

# 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 .....	26/12/2024 14:10 (SGT)
Reported by .....	Both Policyholder and Actual Driver
Date of Accident .....	24/12/2024 16:00 (SGT)
Exact Location of Accident .....	Tomlinson Rd, Singapore
Additional Location Information .....	TOMLINSON ROAD TRAFFIC JUNCTION TURN TO TANGLIN ROAD
Country/State of Loss .....	Singapore

## DETAILS OF OWN VEHICLE

Vehicle Registration Number .....	SDW68L
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### INSURED/POLICYHOLDER

Is company? .....	No
Name Of Registered Owner .....	GOH KAH GIN
NRIC No .....	SXXXX592C
Email Address .....	JESLYN.999@GMAIL.COM
Mobile Phone No .....	(Phone) +65-97777977
Alternative Phone No .....	-

### VEHICLE PARTICULARS

Manufacturer .....	Audi
Model .....	A5
Variation .....	SPORTBACK 2.0 TFS
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 .....	1984
Vehicle Fuel .....	-
First Registration Date .....	-
Chassis no .....	-
Effective Date/Time of Ownership .....	-

### INSURANCE COMPANY

Name of Insurance Company .....	EQ Insurance Company Ltd
Policy Number / Cover Note Number .....	DMPPHQ24-010327

### DRIVER

Name of Driver .....	GOH KAH GIN
NRIC No .....	SXXXX592C
Date Of Birth .....	05/04/1972
Occupation .....	Indoor
Driving Pass Date .....	16/03/2001
Driving License Pass Class .....	3
Driving License Validity .....	Valid
Driving experience .....	23 YEARS AND 9 MONTHS
Gender .....	Female
Mobile Number .....	(Phone) +65-97777977
Alt. Phone Number .....	-
Email Address .....	JESLYN.999@GMAIL.COM
Address .....	35 AMBER GARDENS
Address complement .....	#11-11 THE ESTA
Postcode .....	439966
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) .....	2
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 .....	LIM ENG HOCK
Gender .....	Male

#### DETAILS OF POLICE ACTION

Was the accident reported to the police? .....	No
Was notice of intended Prosecution given? .....	No
If yes, against whom? .....	-

#### CIRCUMSTANCES OF ACCIDENT

ON 24 DEC 2024 AT 1600 HRS, I STOPPED ON RED LIGHT AT THE TRAFFIC JUNCTION OF TOMLINSON ROAD ON MY OWN SECOND LANE (RIGHT) IN A FOUR LANE JUNCTION LEADING TO TURN TO MAIN ROAD WHICH IS TANGLIN ROAD TOWARDS ORCHARD ROAD.

UPON TRAFFIC LIGHT TO GREEN, I SLOWLY TURNED RIGHT STAYING IN MY OWN LANE. VEHICLE EF45E A GREY MERCEDES SUV ACCELERATED ON HER TURNING AND CUT ABRUPYLY INTO MY LANE HITTING MY AUDI A5 SPORTSBACK AT THE LEFT FRONT SIDE OF THE VEHICLE WITH HER RIGHT REAR SIDE OF THE VEHICLE AND REAR RIGHT WHEELS / RIMS. I SOUNDED THE HORN BUT SHE STILL ACCELERATED AND CUT IN, UNTIL SHE HIT MY VEHICLE THEN SWERVE.

ATTACHED VIDEO CLEARLY SHOWED SHE CUT INTO MY LANE. THERE IS NO WAY I CAN AVOID HER AS MY RIGHT LANE HAS VEHICLE TURNING TOO AND REAR FOLLOWING CARS.

MY FRONT PASSENGER WITNESS IT TOO.

THE DRIVER OF GREY SUV MERCEDES EF45E IS AELA LIM IC T0012055Z.

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 .....	EF45E
Vehicle Manufacturer .....	Mercedes
Vehicle Model .....	-
Vehicle Variant .....	-
Vehicle Colour .....	Gray
Vehicle Category .....	Private car
Name of Driver .....	AELA LIM
NRIC No .....	TXXXX055Z
Contact Number .....	(Phone) +65-82299055
Address .....	-
Address complement .....	-
Postcode .....	-
Insurance Company Name .....	-
Nature Of Damage .....	-
Details of property damaged in accident .....	-
No. Of Passenger (Including Driver) .....	-

**SKETCH PLAN**

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5. **Any false reporting may be referred to the Police for investigation.**
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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 :

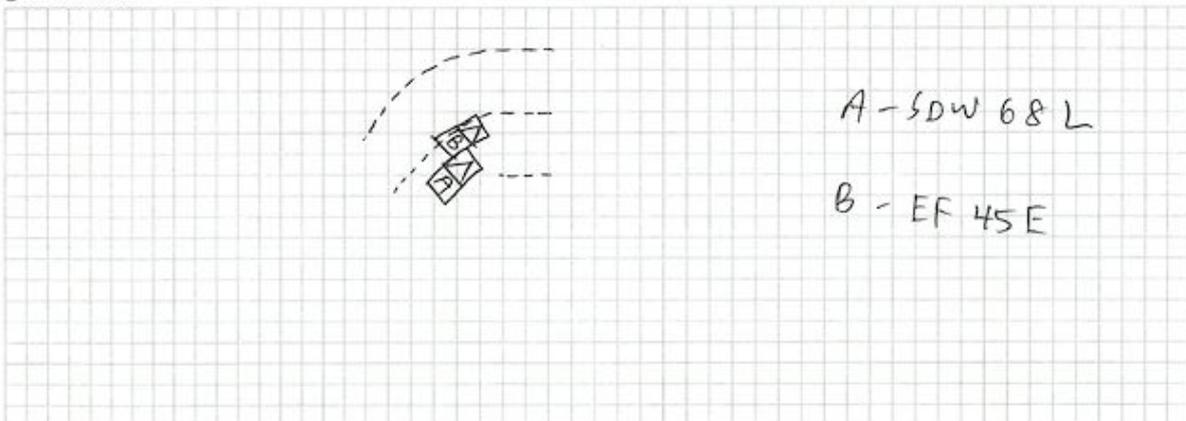
- (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) investigating the accident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (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.

*[Handwritten Signature]*  
 Policyholder's Signature / Date & Time  
 26/12/24  
 9.20am.

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

*[Circular Stamp: PREMIER POLICY CENTRE LTD]*  
 Witnessed by Reporting Centre Personnel

**Sketch Plan**





**Describe Circumstances of the Accident**

On 24 Dec 2024 at 1600 hrs, I stopped on ~~Red~~ Red Light at the traffic junction of Tomlinson Road on my own second lane (right) in a four lane junction leading to turn to main road which is Tanglin Road towards Orchard Road.

Upon traffic light to green, I slowly turned right staying in my own lane. Vehicle EF45E a grey Mercedes SUV accelerated on her turning and cut abruptly into my lane hitting my Audi A5 Sportsback at the left front side of the vehicle with her right rear side of the vehicle and rear right wheels/rims. I sounded the horn but she still accelerated and cut in, until she hit my vehicle then swerve.

Attached video clearly showed she cut into my lane. There is no way I can avoid her as my right lane has vehicle turning too and rear following cars.

My front passenger witness it too.

The driver of grey SUV Mercedes EF45E is AELA LIM IC TO012055Z.

**Declaration**

We declare the foregoing particulars are true in every respect.

 26/12/24  
 Policyholder's Signature / Date & Time  
 9.30am

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

  
 Witnessed by Reporting Centre Personnel













































