

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	19/06/2024 09:15 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	14/06/2024 18:40 (SGT)
Exact Location of Accident	Bedok North Rd, Singapore
Additional Location Information	BEFORE TURNING INTO BARTLEY VIADUCT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKX8391L
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	OIE ZHEN WEN
NRIC No	SXXXX248J
Email Address	PIERRELHM@HOTMAIL.COM
Mobile Phone No	(Phone) +65-91124945
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Nissan
Model	Qashqai
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	1198

INSURANCE COMPANY

Name of Insurance Company	EQ Insurance Company Ltd
Policy Number / Cover Note Number	-

DRIVER

Name of Driver	PIERRE LUO HUAIMENG
NRIC No	TXXXX053Z
Date Of Birth	08/07/2000
Occupation	Outdoor

Driving Pass Date	10/08/2023
Driving experience	10 MONTHS
Gender	Male
Mobile Number	(Phone) +65-91124945
Alt. Phone Number	-
Email Address	PIERRELHM@HOTMAIL.COM
Address	203 SERANGOON CENTRAL
Address complement	05-64
Postcode	550203
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Child
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 - Head to Rear
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)	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	OIE ZHEN WEN
Gender	Female

PASSENGER 2

Name	TAN SIEW BOEY
Gender	Female

DETAILS OF POLICE ACTION

Was the accident reported to the police?	Yes
Police Station Name	Hougang Neighbourhood Police Centre
Police Station Phone No	(Phone) +65-18004890999
Alt. Police Station Phone No	(Fax) +65-63128989
Police Station Address	60 Hougang Ave 9 Singapore 538775
Was notice of intended Prosecution given?	No
If yes, against whom?	-

CIRCUMSTANCES OF ACCIDENT

REFER TO SKETCH PLAN

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	GBJ9375H
Vehicle Manufacturer	-
Vehicle Model	-
Vehicle Variant	-
Vehicle Colour	-
Vehicle Category	Commercial vehicle
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	OIE ZHEN WEN
Gender	Female
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	5 DAYS MC
Injured person in which vehicle?	SKX8391L
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	-

INJURED 2

Name of injured person	TAN SIEW BOEY
Gender	Female
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	5 DAYS MC
Injured person in which vehicle?	SKX8391L
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	-

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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 Traffic Police Department for investigation.**
6. This report will be forwarded by the insurers to 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.



