

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	07/05/2018 16:46
Date Of Accident	05/05/2018 13:30
Exact Location Of Accident	PIE TOWARDS THOMSON RD AFTER STEVENS RD EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGR866R
Insured/Policyholder	
Name Of Registered Owner	WINEBERRY PTE LTD
Co Reg No	199402421E
Email Address	MAY.SOO@WINEBERRY.COM.SG
Mobile Phone No	(LOCAL) +65-97657087
Alternative Phone No	OFFICE-94384458

Vehicle Particulars

Manufacturer	NISSAN
Model	QASHQAI 1.2 DIG-T CVT ABS 2WD 5DR
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?	YES
If No, Please state action to be taken	
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA283092
Cover Note Number	31/10/2017 - 30/10/2018

Driver

Name of Driver	LEOW ZHEN HUI, WESLEY
NRIC No	S9335381A
Date Of Birth	28/09/1993
Occupation	INDOOR
Date Of Driving Pass	28/01/2013
Driving Experience	5 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-94384458
Fax Number	
Contact Number	
Email Address	MAY.SOO@WINEBERRY.COM.SG

Address	22 INGGU ROAD
Postcode	757364
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	YES
Foreign Vehicle Registration Number	WWH9682 (PRIVATE CAR)
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)	5
Passenger 1	NAME: : ANG LECK MIEN GENDER: : FEMALE
Passenger 2	NAME: : LI YONGHENG ADRIEL GENDER: : MALE
Passenger 3	NAME: : ONG JIA JING NICHOL GENDER: : FEMALE
Passenger 4	NAME: : TEO MIN HUI GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
POLICE STATION NAME [OTHER]	BISHAN N.P.C
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO THE ATTACHED SKETCH PLAN BY DRIVER.

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	SKU8231G
Vehicle Make/Model/Colour	
Details Of Properties	

Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	WWH9682
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

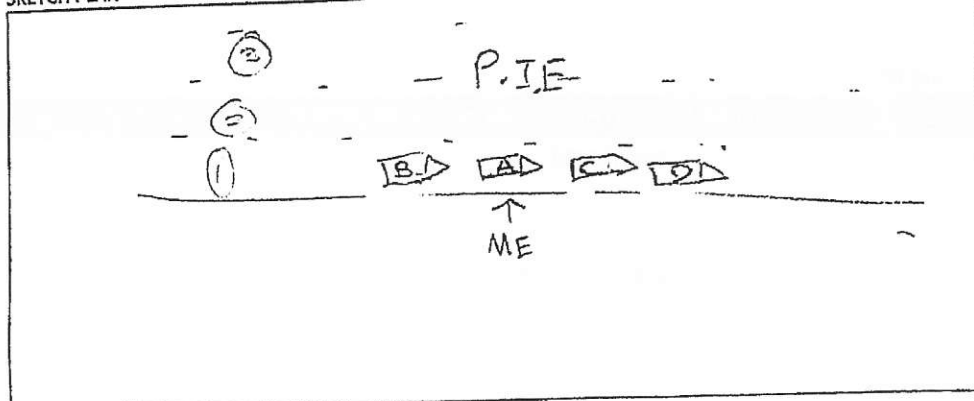
DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SKK5089Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan Pg. 1

Date of accident: 5/5/2018 Time: 13:30 Location: P I E towards Thompson
 My Vehicle A: SGR866R Vehicle B: SK18231G Vehicle C: 1WJH 9682
 Vehicle D: SKK5089Z

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to the Police Report No. T/20180505/2107

Type. Own Damage claim

☒ Claim OD/TP at Ah Lim Motor ☐ Claim OD/TP at other workshop ☐ Reporting Only

Remarks: Please forward a copy of my file accident report to:

Name and signature of workshop personnel including company stamp

My workshop :

Email address :

& myself :

Email address :

Note: Please take note that your insurer have 14 days timeframe for you to submit own damage claim under your own policy. Kindly check with your own insurer for more information.

DECLARATION

We declare the foregoing particulars are true in every respect:



Policyholder's Signature *

Date & Time:

Driver's Signature

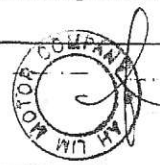
(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



SKETCH PLAN

IMPORTANT NOTICE

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7. By the lodging 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:

[Handwritten signature]

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



Sketch Plan Pg. 3



**SINGAPORE
POLICE FORCE**



T/20180505/2101

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

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Report No. T/20180505/2101

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/05/2018 15:51		Vide Report No.:		Station Diary No.: 119	
Informant's Particulars					
Name of Informant: LEOW ZHEN HUI, WESLEY			Address: 22 INGGU ROAD SINGAPORE 757364		
ID Type / ID No.: NRIC NO / S9335381A			Contact No.: Home/Office: Mobile: 94384458		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 24	Date of Birth: 28/09/1993	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name: SIM
Occupation: Student			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: 05/05/2018 13:30	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 PAN ISLAND EXPRESSWAY THOMSON ROAD After Stevens Road Exit				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 80 Km/h	
Traffic Flow: Dual Carriage Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
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
SGR866R	Car	NISSAN		Brown		4
SKK5089Z	Car	TOYOTA		White		0
SKU8231G	Car	MAZDA		Red		0
WWH9682	Car	TOYOTA		Black		0



**SINGAPORE
POLICE FORCE**



T/20180505/2101

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

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Report No. T/20180505/2101

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LEOW ZHEN HUI, WESLEY	ID No.	S9335381A
Related Vehicle	SGR866R (Car)	Contact No.	94384458
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

Brief Details.

On 05/05/2018 at about 1.30pm, I was driving my vehicle SGR866R along PIE towards the direction of Thomson Road at the 1st lane. Just after Stevens Road exit, I noticed that the vehicle in front of mine brake and I follow suit. While my vehicle was slowed down, I felt an impact. Subsequently, I alighted to make a check and I realized that it was a chain collision involving 3 other vehicles and my vehicle was the third one. I am still in shock and could not remember the details exactly. I do have a in car recording but the memory card was not inserted.

After the accident, LTA road marshal attended to the scene and I was advised to lodge a police report as it involves a Malaysia registered vehicle. I am able to sketch the accident scene and attached as Annex A in this report.

CON
2CS/60/217

Sketch Plan Pg. 5



SINGAPORE
POLICE FORCE



T/20180505/2101

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

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Report No. T/20180505/2101

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan.

Refer to Annex A *WA*

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:

E /

Staff Sgt ONG KIAN KENG

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

SI DZUL HAIRIE BIN RAMLI

Contact No.: 65476220



SINGAPORE
POLICE FORCE

Signature Of Informant:

Date/Time:

05/05/2018 15:51

Classification Of Case:

SN 061

Authentication Stamp

NP168

SIGNATURE