

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	04/06/2018 16:06
Date Of Accident	03/06/2018 15:30
Exact Location Of Accident	PIE (TUAS) AFTER KALLANG BAHRU EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKG7207H
Insured/Policyholder	
Name Of Registered Owner	ROSALIND LEE SHI YING
NRIC No	S7809596B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90888480
Alternative Phone No	OFFICE-90888480

Vehicle Particulars

Manufacturer	NISSAN
Model	ALMERA 1.5 4AT ABS AIRBAG 2WD 4DR
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100316804-05
Cover Note Number	

Driver

Name of Driver	ROSALIND LEE SHI YING
NRIC No	S7809596B
Date Of Birth	10/04/1978
Occupation	INDOOR
Date Of Driving Pass	22/12/2001
Driving Experience	16 YEARS AND 5 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-90888480
Fax Number	
Contact Number	OFFICE-90888480
Email Address	NOEMAIL

Address	BLK 321B ANCHORVALE DRIVE #05-184
Postcode	542321
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	CHAIN COLLISION
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	4
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)	2
Passenger 1	NAME: : STEPFANIE TAN JI JIE GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20180603/7007.

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	SKW271H
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) 4
Passenger 1
NAME: :
GENDER: :
Passenger 2
NAME: :
GENDER: :
Passenger 3
NAME: :
GENDER: :

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number FBL6557J
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category MOTORCYCLE
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 SLK1439L
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)

Accident Sketch Plan

SKETCH PLAN


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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 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)

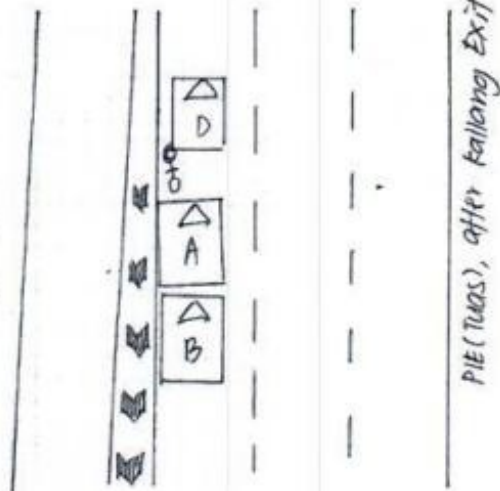

Driver's Signature
(If driver is not the policyholder)
Date & Time:


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

Accident Sketch Plan

SKETCH PLAN

Vehicle A: SKG 7207H
 Vehicle B: SKW 271H
 Vehicle C: FBL 6557J
 Vehicle D: SLK 1439L



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On the stated date & time, I, vehicle A, SKG 7207H, was travelling straight along the stated venue front motor hit onto the vehicle in front and I immediately applied my brakes. Almost immediately, vehicle B, SKW 271H, hit onto my vehicle's rear portion. The great impact caused my vehicle to propel forward and hit onto the motorbike.

my passenger: Name: Stefanie Tan
 NRIC: S1208727 F

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:
 Date & Time:

Police Report



**SINGAPORE
POLICE FORCE**



T/20180603/7007

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

Report No. T/20180603/7007

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 03/06/2018 22:25	Vide Report No.:	Station Diary No.:
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Informant's Particulars			
Name of Informant: ROSALIND LEE SHI YING		Address: APT BLK 321B ANCHORVALE DRIVE #05-184 SINGAPORE 542321	
ID Type / ID No.: NRIC NO / S7809596B		Contact No.: Home/Office: Mobile: 90888480	
Nationality: SINGAPORE CITIZEN		Email: li_rosalind@yahoo.com.sg	
Sex: Female	Age: 40	Date of Birth: 10/04/1978	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: SENIOR CUSTOMER SERVICE EXECUTIVE		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: 03/06/2018 15:30	Type of Location: Straight Road
Location: PAN ISLAND EXPRESSWAY PIE(TUAS), AFTER KALLANG EXIT				
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: Yes	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBL6557J	Motorcycle				Seriously Damaged	1
SKG7207H	Car	NISSAN	ALMERA 1.5 4AT ABS AIRBAG 2WD 4DR	Grey	Seriously Damaged	2
SKW271H	Car	HONDA			Seriously Damaged	4

Police Report



**SINGAPORE
POLICE FORCE**



T/20180603/7007

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

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Report No. T/20180603/7007

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLK1439L	Car	HONDA			Slightly Damaged	4

Details of Vehicle Insurance					
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date	
SKG7207H	AIG ASIA PACIFIC INSURANCE PTE. LTD.	2100316804-05	29/09/2017	28/09/2018	

Details of Person Involved					
Any Pedestrian Involved: No					
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA		
Driver					
Name	ROSALIND LEE SHI YING		ID No.	S7809596B	
Related Vehicle	SKG7207H (Car)		Contact No.	90888480	
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL	
Date Treatment	03/06/2018		Date Discharge	03/06/2018	
No. of Days granted Medical Leave	05		Degree of Injury	Serious	
Passenger					
Name	STEPFANIE TAN YI JIE		ID No.	S1208727F	
Related Vehicle	SKG7207H (Car)		Contact No.	90271333	
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL	
Date Treatment	03/06/2018		Date Discharge	03/06/2018	
No. of Days granted Medical Leave	05		Degree of Injury	Serious	

Brief Details.

