

## 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             | 20/04/2018 11:23       |
| Date Of Accident           | 19/04/2018 13:25       |
| Exact Location Of Accident | MARSILING MALL CARPARK |
| Country/State of Loss      | SINGAPORE              |

### DETAILS OF OWN VEHICLE

|                             |                      |
|-----------------------------|----------------------|
| Vehicle Registration Number | SJF8386J             |
| <b>Insured/Policyholder</b> |                      |
| Name Of Registered Owner    | LIM CHOON ENG        |
| NRIC No                     | S0017833J            |
| Email Address               | NOEMAIL              |
| Mobile Phone No             | (LOCAL) +65-87167073 |
| Alternative Phone No        | OFFICE-87167073      |

### Vehicle Particulars

|  |              |
|--|--------------|
| Manufacturer   | NISSAN       |
| Model  | LATIO 1.5L T |
| 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 | TOKIO MARINE INSURANCE SINGAPORE LTD |
| Type Of Coverage          | THIRD PARTY                          |
| Fleet Policy              | NO                                   |
| Policy Number             | MU011699                             |
| Cover Note Number         |                                      |

### Driver

|                      |                       |
|----------------------|-----------------------|
| Name of Driver       | LIM CHOON ENG         |
| NRIC No              | S0017833J             |
| Date Of Birth        | 05/04/1954            |
| Occupation           | INDOOR                |
| Date Of Driving Pass | 05/09/1977            |
| Driving Experience   | 40 YEARS AND 7 MONTHS |
| Gender               | MALE                  |
| Mobile Number        | (LOCAL) +65-87167073  |
| Fax Number           |                       |
| Contact Number       | OFFICE-87167073       |
| Email Address        | NOEMAIL               |

|   |  |
|---|--|
| Address   | BLK 152 WOODLANDS STREET 13<br>#11-177 |
| Postcode  | 730152                                 |
| 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   | 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   | 2                             |
| Was any body injured in the Accident?   | NO                            |
| Was any injured conveyed to hospital by ambulance?  |                               |
| 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)   | 4                             |
| Passenger 1   | NAME: : -<br>GENDER: : FEMALE |
| Passenger 2   | NAME: : -<br>GENDER: : FEMALE |
| Passenger 3   | NAME: : -<br>GENDER: : MALE   |

#### Details of Police Action

|   |   |
|---|---|
| Was the accident reported to the police?  | YES   |
| If Yes, Please state which Police Station |   |
| Police Station Name                       | WOODLANDS WEST NPC  |
| Police Station Address                    | <b>ROAD:</b> 9 MARSILING LANE , <b>POSTCODE:</b> 739146 , <b>COUNTRY:</b> SINGAPORE |
| Police Station Contact                    | <b>TEL NO:</b> - <b>FAX NO:</b>   |
| Was notice of intended Prosecution given? | NO  |
| If Yes, against whom?                     |   |

#### Circumstances of Accident

REFER TO POLICE REPORT - T/20180419/2096.

#### Attachment(s)

|   |                                   |
|---|-----------------------------------|
| Are accident photos available for attachment? | YES                               |
| Was there any video captured by Car Camera?   | YES                               |
| Remarks/ Reasons:                             | VIDEO FOOTAGE WITH TRAFFIC POLICE |
| Was there any audio recorded?                 | NO                                |

#### DETAILS OF OTHER VEHICLE PROPERTY 1

|                             |        |
|-----------------------------|--------|
| Vehicle Registration Number | QX720C |
| Vehicle Make/Model/Colour   |        |

Details Of Properties

Vehicle Category

GOVERNMENT

Name of Driver

NRIC/Passport Number

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

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## Accident Sketch Plan


### SKETCH PLAN

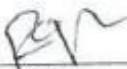
#### IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
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6. The 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 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.:

Marsilip  
c/part

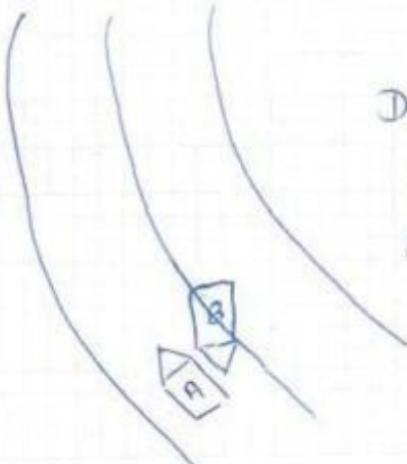


Diagram showing a curved path with two points labeled A and B. Point A is at the bottom of the curve, and Point B is at the top of the curve.

DOA: 19/4/18  
A: SJF 838 G  
B: QX 720 C

DOA : 19/4/18

A: SJF 838 (J)

B. QX 720C

Marsilop  
c/part

Refer to Police Report - T/20180419/296-

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

Run

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# Police Report



**SINGAPORE  
POLICE FORCE**



T/20180419/2096

Police Station Of Origin:  
Woodlands West N.P.C.  
9 Marsiling Lane SINGAPORE 739146  
Tel No: 1800-363 9999

