

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	23/09/2024 12:53 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	22/09/2024 10:20 (SGT)
Exact Location of Accident	Ang Mo Kio Ave 8, Singapore
Additional Location Information	-
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGL1399Y
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	LEE KEH GUAN
NRIC No	S6972242C
Email Address	GTAUTO07@GMAIL.COM
Mobile Phone No	(Phone) +65-97516587
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Honda
Model	Civic
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	Manual
CC	0
Vehicle Fuel	-
First Registration Date	-
Chassis no	-
Effective Date/Time of Ownership	-

INSURANCE COMPANY

Name of Insurance Company	China Taiping Insurance (Singapore) Pte. Ltd.
Policy Number / Cover Note Number	DMPCSNA00125442307

DRIVER

Name of Driver	LEE KEH GUAN
NRIC No	S6972242C
Date Of Birth	06/01/1969
Occupation	Indoor
Driving Pass Date	07/02/1996
Driving License Pass Class	3
Driving License Validity	Valid
Driving experience	28 YEARS AND 7 MONTHS
Gender	Male
Mobile Number	(Phone) +65-97516587
Alt. Phone Number	-
Email Address	GTAUTO07@GMAIL.COM
Address	552 ANG MO KIO AVE 10 #07-1984
Address complement	-
Postcode	560552
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	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?	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

REFER TO POLICE REPORT: T/20240922/7054.

ATTACHMENT(S)

Are accident photos available for attachment?	Yes
Was there any video captured by Car Camera?	Yes

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SNN1634A
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Private car
Name of Driver	LIOW ZENG QUAN
Contact Number	-
Address	-
Address complement	-
Postcode	-
Insurance Company Name	-
Nature Of Damage	-
Details of property damaged in accident	VEHICLE B
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMM35C
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	VEHICLE C
No. Of Passenger (Including Driver)	-

SKETCH PLAN

IMPORTANT NOTICE

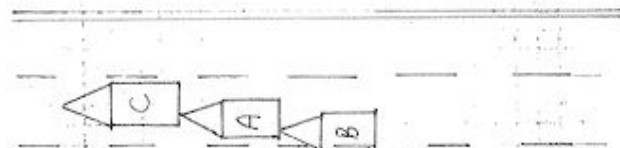
1. Please report correctly the details of the accident to speed up the claims process.
 2. This Form must be completed by the Policyholder and/or the Authorised Driver.
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 6. The report will be forwarded by the insurers of the GIA Records Management 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 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

Sketch Plan



Ang mo Kio Avenue 8

Vehicle C : Smm35C

Vehicle B : SNN1634A

Vehicle A : SGL1399Y

Describe Circumstances of the Accident

Please refer to traffic police report.

Declaration

We declare the foregoing particulars are true in every respect.



Policyholder's Signature / Date &
Time



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

Witnessed by Reporting Centre Personnel

























**SINGAPORE
POLICE FORCE**



T/20240922/7054

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

1 of 3

Report No. T/20240922/7054

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 22/09/2024 19:08		Vide Report No.:		Station Diary No.:
Informant's Particulars				
Name of Informant: LEE KEH GUAN		Address: 552 Ang mo kio ave 10 #07-1984 SINGAPORE 560552		
ID Type / ID No.: NRIC NO / S6972242C		Contact No.: Home/Office: Mobile: 97516587		
Nationality: CHINESE		Email: gtauto07@gmail.com		
Sex: Male	Age: 55	Date of Birth: 06/01/1969	Type of Informant: Driver	
Race: Chinese		Language: English		
Occupation: Other business services and administration managers		Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 22/09/2024 11:20	Type of Location: Straight Road
Location: ANG MO KIO AVENUE 8				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGL1399Y	Motor car	HONDA	CIVIC 2.0L M	Red	Seriously Damaged	0
SMM35C	Motor car	BMW		Black	Slightly Damaged	0
SNN1634A	Motor car	MERCEDES BENZ		Silver	Seriously Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date



**SINGAPORE
POLICE FORCE**



T/20240922/7054

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

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Report No. T/20240922/7054

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective Date	Expiry Date
SGL1399Y	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSNA00089882 408	04/09/2024	04/09/2025

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LEE KEH GUAN		ID No. S6972242C
Related Vehicle	SGL1399Y (Motor car)		Contact No. 97516587
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 22.09.2024 11.20am i was driving (SGL1399Y) along Ang mo kio ave 8 waiting traffic light suddenly vehicle (SNN1634A) hit me car so hard that my car was push forward hit to front vehicle (SMM35C)

After the accident we exchange particular .

I feel pain on my body because of the strong impact of the accident so i went to Norwood Medical Clinic for treatment and was given 5 days mc.

**SINGAPORE
POLICE FORCE**

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



T/20240922/7054

3 of 3

Report No. T/20240922/7054

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:
22/09/2024 19:08

Classification Of Case:



中国太平
CHINA TAIPING

中国太平保险(新加坡)有限公司
CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.

RENEWAL NOTICE

YOU CAN NOW PAY YOUR PREMIUM BY:-

1. ANY AXS STATIONS, OR
2. 0% INTEREST INSTALMENT PLAN WITH OCBC CREDIT CARD SUBJECT TO A MINIMUM AMOUNT OF S\$500.00 CHARGED TO THE CARD.

Agency	AN0697A	Class of Policy	Motor Private Car	Policy No.	DMPCNA00125442307
Account	AN0697A	Ren. Notice Date	05/07/2024	Expiry Date	03/09/2024
Client	3193146				

Renewal Period from 04-09-2024 to 03-09-2025, both dates inclusive

Insured's Name	LEE KEE GUAN
Address	BLK 552 ANG MO KIO AVENUE 10 #07-1984 SINGAPORE 560552

Business/Occupation	MANAGER
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Premium	
Basic Annual Premium	S\$1,654.00
Less 10% Loyalty Discount	S\$ 165.40
No Claim Discount -50%	S\$ 744.30
Promotion Discount	S\$ 74.43
Total Annual Premium	S\$669.87
Renew. Premium	S\$669.87
Premium GST	S\$60.29
Total	S\$730.16

Risk No.1	Motor Private Car		
	ORIGINAL REGISTRATION DATE: 04-09-2006		
Make/Model	: HONDA CIVIC 2.0L SI	No. of seats	: 5
Registration	: SGL1399Y	Body Type	: Saloon
Engine No.	: K20Z21500781	Capacity ccs	: 1998
Chassis No.	: JHMPD25406S200779	Certificate Ref.	: MX1
Year of Manuf/Regn	: 2006/04.09.2006		
Type of Cover	: Third Party Fire & Theft		
Financial Interest	: CENTURY TOKYO LEASING (S) PTE LTD		
Sum Insured	: Market value at the time of loss		
Sum Insured:	Market value at the time of loss		
Named Drivers THE INSURED	: LEE KEH GUAN		
Named Drivers	: MOCK CHANG TENG		

The following clauses and endorsements apply to this policy

Subject to Endt. 3(q).

NO CLAIM DISCOUNT PROTECTION (NO CHARGE) - 10% NCD & ABOVE

It is agreed that the No Claim Discount (NCD) entitlement in this Policy is protected as follows (APPLICABLE TO POLICYHOLDERS WITH 10% NCD AND ABOVE):

NCD entitlement on renewal of the Policy

No. of claims where existing where existing where existing where existing where existing

Continued on page 2

China Taiping Insurance (Singapore) Pte. Ltd. (Co. Reg. No. 200208384E)
3 Anson Road #16-00 Springleaf Tower Singapore 079909

6389 6111

6222 1033

www.sg.cntaiping.com