

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	01/07/2024 15:59 (SGT)
Reported by	Both Policyholder and Actual Driver
Date of Accident	01/07/2024 09:20 (SGT)
Exact Location of Accident	KJE, Singapore
Additional Location Information	TWDS PIE BEFORE PIE (CHANGI) EXIT
Country/State of Loss	Singapore

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLJ4685C
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INSURED/POLICYHOLDER

Is company?	No
Name Of Registered Owner	GOH MIN HUI ANGELINE
NRIC No	S7729008G
Email Address	PAT_LOW52@HOTMAIL.COM
Mobile Phone No	(Phone) +65-97959578
Alternative Phone No	-

VEHICLE PARTICULARS

Manufacturer	Audi
Model	Q5
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	2000

INSURANCE COMPANY

Name of Insurance Company	ECICS Limited
Policy Number / Cover Note Number	MPC24B00032800

DRIVER

Name of Driver	LOW CHIN SOON (LIU JINSHUN)
NRIC No	S7407013B
Date Of Birth	07/03/1974
Occupation	Indoor

Driving Pass Date	24/08/2000
Driving experience	23 YEARS AND 11 MONTHS
Gender	Male
Mobile Number	(Phone) +65-81189878
Alt. Phone Number	-
Email Address	PAT_LOW52@HOTMAIL.COM
Address	BLK 498G TAMPINES STREET 45 #10-438
Address complement	-
Postcode	525498
Is the driver the policyholder?	No
If No, Relationship of the Driver with the Insured	Spouse
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	5
Was anybody injured in the Accident?	Yes
Was any injured conveyed to hospital by ambulance?	Yes
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/20240701/7033.

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	PA898G
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	VEHICLE B
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	XD9618D
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	VEHICLE C
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	YQ5863H
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	VEHICLE D
No. Of Passenger (Including Driver)	-

DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number	GBE5147C
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	VEHICLE E
No. Of Passenger (Including Driver)	-

INJURED PERSONS DETAILS

INJURED 1

Name of injured person	LOW CHIN SOON (LIU JINSHUN)
Gender	Male
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	SLJ4685C
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	No

INJURED 2

Name of injured person	UNKNOWN
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	PA898G
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	Yes

INJURED 3

Name of injured person	UNKNOWN
Gender	-
Phone No	-
Address	-
Address Complement	-
Post Code	-
Approximate Age Years Old	-
Injuries Sustained	-
Injured person in which vehicle?	PA898G
Were seat belts worn?	Yes
Was this injured conveyed to hospital by ambulance?	Yes

IMPORTANT NOTICE

- Angelika

Wm.

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

A = 814685C
B = PA9899
C = XD9618D
D = YQ5863H
E = GBE5147C

KIE towards PIE
(Before PIE (Changji) exit)

Describe Circumstance of the Accident

Refer to Police Report

T/20240701/9083

Declaration

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

Angeline

Policyholder's Signature / Date & Time

hw

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/20240701/7033

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

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Report No: T/20240701/7033

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 01/07/2024 12:29	Vide Report No.: J/20240701/0051	Station Diary No.:
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Informant's Particulars

Name of Informant: LOW CHIN SOON			Address: 498G TAMPINES STREET 45 #10-438 SINGAPORE 525498		
ID Type / ID No.: NRIC NO / S7407013B			Contact No.: Home/Office: Mobile: 81189878		
Nationality: SINGAPORE CITIZEN			Email: pat_low52@hotmail.com		
Sex: Male	Age: 50	Date of Birth: 07/03/1974	Type of Informant: Driver		
Race: Chinese			Language: English		
Occupation: BUILDING MATERIAL SUPPLIER			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 01/07/2024 09:20	Type of Location: Straight Road
Location: CORPORATION ROAD				
Weather: Clear		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: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBE5147C	Lorry	NISSAN		Blue		2
PA898G	Bus/Coach/Mini bus			Orange	Seriously Damaged	15
SLJ4685C	Motor car	AUDI			Seriously Damaged	0
XD9618D	TRAILER				Seriously Damaged	0
YQ5863H	Lorry	TOYOTA	DYNA	Silver		0



**SINGAPORE
POLICE FORCE**



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Report No. T/20240701/7033

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

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	MOHAMAD SAHLAN BIN MOHAMAD SAM	ID No.	S9008944G
Related Vehicle	PA898G (Bus/Coach/Minibus)	Contact No.	NIL
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)	NIL	Degree of Injury	NIL
Driver			
Name	LOW CHIN SOON	ID No.	S7407013B
Related Vehicle	SLJ4685C (Motor car)	Contact No.	81189878
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	01/07/2024	Date Discharge	01/07/2024
No. of Days granted Medical Leave (MC)	03	Degree of Injury	Slight

Brief Details.

On 01 July 2024 (Mon) at about 9.20am, I was driving straight on lane 3 along KJE towards PIE before PIE (Changi) exit. Traffic was moving slow, Lorry in front of me slowed down and brake stopped. I also slowed down and stopped without hitting the lorry in front.

Suddenly, I felt a huge impact from behind and the impact was so great that it pushed my vehicle to hit the front lorry. I came down from my vehicle and saw that it was one bus bearing registration number plate: PA 898G that had hit onto my rear portion causing damages to my front and rear portions.

LTA traffic marshal, EMAS and traffic police arrived on scene. Two people from the bus were conveyed to hospital.

We were told to lodge traffic accident report by the traffic police. I felt pain on my body and will be seeking for medical attention.

My vehicle: SLJ 4685C
Bus: PA 898G
Trailer: XD 9618D
Lorry in front of me: YQ 5863H
1st Lorry: GBE 5147C



SINGAPORE
POLICE FORCE

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



T/20240701/7033

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Report No. T/20240701/7033

CONTINUATION OF REPORT

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:

NP168

Signature Of Informant:
The identity of the person making this report has been
authenticated by Singpass. No signature is required.

Date/Time:
01/07/2024 12:29

Classification Of Case: