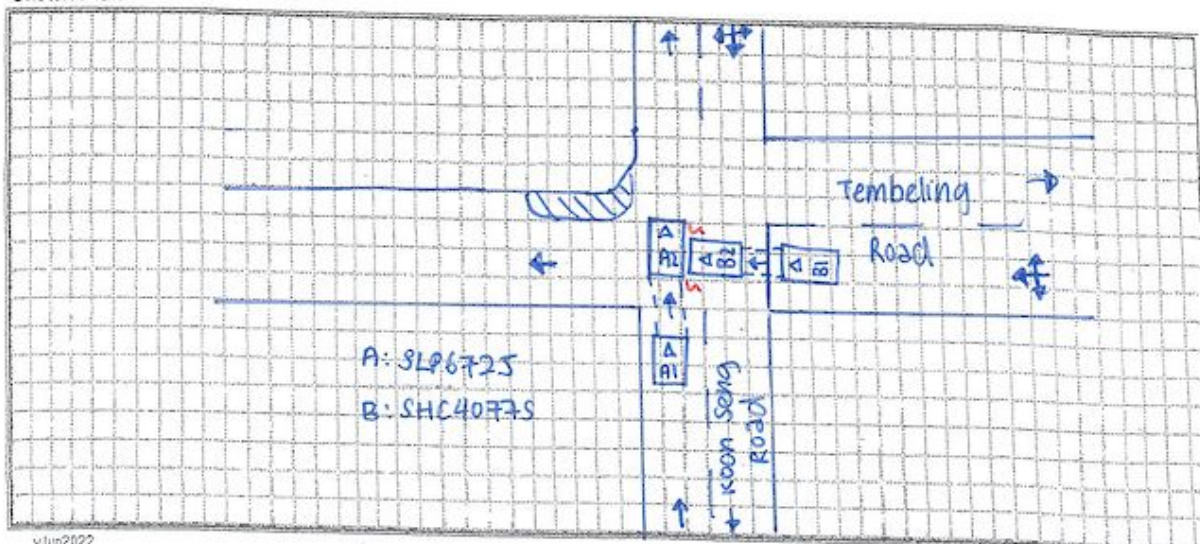
SKETCH PLAN

IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
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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 1200hrs  
29/8/2024 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

Describe Circumstance of the Accident

AS PER POLICE REPORT

Declaration

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

 1200hrs  
29/8/2024
 

Policyholder's Signature / Date & Time    Actual Driver's Signature (if driver is not the policyholder) / Date & Time    Witnessed by Reporting Centre Personnel (Name as in NRIC/ID card)