ON 03/06/2018, AT ABOUT 15:30HR, I WAS DRIVING MY VEHICLE, SKG7207H, ALONG PIE TOWARDS TUAS, AFTER KALLANG EXIT. THE MOTORBIKE IN FRONT, FBL6557J, COLLIDED ONTO SLK1439L, AND FELL. I IMMEDIATELY APPLIED MY BRAKES AND STOPPED. ALMOST IMMEDIATELY, VEHICLE NUMBER, SKW271H, HIT ONTO MY VEHICLE'S REAR PORTION. THE GREAT IMPACT CAUSED MY VEHICLE TO PROPEL FORWARD AND HIT ONTO THE MOTORBIKE.

THE MOTORCYCLIST WAS THEN CONVEYED TO THE HOSPITAL. MY MOM & I THEN FELT UNWELL, THUS WE SEEK MEDICAL ATTENTION AT INTEMEDICAL 24HR CLINIC, AND WERE BOTH GIVEN 5DAYS MEDICAL LEAVE.

Police Report



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T/20180603/7007

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Report No. T/20180603/7007

CONTINUATION OF REPORT

Police Report



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T/20180603/7007

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Report No. T/20180603/7007

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPiB /
THABAGESH JEYATHESH
Contact No.: 65476232

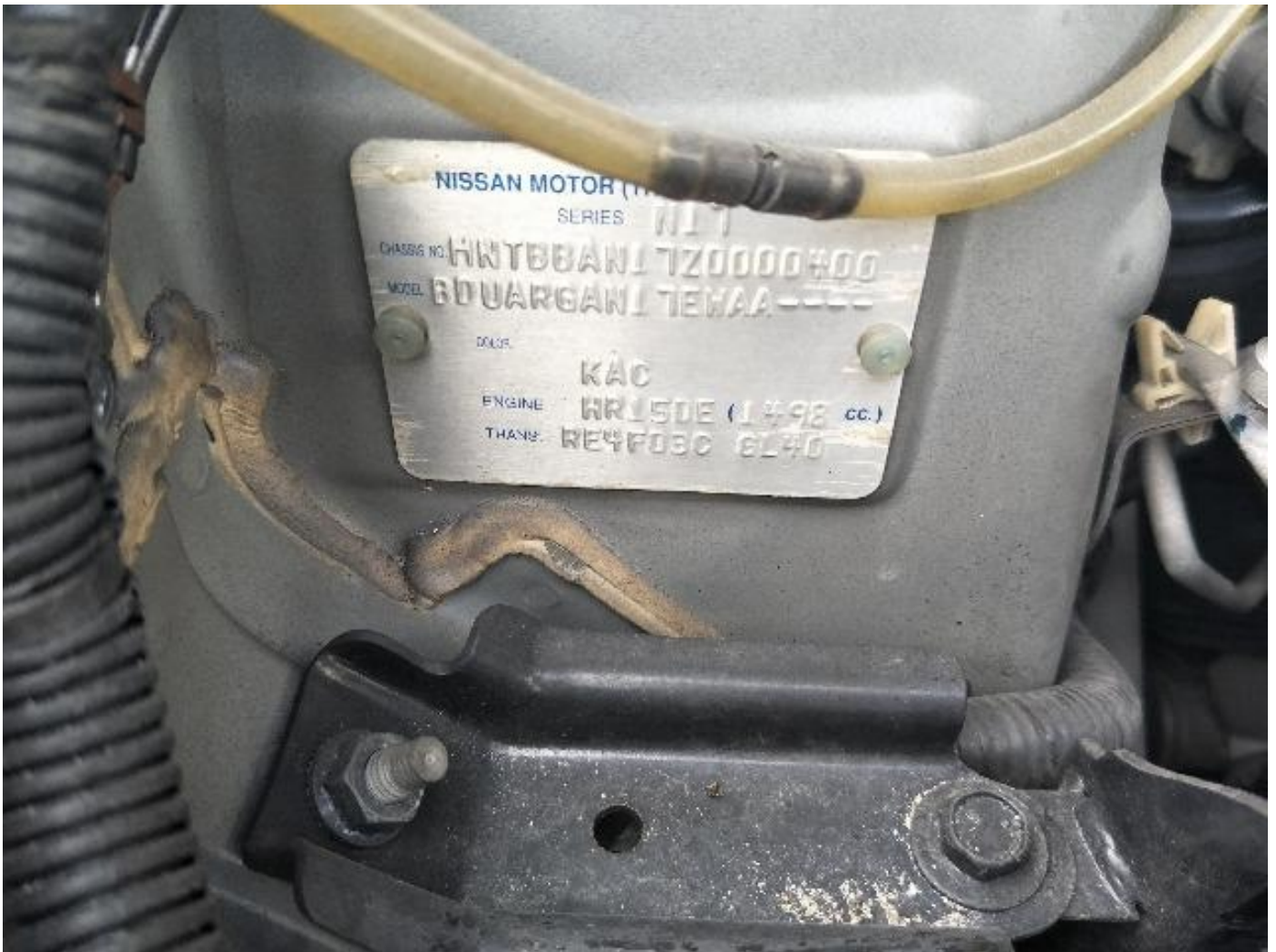
Authentication Stamp:
NP168

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

Date/Time:
03/06/2018 22:25

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