Dei

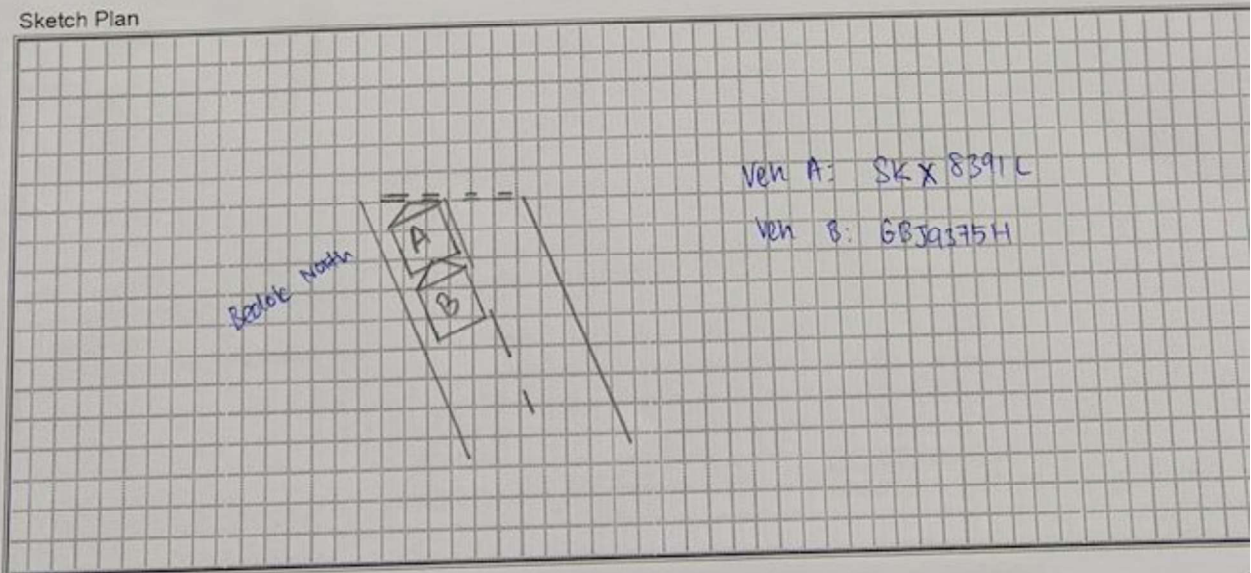
Policyholder's Signature / Date & Time

Pierre

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

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

Sketch Plan



Describe Circumstance of the Accident

On the stated date and time, my vehicle has
stop at the filter lane of Bedok North Rd before
turning into Bentley road. Suddenly, I felt an impact
on my rear portion of vehicle.

Declaration

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

[Signature]

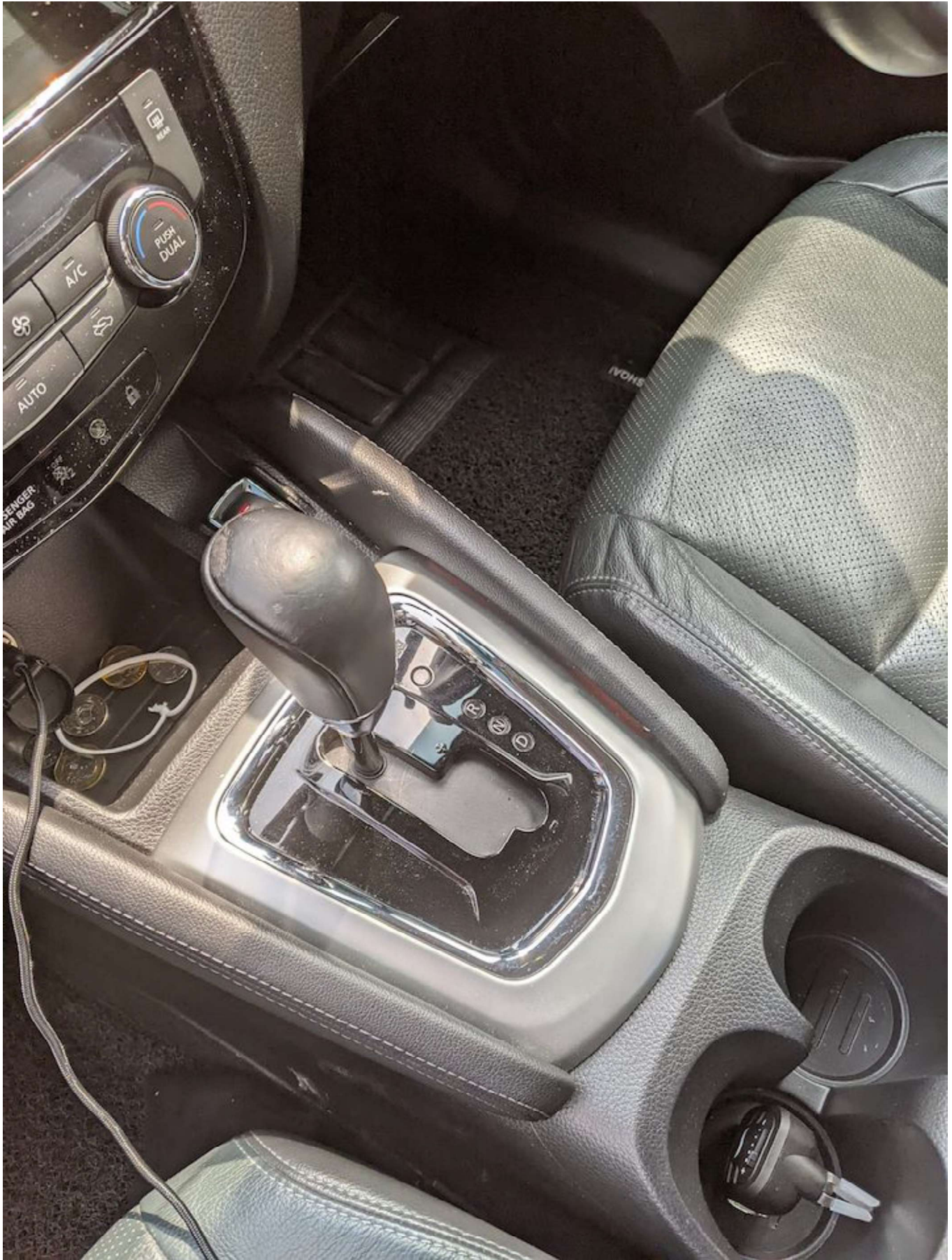
Policyholder's Signature / Date & Time

[Signature]

