

## 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 .....	24/12/2024 14:50 (SGT)
Reported by .....	Both Policyholder and Actual Driver
Date of Accident .....	24/12/2024 11:20 (SGT)
Exact Location of Accident .....	Singapore
Additional Location Information .....	MARINA GARDENS DRIVE
Country/State of Loss .....	Singapore

### DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SKA3511L
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#### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	LEO CHEN RYUNG
NRIC No .....	S7735730J
Email Address .....	CHENRYUNGLEO@HOTMAIL.COM
Mobile Phone No .....	(Phone) +65-93699126
Alternative Phone No .....	-

#### VEHICLE PARTICULARS

Manufacturer .....	Porsche
Model .....	911
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 .....	3600
Vehicle Fuel .....	-
First Registration Date .....	22/02/2011
Chassis no .....	WP0ZZZ99ZAS700139
Effective Date/Time of Ownership .....	-

#### INSURANCE COMPANY

Name of Insurance Company .....	EQ Insurance Company Ltd
Policy Number / Cover Note Number .....	DMPPHQ24-001461

#### DRIVER

Name of Driver .....	LEO CHEN RYUNG
NRIC No .....	S7735730J
Date Of Birth .....	10/12/1977
Occupation .....	Indoor
Driving Pass Date .....	05/08/1997
Driving License Pass Class .....	3
Driving License Validity .....	Valid
Driving experience .....	27 YEARS AND 4 MONTHS
Gender .....	Male
Mobile Number .....	(Phone) +65-93699126
Alt. Phone Number .....	-
Email Address .....	CHENRYUNGLEO@HOTMAIL.COM
Address .....	8 GREENWOOD LANE
Address complement .....	-
Postcode .....	286999
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 .....	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? .....	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 .....	Marina Bay Neighbourhood Police Centre
Police Station Phone No .....	(Phone) +65-18002229999
Alt. Police Station Phone No .....	(Fax) +65-64359276
Police Station Address .....	No 70 Marina View Singapore 018962
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

AS PER POLICE REPORT NO.: T/20241224/2027

#### 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 .....	SGH6194J
Vehicle Manufacturer .....	Toyota
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	-
Vehicle Category .....	Private car
Name of Driver .....	MUHAMMAD NUR IMAN WEE BIN MUHAMMAD RAHMAN WEE
NRIC No .....	S9346624A
Contact Number .....	-
Address .....	314 BUKIT BATOK STREET 32
Address complement .....	#04-59
Postcode .....	650314
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	3

SKETCH PLAN

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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/small 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.

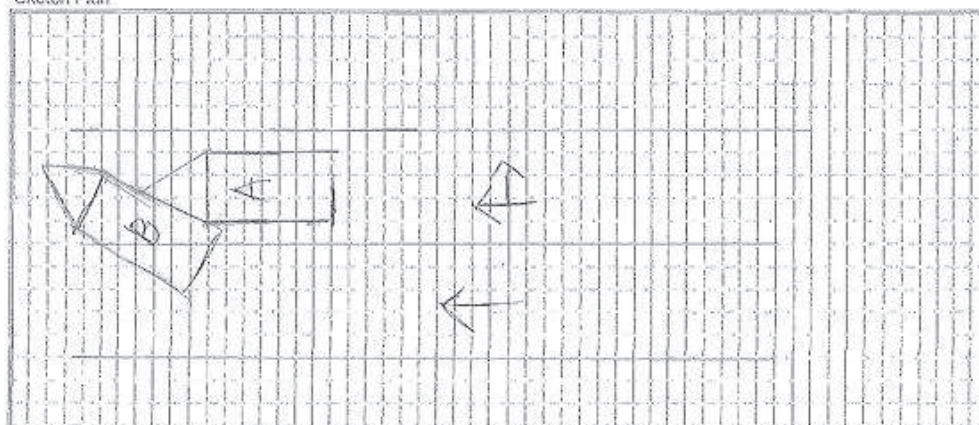
Shirley Lee Yen Nee  
Claims Advisor  
8686 5183

Policyholder's Signature / Date & Time

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

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

Sketch Plan



A: SKA3511L  
B: SGH6194J

Describe Circumstances of the Accident

A's per police report T/20241224/2027.