1 of 3

Report No. T/20180419/2096

## REPORT OF A TRAFFIC ACCIDENT

|  |                                     |                          |
|--|-------------------------------------|--------------------------|
| Date/Time Report Made:<br>19/04/2018 16:23 | Vide Report No.:<br>J/20180419/0129 | Station Diary No.:<br>46 |
|--|-------------------------------------|--------------------------|

| Informant's Particulars                  |            |   |                              |
|--|------------|---|------------------------------|
| Name of Informant:<br>LIM CHOON ENG      |            | Address:<br>APT BLK 152 WOODLANDS STREET 13 #11-777<br>SINGAPORE 730152 |                              |
| ID Type / ID No.:<br>NRIC NO / S0017833J |            | Contact No.:<br>Home/Office: Mobile: 87167073                           |                              |
| Nationality:<br>SINGAPORE CITIZEN        |            | Email:  |                              |
| Sex:<br>Male                             | Age:<br>64 | Date of Birth:<br>05/04/1954  | Type of Informant:<br>Driver |
| Race:<br>Chinese                         |            | Language:<br>English  | Institution / School Name:   |
| Occupation:<br>Retiree                   |            | Driving Licence Information:<br>Class: 2B,3,4 Date of Expiry:           |                              |

## General Information of the Accident

|   |                                  |                                    |  |                                     |
|---|----------------------------------|------------------------------------|--|-------------------------------------|
| Type of Accident:                                       | Non-Injury<br>Attended by Police | Drink Drive:<br>No                 | Date/Time of Accident:<br>19/04/2018 13:20 | Type of Location:<br>Car Park       |
| Location:<br>Along Road 1<br>WOODLANDS STREET 12        |                                  |                                    |  |                                     |
| Carpark of Marsiling Mall                               |                                  |                                    |  |                                     |
| Weather:<br>Drizzling                                   |                                  | Road Surface:<br>Wet               |  | Road Speed Limit:                   |
| Traffic Flow:<br>Two Way                                |                                  | Traffic Control:<br>Not Controlled |  | Traffic Volume:<br>Moderate         |
| Type of Collision:<br>Between Moving Vehicles - Head On |                                  |                                    |  | Anyone conveyed by ambulance:<br>No |

## Details of Vehicle Involved

| Vehicle No. | Type           | Make   | Model             | Color | Condition           | No of Passenger |
|-------------|----------------|--------|-------------------|-------|---------------------|-----------------|
| QX720C      | Police Vehicle |        | Ford<br>Landrover |       |                     | 0               |
| SJF8386J    | Car            | NISSAN | LATIO 1.5L<br>T   | White | Slightly<br>Damaged | 4               |

## Details of Vehicle Insurance

| Vehicle No. | Insurance Company                        | Insurance No | Effective  | Expiry Date |
|-------------|--|--------------|------------|-------------|
| SJF8386J    | TOKIO MARINE INSURANCE<br>SINGAPORE LTD. | MU011699     | 02/11/2017 | 01/11/2018  |

# Police Report



**SINGAPORE  
POLICE FORCE**



T/20180419/2096

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Report No. T/20180419/2096

Police Station Of Origin:  
Woodlands West N.P.C.  
9 Marsiling Lane SINGAPORE 739146  
Tel No: 1800-363 9999

## CONTINUATION OF REPORT

|                                   |                         |  |                                      |
|-----------------------------------|-------------------------|--|--------------------------------------|
| <b>Details of Person Involved</b> |                         |  |                                      |
| Any Pedestrian Involved: No       |                         | Use of Pedestrian Crossing: NA         |                                      |
| No. of Pedestrians Injured: NIL   |                         |  |                                      |
| Driver Name                       | SHAHRI B ABDUL ZAMA     | ID No.                                 | NIL                                  |
| Related Vehicle                   | QX720C (Police Vehicle) | Contact No.                            | NIL                                  |
| Hospital/Clinic                   | NIL                     | Class of Driving Licence & Expiry Date | Class: NIL<br>Date of Expiry: NIL    |
| Date Treatment                    | NIL                     | Date Discharge                         | NIL                                  |
| No. of Days granted Medical Leave | NIL                     | Degree of Injury                       | NIL                                  |
| Driver Name                       | LIM CHOON ENG           | ID No.                                 | S0017833J                            |
| Related Vehicle                   | SJF8386J (Car)          | Contact No.                            | 87167073                             |
| Hospital/Clinic                   | NIL                     | Class of Driving Licence & Expiry Date | Class: 2B,3,4<br>Date of Expiry: NIL |
| Date Treatment                    | NIL                     | Date Discharge                         | NIL                                  |
| No. of Days granted Medical Leave | NIL                     | Degree of Injury                       | NIL                                  |

### Brief Details.

On 19/04/2018 at about 1323hrs, I was driving my car SJF8386J (White, Nissan Latio) travelling up the spiral ramp at the Marsiling Mall carpark when suddenly one police vehicle QX720C (Ford Everest/Land Rover) who was on the opposite direction going down the spiral ramp went into my lane and collided onto my car front right portion. There was a long scratch at my car door (from the front right side mirror to the rear). No one was injured at scene. No government property was damaged. I have inbuilt camera in my vehicle that captured the incident and I will provide the footage to the investigation officer. Police was at scene. Vide report J/20180419/0129. In charge case TP IO Azan.

# Police Report



**SINGAPORE  
POLICE FORCE**



T/20180419/2096

3 of 3

Police Station Of Origin:  
Woodlands West N.P.C.  
9 Marsiling Lane SINGAPORE 739146  
Tel No: 1800-363 9999

Report No. T/20180419/2096

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:<br>J /<br>Sgt 3 NUR NABILAH BINTE KHAMDAN             | Signature Of Informant:<br>    |
| Signature Of Interpreter:<br>Not applicable  | Date/Time:<br>19/04/2018 16:23 |
| Officer In Charge Of Case:<br>TP / GIT /<br>Staff Sgt MA JUNXIANG SN 127<br>Contact No: 65476251 | Classification Of Case:        |
| Authentication Stamp<br>NP168<br>  |                                |

Accident Photo



**Accident Photo**



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