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/20240616/2000

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

1 of 4

Report No. T/20240616/2000

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 16/06/2024 00:03	Vide Report No.:	Station Diary No.: 1
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Informant's Particulars

Name of Informant: PIERRE LUO HUAIMENG			Address: 203 SERANGOON CENTRAL #05-64 SINGAPORE 550203		
ID Type / ID No.: NRIC NO / T0026053Z			Contact No.: Home/Office: Mobile: 91124945		
Nationality:			Email:		
Sex: Male	Age: 23	Date of Birth: 08/07/2000	Type of Informant: Driver		
Race: Chinese			Language:		
Occupation: SAF NSF			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: 14/06/2024 18:40	Type of Location: Bend
Location: BEDOK NORTH ROAD				
Weather: Cloudy		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Conditio	No of Passenger
GBJ9375H	Lorry	MITSUBISHI		White	Slightly Damaged	10
SKX8391L	Motor car	NISSAN	QASHQAI 1.2 DIG-T CVT ABS 2WD 5DR	Silver	Slightly Damaged	2



**SINGAPORE
POLICE FORCE**



T/20240616/2000

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Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

Report No. T/20240616/2000

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	PALANIAPPAN PALANIAPPAN	ID No.	F7611125K
Related Vehicle	GBJ9375H (Lorry)	Contact No.	96788028
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL
Passenger			
Name	OIE ZHEN WEN	ID No.	S1694248J
Related Vehicle	SKX8391L (Motor car)	Contact No.	81235565
Hospital/Clinic	SENGKANG GENERAL HOSPITAL PTE. LTD.	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date Treatment	15/06/2024	Date Discharge	15/06/2024
No. of Days granted Medical Leave	05	Degree of	Slight
Passenger			
Name	TAN SIEW BOEY	ID No.	S0881549F
Related Vehicle	SKX8391L (Motor car)	Contact No.	81235499
Hospital/Clinic	SENGKANG GENERAL HOSPITAL PTE. LTD.	Class of Driving Licence & Expiry	Class: NIL Date of Expiry: NIL
Date Treatment	15/06/2024	Date Discharge	15/06/2024
No. of Days granted Medical Leave	05	Degree of	Slight



**SINGAPORE
POLICE FORCE**



T/20240616/2000

Police Station Of Origin:
Hougang N.P.C
60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

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Report No. T/20240616/2000

CONTINUATION OF REPORT

Driver			
Name	PIERRE LUO HUAIMENG	ID No.	T0026053Z
Related Vehicle	SKX8391L (Motor car)	Contact No.	91124945
Hospital/Clinic	NIL	Class of Driving Licence & Expiry	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of	NIL

Brief Details.

On 14/06/2024 at about 1830hrs, I recalled driving my vehicle bearing plate no: SKX8391L with my mother namely Mdm Oie Zhen Wen (Seated Infront) and my grandmother namely Mdm Tan Siew Boey (Seated Behind) along Bedok North Road towards the direction of Serangoon (Home). When a traffic accident had took place at a slip road of Bedok North Road at around 1840hrs.

From my knowledge, I was initially driving along Bedok North Rd. Thereafter, I have turn left into a slip road. I recall driving passed one pedestrian crossing and in coming to a complete stop thereafter. At that juncture, there was another vehicle on my right blocking my view. Hence, I have to inch forward my vehicle slightly, in order to check for incoming vehicles that was travelling straight along Bartley Rd East. Prior to me turning out of Bedok North Rd (Slip Rd) for Bartley Rd East, one lorry bearing plate no: GBJ9375H have collided into the rear of my vehicle. Subsequently, we have all alighted from our vehicle in making the necessary check.

