

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	30/08/2024 12:22 (SGT)
Reported by	Actual Driver
Date of Accident	28/08/2024 12:40 (SGT)
Exact Location of Accident	Kampong Java Tunnel, Singapore
Additional Location Information	TOWARDS CTE
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	EU8810G
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LEE PENG KUEN
NRIC No	SXXXX206J
Email Address	NICOQUEK92@GMAIL.COM
Mobile Phone No	(Phone) +65-97618906
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Kia
Model	Cerato
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 car
Transmission	Auto
CC	1591
Vehicle Fuel	-
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	Income Insurance Limited
Policy Number / Cover Note Number	5121944568-03

DRIVER

Name of Driver	NICO QUEK PING YANG
NRIC No	SXXXX994F
Date Of Birth	15/06/1992
Occupation	Indoor
Driving Pass Date	29/05/2023
Driving License Pass Class	3A
Driving License Validity	Valid
Driving experience	1 YEAR AND 3 MONTHS
Gender	Male
Mobile Number	(Phone) +65-96504040
Alt. Phone Number	-
Email Address	NICOQUEK92@GMAIL.COM
Address	631 JURONG WEST ST 65
Address complement	#16-272
Postcode	640631
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Relative
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

REFER TO ATTACH

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	SHC703U
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	NICO QUEK PING YANG
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	5 DAYS MC
Injured person in which vehicle?	EU8810G
Were seat belts worn?	-
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:

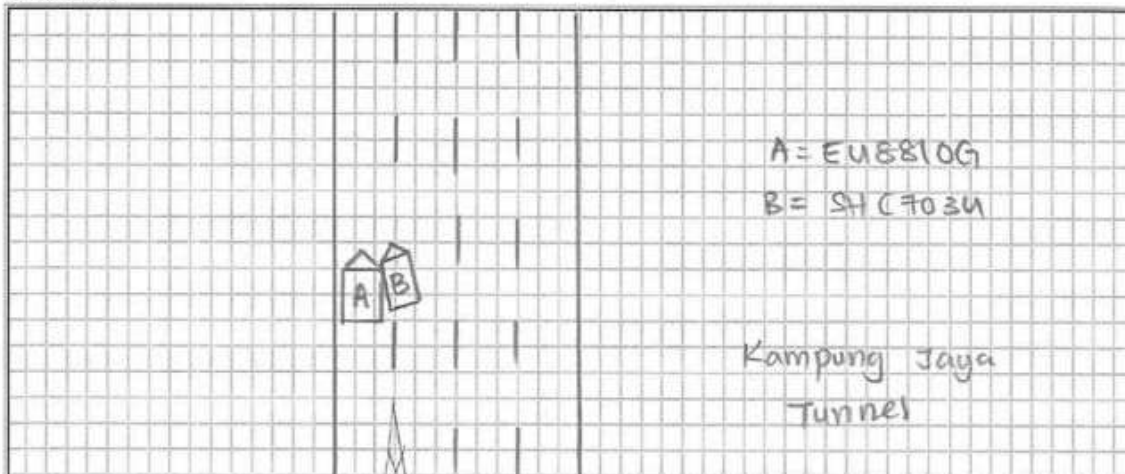
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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


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


Witnessed by Reporting Centre Personnel
(Name as in NR(C/D card))

Sketch Plan



The sketch plan is a grid with handwritten details. In the center, there are two small squares labeled 'A' and 'B'. To the right, the text 'A = EU8810G' and 'B = SHC703H' is written. Below this, 'Kampung Jaya Tunnel' is written. At the bottom center, there is a small drawing of a tunnel entrance.

Describe Circumstance of the Accident

Refer to Police Report

T/20240829/7119

Declaration

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

Lee

Policyholder's Signature / Date & Time

Driver's Signature (if driver)

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/20240829/7119

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

1 of 3

Report No. T/20240829/7119

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/08/2024 20:52		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: NICO QUEK PING YANG			Address: 631 JURONG WEST STREET 65 #16-272 SINGAPORE 640631		
ID Type / ID No.: NRIC NO / S9220994F			Contact No.: Home/Office: Mobile: 96504040		
Nationality: SINGAPORE CITIZEN			Email: NICOQUEK92@GMAIL.COM		
Sex: Male	Age: 32	Date of Birth: 15/06/1992	Type of Informant: Driver		
Race: Chinese			Language: English		
Occupation: Cloud Engineer			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 12:45	Type of Location:
Location: HAVELOCK ROAD				
Weather:		Road Surface:		
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision:				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
EU8810G	Motor car					0

Details of Person Involved	
Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20240829/7119

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

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Report No. T/20240829/7119

CONTINUATION OF REPORT

Driver			
Name	NICO QUEK PING YANG	ID No.	S9220994F
Related Vehicle	EU8810G (Motor car)	Contact No.	96504040
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 (MC)	05	Degree of Injury	Serious

Brief Details.

On the stated date and time, I was driving EU8810G along Havelock Rd slip road towards CTE(SLE).

I was travelling along the 1 lane slip road when a huge impact knocked my vehicle's right portion.

I was caught off guard as my vehicle rocked sideways resulting in my left knee knocking against the centre console of my vehicle really hard.

It was then that I realised that SHC703U, which I recalled was initially behind me along the same slip road, had appeared on my right and suddenly swerved into my vehicle's right portion.

The same evening, my left knee started feeling sore.

The following morning, I woke up to realise that my left knee was swollen and the pain had gotten worse.

Furthermore, I was limping as I could not walk properly.

My neck also felt stiff as well.

As such, I sought treatment at Blessed Medical near my place and I was given 5 days MC for injuries caused by the accident.



**SINGAPORE
POLICE FORCE**

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



T/20240829/7119

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Report No. T/20240829/7119

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 20:52

Classification Of Case: