

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 Authorised 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 ability.
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 Report	10/02/2018 12:22
Date Of Accident	09/02/2018 16:15
Exact Location Of Accident	BEDOK NORTH AVE 3
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJT1163H
Insured/Policyholder	
Name Of Registered Owner	EE DEANNA
NRIC No	S0188312G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96388257
Alternative Phone No	OTHERS-96388257

Vehicle Particulars

Manufacturer	KIA
Model	CERATO FORTE 1.6 AT SX ABS D/AB 2WD 4DR
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
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5093534069 CLASSIC
Cover Note Number	

Driver

Name of Driver	WONG FREDDY
NRIC No	S1045701G
Date Of Birth	27/11/1936
Occupation	INDOOR
Date Of Driving Pass	02/12/1969
Driving Experience	48 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96797901
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	18 JALAN GRISEK
Postcode	419454
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	
Was any body injured in the Accident?	NO
Was any injured conveyed to hospital by ambulance?	NO
Was any other material or property damaged?	YES
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BEDOK SOUTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 20 CHAI CHEE DRIVE , POSTCODE: 469045 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2448999 - FAX NO: 62446558
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT ATTACHED

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	YP6485P
Vehicle Make/Model/Colour	MITSUBISHI CANTER FEB21ER4SDEB (CBU)
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	KALYANA SUNDARAM SIVA KUMAR
NRIC/Passport Number	F8427064N
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

SKETCH PLAN

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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.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
 - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
 - (ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature
Date & Time:

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

10 FEB 2018

IDAC KAKI BUKIT (VAC)
23 Kaki Bukit Ave 4
Singapore 415933
Tel: 67416697 Fax: 67492305
Email: accident@idac.com.sg
Name:
NRIC/FIN No.:

SKETCH PLAN

See
Attached
(SJT 1163H)

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to
police.

DECLARATION

I/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:

GARMC SketchPlanForm V3

10 FEB 2018

IDAC KAKI BUKIT (VAC)