From my knowledge, no government property was damage, nobody was injured at that juncture. However, the rear of my vehicle did sustain some damages in terms of scratches, cracks and dents to my vehicle exterior (bumper/tail light area). Thereafter, we have proceeded to exchange our particulars before driving off in order not to cause any unnecessary jam.

On 15/06/2024 at about 1200hrs, my mum and grandmother felt some discomfort and pain on their neck area. Hence, I have proceeded to bring them both to Sengkang Hospital for check/treatment. They have since been given a 5 days MC for their injuries.

I wish to state that I do have both front and back incar camera installed and turned on. Hence, the entire incident yesterday was also captured. I wish to inform that I'm willing to pass the said footages to traffic police if they require it for further police investigation.

I'm lodging this police report for my encounter.



**SINGAPORE
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T/20240616/2000

Police Station Of Origin:
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60 Hougang Avenue 9 SINGAPORE 538775
Tel No: 1800-4890999

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Report No. T/20240616/2000

CONTINUATION OF REPORT

Signature of Officer Recording The
F /
SGT 3 LUM HOW MUN

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / AEIT /
INSP (1) BOON YEN KIAN
Contact No.: 65472079

Signature Of Informant:

Date/Time:
16/06/2024 00:03

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: SA18246F0004 Vehicle Registration No: SKX 2391 L
 Name (as shown in NRIC): Pierre Luo NRIC/FIN/Passport No: T0026055Z
 (*Vehicle Driver/Vehicle Owner) (*) Please delete as appropriate
 Address: _____ Singapore ()
 Contact (Tel): _____ Mobile No.: _____
 Email Address: Pierre.Luo@hotmail.com
 Date of Accident: 14/6/24 Time of Accident: 18:40
 Place of Accident: Bedok North
 Insurance Company: # EA Insurance

(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:

Add in police report.



Policyholder / Driver's Signature
Date:

Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:
Date:

EQ Insurance Company Limited
77 Robinson Road #12-01 Robinson 77, Singapore 068896
tel (65) 6223 9433 | www.eqinsurance.com.sg
reg no. 1978-00490-N



CERTIFICATE OF INSURANCE

ROAD TRANSPORT ACT 1987 (MALAYSIA)

THE MOTOR VEHICLES (THIRD-PARTY RISKS) RULES 1959 (FEDERATION OF MALAYSIA)

THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) ACT (CAP.189 OF THE REVISED EDITION)
(REPUBLIC OF SINGAPORE)

THE MOTOR VEHICLES (THIRD-PARTY RISKS AND COMPENSATION) RULES 1996 EDITION (REPUBLIC OF SINGAPORE)
OR ANY AMENDMENT, ACT OR ACTS PASSED IN SUBSTITUTION THEREOF

PRIVATE CAR Comprehensive Classic

Certificate No. : DMPPHQ23-011605

1. Index Mark and Registration Number of Vehicles
SKX8391L

2. Name of Policyholder
OIE ZHEN WEN

3. Effective Date of the Commencement of Insurance for the purpose of the Act
29/12/2023

4. Date of Expiry of Insurance
28/12/2024

5. Person or Classes of persons entitled to drive*

- (a) The Policyholder
- (b) Any other person who is driving on the Policyholder's order or with his permission.

* Provided that the person driving is permitted in accordance with the licensing or other laws or regulation to drive the Motor Vehicle or has been permitted and is not disqualified by order of Court of Law or by reason of any enactment or regulation in that behalf from driving the Motor Vehicle. And provided further that the Motor Vehicle is registered under the Road Traffic Act has not been cancelled at the time of accident loss or damage.

6. Limitation as to use*

Use for social, domestic and pleasure purposes and for the Policyholder's business.

The policy does not cover:


- (a) use for hire or reward
- (b) use for racing, pace-making, reliability trials or 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.

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) or and Amendment, Act or Acts passed in substitution thereof.


Hire Purchase : Hong Leong Finance Ltd

A000211/MDivine Insurance Agency
Date of Issue : 20/12/2023 15:26


Authorised Signatory
EQ Insurance Company Limited

Note

Young, Elderly &/or Inexperience Driver (YEIDR) refers to any person authorized to drive who is below 26 years old or above 70 years old and/or the holder of a qualified driving licence of less than 2 years duration.

 A Member of Citystate