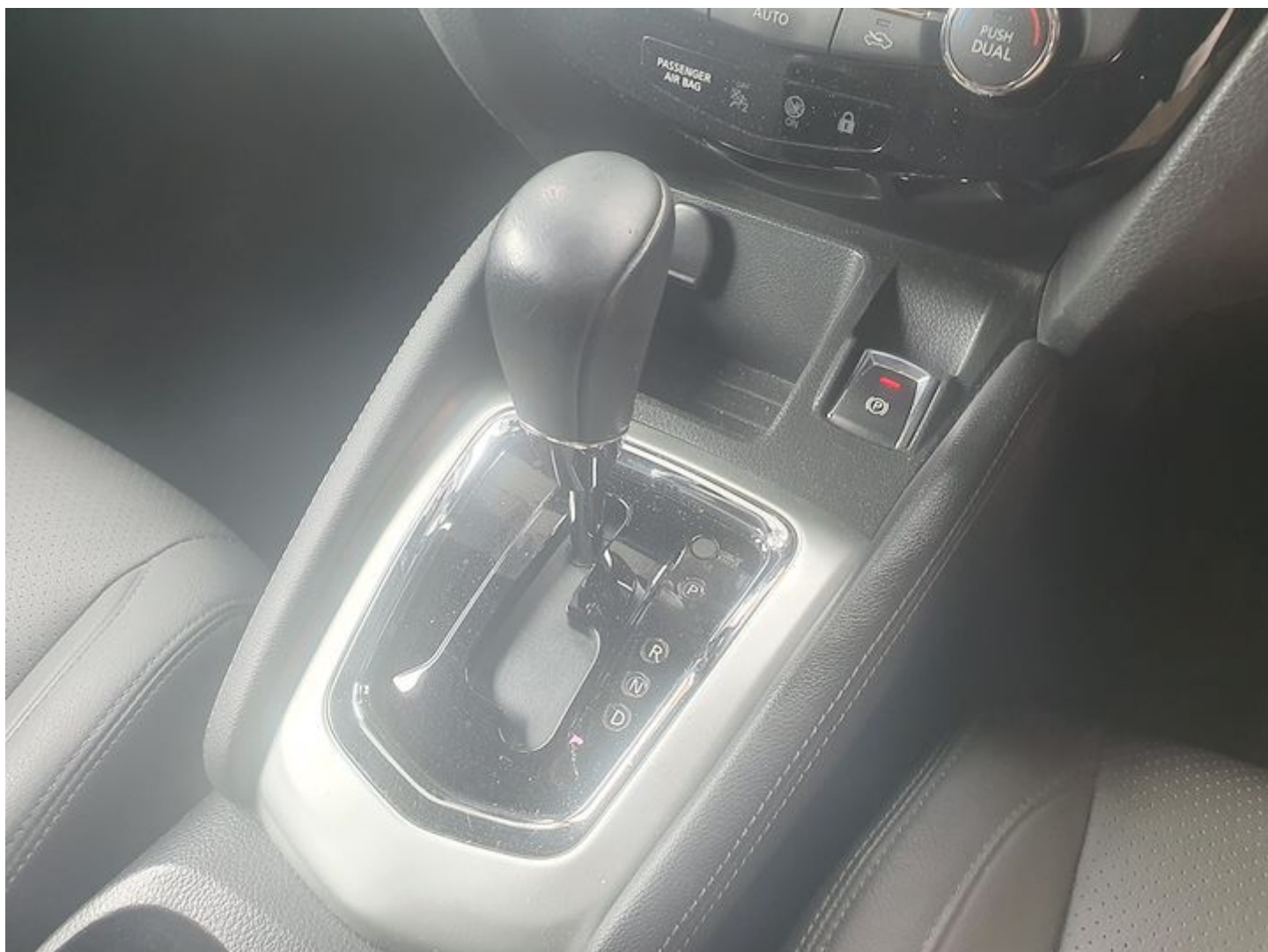




















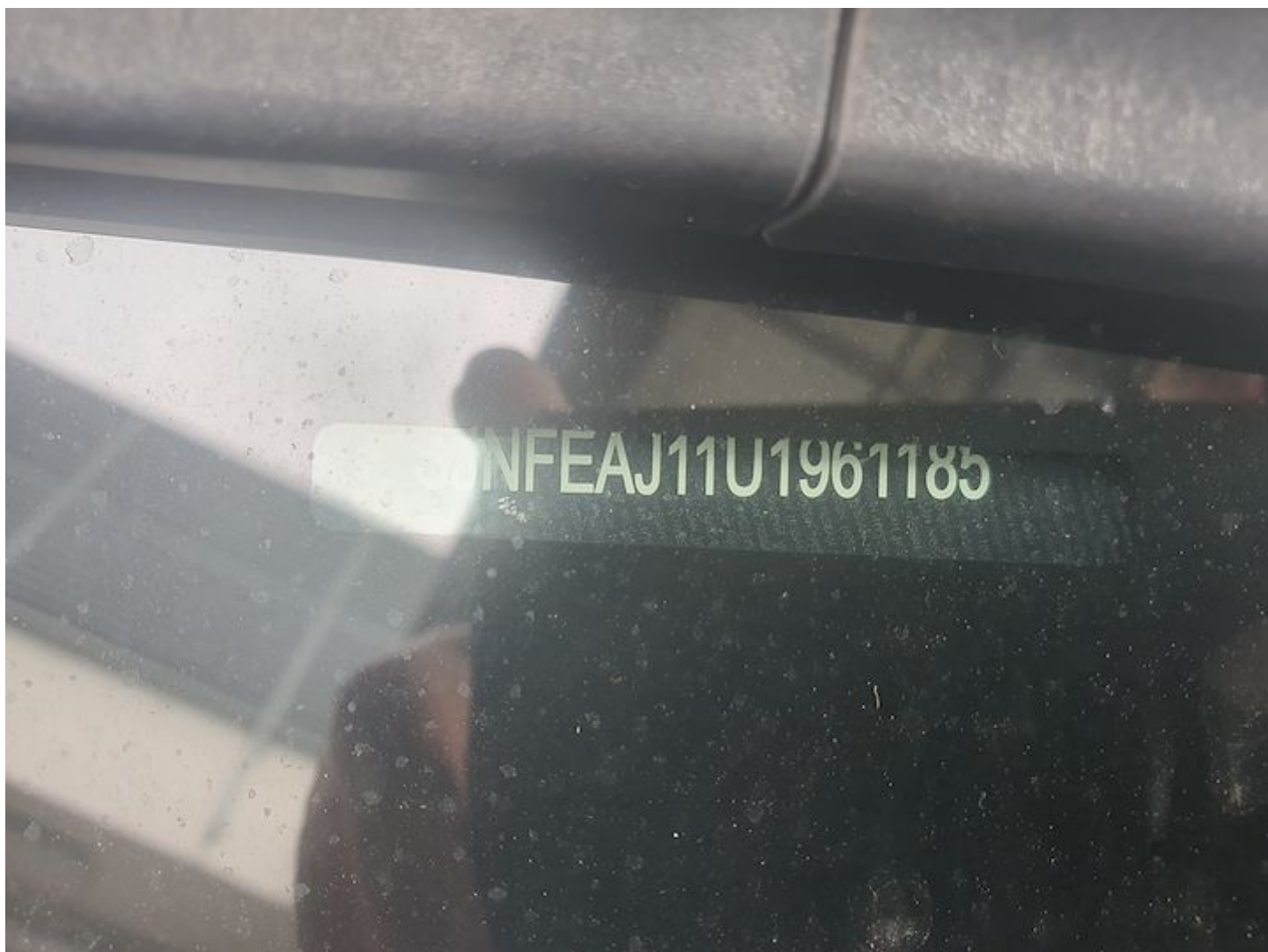




























**SINGAPORE  
POLICE FORCE**



T/20240829/7029

1 of 3

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

Report No. T/20240829/7029

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/08/2024 11:35		Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>					
Name of Informant: POH TEONG LIU			Address: 27 SIMEI STREET 3 #07-07 SINGAPORE 529900		
ID Type / ID No.: NRIC NO / S1540388H			Contact No.: Home/Office: Mobile: 97890116		
Nationality: SINGAPORE CITIZEN			Email: pohtl62@gmail.com		
Sex: Male	Age: 61	Date of Birth: 26/10/1962	Type of Informant: Driver		
Race: Chinese			Language: English		
Occupation: Company director			Driving Licence Information: Class: Date of Expiry:		

## General Information of the Accident

Type of Accident: Injury Others	Drink Drive: No	Date/Time of Accident: 28/08/2024 16:30	Type of Location: X-Junction
Location:  TEMBELING ROAD			
Weather: Clear		Road Surface: Dry	
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled	Traffic Volume: Light
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
SHC4077S	Motor car					0
SLP672J	Motor car	NISSAN	QASHQAI 1.2 DIG-T CVT ABS 2WD 5DR	Brown		0

## Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
SLP672J	INDIA INTERNATIONAL INSURANCE PTE LTD	D22MPC0009378_01	25/11/2023	24/11/2024



**SINGAPORE  
POLICE FORCE**

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



T/20240829/7029

2 of 3

Report No. T/20240829/7029

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	POH TEONG LIQU	ID No.	S1540388H
Related Vehicle	SLP672J (Motor car)	Contact No.	97890116
Hospital/Clinic	NORTHEAST (SIMEI) MEDICAL CENTRE	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	28/08/2024	Date Discharge	NIL
No. of Days granted Medical Leave (MC)	03	Degree of Injury	Slight

**Brief Details.**

I was travelling along Koon Seng Road on 28/08/2024 at about 1630 hrs with my car bearing car plate number SLP672J. I was travelling straight at Koon Seng Road near to X junction of Tembeling Road when suddenly vehicle bearing car plate number SHC4077S from Tembeling Road did not stop at the stop line collided onto the right portion of my vehicle. We then alighted, exchange particulars and left the scene.