**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  
(Name as in NRIC/ID card)

Shirley Lee Yea Hui  
Claims Advisor  
8080 5188





**SINGAPORE  
POLICE FORCE**



T/20241224/2035

1 of 3

Police Station Of Origin:  
Marina Bay N.P.C  
70 Marina View SINGAPORE 018962  
Tel No: 1800-2229999

Report No. T/20241224/2035

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 24/12/2024 13:03	Vide Report No.: T/20241224/2027	Station Diary No.: 58
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**Informant's Particulars**

Name of Informant: LEO CHEN RYUNG	Address: 8 GREENWOOD LANE SINGAPORE 286999
ID Type / ID No.: NRIC NO / S7735730J	Contact No.: Home/Office: Mobile: 93699126
Nationality: SINGAPORE CITIZEN	Email:
Sex: Male	Age: 47
Date of Birth: 10/12/1977	Type of Informant: Driver
Race: Chinese	Language:
Occupation: Company director	Driving Licence Information: Class: 3 Date of Expiry:

**General Information of the Accident**

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 24/12/2024 11:20	Type of Location: T-Junction
Location:  MARINA GDNS DR				
Weather: Clear		Road Surface: Dry		
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		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	Conditio	No of Passenger
SGH6194J	Motor car	TOYOTA	VIOS	Gold	Seriously Damaged	2
SKA3511L	Motor car	PORSCHE	Carrera	Blue	Seriously Damaged	0

**Details of Vehicle Insurance**

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SGH6194J	SOMPO INSURANCE SINGAPORE PTE. LTD.	11459641		



**SINGAPORE  
POLICE FORCE**



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Police Station Of Origin:  
Marina Bay N.P.C  
70 Marina View SINGAPORE 018962  
Tel No: 1800-2229999

Report No. T/20241224/2035

**CONTINUATION OF REPORT**

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKA3511L	EQ INSURANCE COMPANY LTD.	DMPPHQ24-001461	22/02/2024	21/02/2025

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LEO CHEN RYUNG		ID No. S7735730J
Related Vehicle	NIL		Contact No. 93699126
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 the above-mentioned date and time, I was driving my Porsche 911 (SKA3511L) on the second lane from the right at Central Boulevard and was approaching the junction between Marina Gardens Drive and Central Boulevard. The second lane allows cars to turn right or go straight. I intended to go straight.

When I was crossing the junction, a gold coloured Toyota Vios (SGH6194J) swerved suddenly and violently from the third lane into my lane in an attempt to make an illegal right turn into Marina Gardens Drive.

I slammed the brakes and my car horn as hard as I could but his reckless driving made it impossible for me to avoid him and I collided into the right rear door of his car.

We stopped and exchanged particulars. The driver's wife and child were also in the car at the time of the accident. There were no injuries sustained, and police did not attend to our accident.

We met again at Marina Bay Neighbourhood Police Centre and the police verified verbally that none of the passengers suffered any injuries nor did they require any medical attention.

I wish to lodge this report for insurance purposes.



SINGAPORE  
POLICE FORCE



T/20241224/2035

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Report No. T/20241224/2035

Police Station Of Origin:  
Marina Bay N.P.C  
70 Marina View SINGAPORE 018962  
Tel No: 1800-2229999

CONTINUATION OF REPORT

Signature of Officer Recording The  
A /  
SGT 2 NORILHAM BIN  
MOHAMAD BAKHED

Signature Of Informant:

Signature Of Interpreter:  
Not applicable

Date/Time:  
24/12/2024 13:03

Officer In Charge Of Case:  
TP / GIA /  
SR STAFF SGT LEE GUANG HUI  
Contact No.: 65476414

Classification Of Case:

NP168