23 Kaki Bukit Ave 4

Singapore 415933

Tel: 67416697 Fax: 67492305

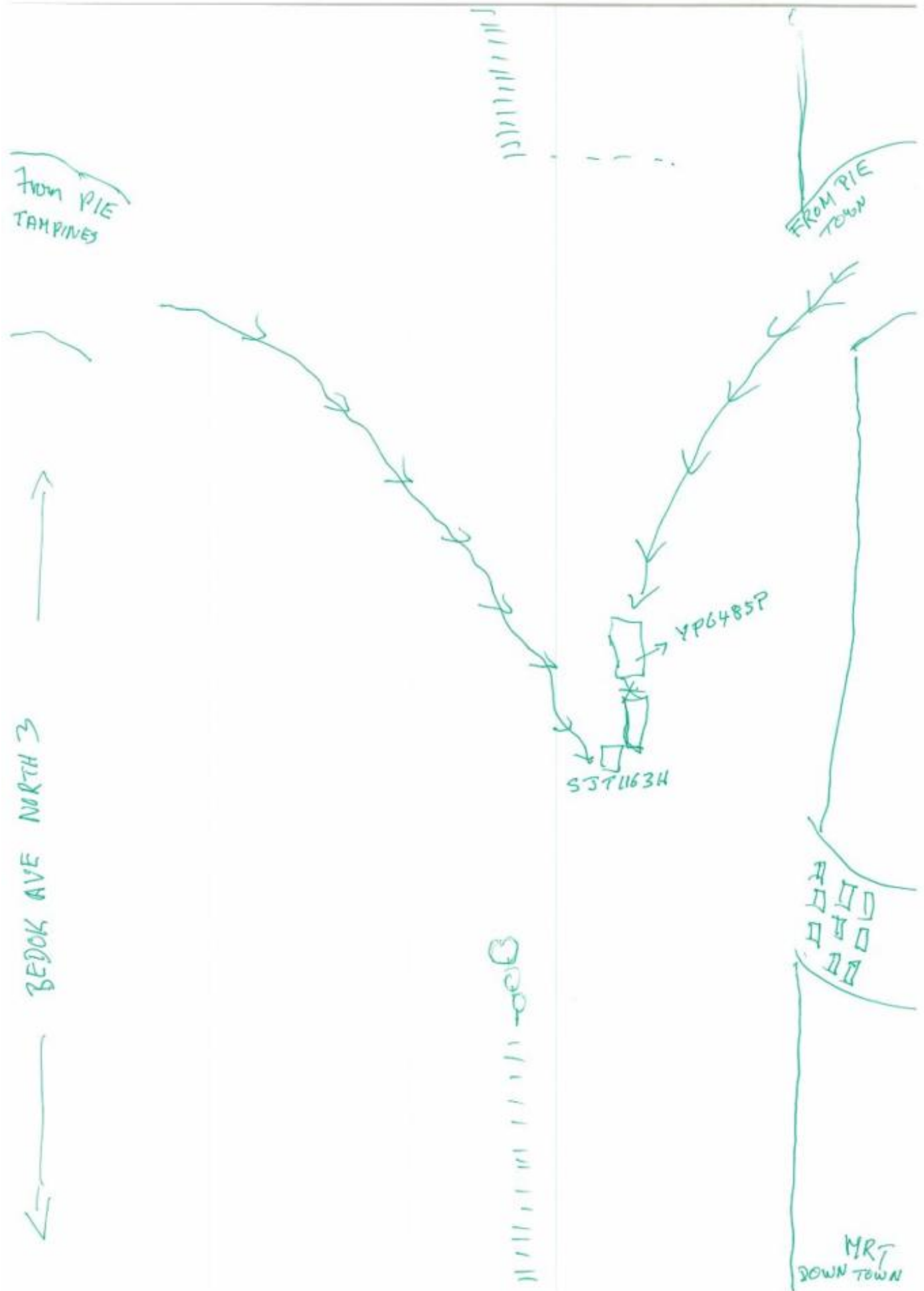
Email: vackb@singnet.com.sg

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Individual Statement



Individual Statement



**SINGAPORE
POLICE FORCE**



T/20180209/2189

Police Station Of Origin:
Bedok South N.P.C
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

1 of 4

Report No. T/20180209/2189

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 09/02/2018 21:31		Vide Report No.:		Station Diary No.: 50	
Informant's Particulars					
Name of Informant: WONG FREDDY			Address: 18 JALAN GRISEK SINGAPORE 419454		
ID Type / ID No.: NRIC NO / S1045701G			Contact No.: Home/Office: Mobile: 96797901		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 81	Date of Birth: 27/11/1936	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: RETIREE			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 09/02/2018 16:15	Type of Location: Straight Road
Location: Along Road 1 BEDOK NORTH AVENUE 3				
From PIE along Bedok North Ave 3, heading towards Bedok Reservoir Road.				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJT1163H	Car				No Damage	1
YP6485P						0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

Individual Statement



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2 of 4

Report No. T/20180209/2189

CONTINUATION OF REPORT

Driver				
Name	WONG FREDDY		ID No.	S1045701G
Related Vehicle	SJT1163H (Car)		Contact No.	96797901
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL		Date Discharge	NIL
No. of Days granted Medical Leave	NIL		Degree of Injury	NIL
Driver				
Name	KALYANA SUNDARAM SIVA KUMAR		ID No.	F8427064N
Related Vehicle	YP6485P		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	NIL		Degree of Injury	NIL

Brief Details.

On the 09/02/2018 at around 1615hrs, I was driving my car, a Silver in colour Kia along Bedok North Ave 3 heading towards Bedok Reservoir Rd. At that time, I just exited PIE from Tampines direction.

While driving, at the traffic light junction near to the Bedok Reservoir MRT station, the traffic light turned red and I slowed down and drive to a stationary. I was the first vehicle to formed up at my lane.

Suddenly, while stationary and waiting for the traffic light to turned green, I heard a loud sound which sounds like a collision. I looked left and spotted 2 vehicles, V1 (a foreign lorry) and V2 (A Singapore lorry bearing plate number YP6485P) which are at the lane beside mine had a collision. V2 collided headfirst to the rear of V1 which results in V1 grazed the rear left side mudguard of my vehicle.

From my observation, there are dents to the front part of V2 and there are no damages to V1. Subsequently, I proceed forward near the Bedok Reservoir MRT with their permission and the driver of V2 exchanged particulars with me. I managed to get his boss number (Low, 90088870). I observed that the driver of V2 was not injured.

Due to the grazing of V1 to my vehicle, there are some black in colour tyre marks at the left, rear mudguard.

I wish to state that I did not have any in-car cameras in my car.

Individual Statement



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POLICE FORCE**



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3 of 4

Report No. T/20180209/2189

CONTINUATION OF REPORT



Individual Statement



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POLICE FORCE**



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4 of 4

Report No. T/20180209/2189

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:
G /
Sgt 2 MUHAMMAD NUR ISKANDAR BIN MUHD
NUR GHAZALI LIM

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / AEIT /
Staff Sgt WONG SIEU LUI
Contact No.: 65476151

Authorised Officer
NP168



Signature Of Informant:

Date/Time:
09/02/2018 21:31

Classification Of Case:

Staff Sgt Wong Sieu Lui
654 76151

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

