

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	04/04/2018 17:26
Date Of Accident	03/04/2018 21:35
Exact Location Of Accident	PIE (CHANGI) BEFORE EUNOS LINK EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLV1688B
Insured/Policyholder	
Name Of Registered Owner	SIM QI REN
NRIC No	S8821428E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90618091
Alternative Phone No	OFFICE-90618091

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	SLK 200
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
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	7VPCP1750570
Cover Note Number	

Driver

Name of Driver	SIM QI REN (SHEN QIREN)
NRIC No	S8821428E
Date Of Birth	16/06/1988
Occupation	INDOOR
Date Of Driving Pass	05/10/2007
Driving Experience	10 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90618091
Fax Number	
Contact Number	OFFICE-90618091
Email Address	NOEMAIL

Address	BLK 605 ELIAS ROAD #12-198
Postcode	510605
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

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 this accident?	NO
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	YES
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	CHANGI NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 9 SIMEI STREET 2 , POSTCODE: 529914 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5872999 - FAX NO: 65872900
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20180404/2006.

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	SHB9527H
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	FONG FOOK KEE
NRIC/Passport Number	S1304922Z
Contact Number	82841485
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

3

DETAILS OF INJURED PERSON 1

Name	SIM QI REN (SHEN QIREN)
Approximate Age	
Injuries Sustain	NECK & BACK
Injured person in which vehicle?	SLV1688B
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Accident Sketch Plan


SKETCH PLAN

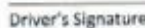
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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

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.
- (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:


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

Accident Sketch Plan

SKETCH PLAN

SKETCH PLAN

PECHANGI

A = SLV1688B

B = SHB9527H

A

B

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report - T/2018 04 04/2008.

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:

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

Police Report



**SINGAPORE
POLICE FORCE**



T/20180404/2006

1 of 3

Police Station Of Origin:
Changi N.P.C
9 Simei Street 2 SINGAPORE 529914
Tel No: 1800-5872999

Report No. T/20180404/2006

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/04/2018 02:49		Vide Report No.:		Station Diary No.: 16	
Informant's Particulars					
Name of Informant: SIM QI REN			Address: APT BLK 605 ELIAS ROAD #12-198 SINGAPORE 510605		
ID Type / ID No.: NRIC NO / S8821428E			Contact No.: Home/Office:		Mobile: 90618091
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 29	Date of Birth: 16/06/1988	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: SELF EMPLOYED			Driving Licence Information: Class: 2B,2A,2,3,4		Date of Expiry:

General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 03/04/2018 21:35	Type of Location: Straight Road
Location: Along Road 1 PAN ISLAND EXPRESSWAY				
Towards Changi airport before exit 9 jalan eunos, eunos link				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
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	Condition	No of Passenger
SHB9527H	TAXI					2
SLV1688B	Car	MERCEDES BENZ	SLK 200	Red	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLV1688B	MSIG INSURANCE (SINGAPORE) PTE. LTD.	7VPCP1750570	17/10/2017	16/10/2018

Police Report



**SINGAPORE
POLICE FORCE**



T/20180404/2006

2 of 3

Police Station Of Origin:
Changi N.P.C.
9 Simei Street 2 SINGAPORE 529914
Tel No: 1800-5872999

Report No. T/20180404/2006

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	FONG FOOK KEE	ID No.	S1304922Z
Related Vehicle	SHB9527H (TAXI)	Contact No.	82841485
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
Driver			
Name	SIM QI REN	ID No.	S8821428E
Related Vehicle	SLV1688B (Car)	Contact No.	90618091
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3,4 Date of Expiry: NIL
Date Treatment	04/04/2018	Date Discharge	04/04/2018
No. of Days granted Medical Leave	02	Degree of Injury	Slight

Brief Details.

On 03/04/2018 at about 2134hrs, I driving my car along PIE towards Changi Airport. I was driving on the extreme right lane and going straight. As I was going straight, one car (SLM 9020Y) in front of me hit on to his brake. Upon seeing the brake light, I immediately stepped on my brake and out of sudden I felt an impact from the rear of my car. I then came out and saw one taxi (SHB 9527H) hit onto the rear of my car. We both then exchanged our particulars and took picture of the damages and left the location. My car did not come in contact with the car in front of me.

I wish to state that due to the impact I sustained pain on my neck and upper back. I then went to seek medical treatment at Changi General Hospital and was given 02 days of MC.

Police Report



**SINGAPORE
POLICE FORCE**



T/20180404/2006

3 of 3

Police Station Of Origin:
Changi N.P.C
9 Simei Street 2 SINGAPORE 529914
Tel No: 1800-5872999

Report No. T/20180404/2006

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 1 SATHIYSH S/O THILLAIVENDHAN

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

04/04/2018 02:49

Officer In Charge Of Case:

TP / GIA /

Staff Sgt TANG SIEW PING

Contact No.: 65476430

Classification Of Case:

Authentication Stamp

NP165

SIGNATURE

10 Sin Ming Drive Singapore 575701
Tel: 1800-CALL LTA (1800-2255 582) Fax: (65) 6553 5329

29 Nov 2017

Our ref 2911170203N057010830

SIM QI REN (SHEN QIREN)
APT BLK 605 ELIAS ROAD
#12-198
SINGAPORE 510605

Dear Sir/Madam

NOTIFICATION ON SUCCESSFUL REPLACEMENT OF VEHICLE REGISTRATION NO. SKC6170G WITH VEHICLE REGISTRATION NO. SLV1688B

You may be pleased to know that your application of 29 Nov 2017 for replacement of registration number is approved.

2. The details of the vehicle after the transaction are as follows:

Vehicle Registration No. : SLV1688B (Previously SKC6170G)
Vehicle Make : MERCEDES BENZ
Vehicle Model : SLK 200
Chassis No. : WDD1724482F016443
Engine No./ Motor No. : 27186130294324 / -

3. Please change the number plates on your existing vehicle (ie. Chassis No. : WDD1724482F016443, Engine No./ Motor No. : 27186130294324 / -) to display the new/ replacement registration number, SLV1688B by 02 Dec 2017. It is an offence to keep or use a vehicle without displaying the correct vehicle registration number assigned. The penalty for first offence is a fine not more than \$1,000 or imprisonment of not more than 3 months. For second or subsequent offence, the fine is not more than \$2,000 or imprisonment of not more than 6 months.

4. Please contact our customer service officers on tel: 1800-CALL LTA (1800-2255 582) if you have any questions. You can either quote the Business Transaction Reference No. 20171129142842461409 or the vehicle registration number when making your enquiry.

10 Sin Ming Drive Singapore 575701
Tel: 1800-CALL LTA (1800-2255 582) Fax: (65) 6553 5329

Our ref 2911170203N057010830

29 Nov 2017

SIM QI REN (SHEN QIREN)
APT BLK 605 ELIAS ROAD
#12-198
SINGAPORE 510605

003263




Dear Sir/Madam

**NOTIFICATION ON SUCCESSFUL REPLACEMENT OF VEHICLE REGISTRATION NO.
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Yours sincerely

NG LAY CHOO (MS)
DEPUTY DIRECTOR, VRL SERVICE OPERATIONS
VEHICLE SERVICES GROUP
LAND TRANSPORT AUTHORITY

(This is a computer-generated notice that requires no signature.)

From 15 February 2017, you do not need to display road tax disc on the windscreen of your vehicle. LTA has stopped issuing physical road tax discs as part of our efforts to streamline our processes. Please ensure that your original motor insurance certificate is readily available in your vehicle at all times. If you are driving into Malaysia, you are advised to carry printed proof of the validity of your road tax in your vehicle.

Accident Photo



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