After the accident I felt pain on my neck and chest, I proceeded to consult a doctor and was given 3 days MC.





**SINGAPORE  
POLICE FORCE**

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



T/20240829/7029

3 of 3

Report No. T/20240829/7029

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:  
Not applicable

Signature Of Interpreter:  
Not applicable

Officer In Charge Of Case:  
TP / AEIT /  
LEE GUANG HUI  
Contact No.: 65476414

NP168

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

Date/Time:  
29/08/2024 11:35

Classification Of Case:



INDIA INTERNATIONAL INSURANCE PTE LTD

Co Reg No: 1987037921; GST Reg No: M2-0070306-X

6 Raffles Quay #22-00 Singapore 048580

Office (65) 63476100 Email: insure@ii.com.sg

Website: www.ii.com.sg

## CERTIFICATE OF INSURANCE

MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CHAPTER 189)  
 MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES, 1960 ROAD TRANSPORT ACT, 1987 (MALAYSIA)  
 MOTOR VEHICLES (THIRD-PARTY RISKS) RULES, 1959 (MALAYSIA)

All Accidents must be reported within 24 hours of the incident regardless of whether it will lead to a claim.

<b>CERTIFICATE NO.: D22MPC0009378_01</b>		<b>COVER: COMPREHENSIVE</b>
1. Index Mark and Registration Number of Vehicle	:	SLP672J
Chassis No	:	SJNFEAJ11U1961185
2. Name of Policyholder	:	POH TEONG LIOU
3. Effective date of Insurance	:	25 Nov 2023
4. Expiry date of Insurance	:	24 Nov 2024
5. Persons or Classes of Persons entitled to drive*		
(a) The Policyholder The Policyholder may also drive a Motor Car not belonging to or hired (under a hire purchase agreement or otherwise) to him/her or his/her employer or his/her partner. (b) Any other person who is driving on the Policyholder's order or with his/her permission. Provided that the person driving is permitted in accordance with the licensing or other laws or regulations to drive the Motor Vehicle or has been so permitted and is not disqualified by order of a Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle		
6. Limitations as to use*		
Use only for social, domestic and pleasure purposes and for the Policyholder's business.		
<b>The Policy does not cover</b>		
a) Use for hire or reward. b) Use for racing, pace-making, reliability trial, speed-testing. c) Use for the carriage of goods other than samples in connection with any trade or business. d) Use for any purpose in connection with the Motor Trade.		
*Limitations rendered inoperative by Section 8 of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Section 95 of the Road Transport Act, 1987 (Malaysia), are not to be included under these headings.		
Insured & Name Drivers Excess Section I	SGD	600.00
Unnamed drivers Excess Section I	SGD	1,100.00
Windscreen Excess	SGD	100.00
Hire Purchase Company	:	United Overseas Bank Limited
FOR DRIVERS BELOW 21 YEARS OR ABOVE 69 YEARS OF AGE &/OR LESS THAN 2 YEARS SINGAPORE DRIVING LICENCE, ADDITIONAL EXCESS OF \$2500/- ON SECTION I WILL BE APPLICABLE.		
I/We HEREBY CERTIFY that the Policy to which this Certificate relates is issued in accordance with the provisions of the Motor Vehicles (Third-Party Risks and Compensation) Act (Chapter 189) and Part IV of the Road Transport Act, 1987 (Malaysia).		
Agent/Broker	:	A000077/IIIM PTE LTD
Date of Issue	:	03/11/2023 12:39:06
MX1-Private Car (Insured Driving)		
		For India International Insurance Pte Ltd
		Nalini Venugopal MD & CEO