

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	25/06/2018 19:00
Date Of Accident	25/06/2018 09:05
Exact Location Of Accident	ALONG AYE TOWARDS TUAS NEAR ALEXANDRA ROAD EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLS9187T
Insured/Policyholder	
Name Of Registered Owner	PAUL TAN SIANG LOK
NRIC No	S7724906J
Email Address	PAULSLTAN@GMAIL.COM
Mobile Phone No	(LOCAL) +65-88222354
Alternative Phone No	OTHERS-88222354

Vehicle Particulars

Manufacturer	TOYOTA
Model	PRIUS
Exact Purpose for which vehicle was being used at time of accident	COMMUTE TO WORK
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	LONPAC INSURANCE BHD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	Z17VP05016249
Cover Note Number	

Driver

Name of Driver	PAUL TAN SIANG LOK
NRIC No	S7724906J
Date Of Birth	10/09/1977
Occupation	INDOOR
Date Of Driving Pass	22/09/1997
Driving Experience	20 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-88222354
Fax Number	
Contact Number	OTHERS-88222354
Email Address	PAULSLTAN@GMAIL.COM

Address	BLK 135 SIMEI STREET 1 #11-64
Postcode	520135
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	DRIZZLING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	3
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	CLEMENTI NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 427 CLEMENTI AVENUE 3 , POSTCODE: 120427 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7759999 - FAX NO: 67764246
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20180625/2078

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	WITH OWNER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	FBM4999A
Vehicle Make/Model/Colour	KTM 200
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	FADZLY
NRIC/Passport Number	
Contact Number	87507303
Address	
Postcode	
Insurance Company Name	

Nature Of Damage
No. Of Passenger (Including Driver)

1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SKG9305U
Vehicle Make/Model/Colour MERCEDES BENZ C180
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver NG HWEE MIAN
NRIC/Passport Number S8575245F
Contact Number 91846624
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

1

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 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: 25/6/2018

17:40:00

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No:

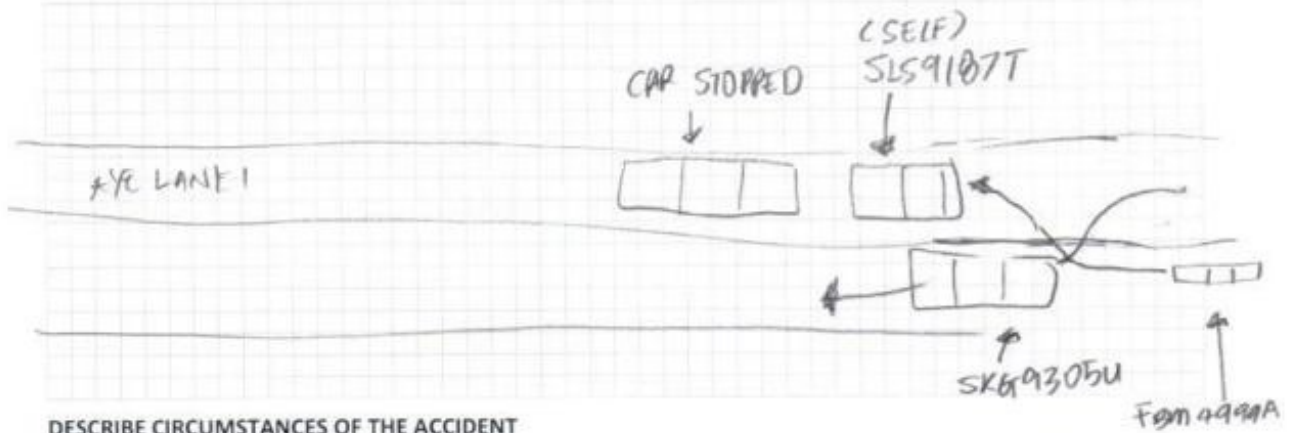
25/6/2018

Josephine

Accident Sketch Plan

SKETCH PLAN

Bye towards Jua B/F ALVARADO ROAD



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

*AS Refer to Police Report
7/20180625/2018*

DECLARATION

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

Policyholder's Signature
Date & Time: *25/6/2018*
17:40:00

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

Reporting Centre Personnel's Signature
Name: *25/06/2018*
NRIC/FIN No. *[Signature]*

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180625/2078

Police Station Of Origin:
Clementi NPP
427 Clementi Avenue 3 #01-456
SINGAPORE 120427
Tel No: 1800-7759999

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Report No. T/20180625/2078

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 25/06/2018 14:08	Vide Report No.:	Station Diary No.: 15
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Informant's Particulars				
Name of Informant: PAUL TAN SIANG LOK		Address: APT BLK 135 SIMEI STREET 1 #11-64 SINGAPORE 520135		
ID Type / ID No.: NRIC NO / S7724906J		Contact No.: Home/Office: 66015620 Mobile: 88222354		
Nationality: SINGAPORE CITIZEN		Email:		
Sex: Male	Age: 40	Date of Birth: 10/09/1977	Type of Informant: Driver	
Race: Chinese		Language:	Institution / School Name:	
Occupation: Head of IT		Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 25/06/2018 09:05	Type of Location: Straight Road
Location: Along Road 1 Traveling Toward Road 2 AYER RAJAH EXPRESSWAY TUAS WEST ROAD Near exit Alexandra Road.				
Weather: Drizzling		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: Two 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
FBM4999A	Motorcycle			White	Slightly Damaged	0
SKG9305U	Car	MERCEDES BENZ	C 180	White	Slightly Damaged	0
SLS9187T	Car	TOYOTA	PRIUS C CVT	Silver	Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180625/2078

Police Station Of Origin:
Clementi NPP
427 Clementi Avenue 3 #01-456
SINGAPORE 120427
Tel No: 1800-7759999

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Report No. T/20180625/2078

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLS9187T	LONPAC INSURANCE BHD.	Z17VP05016249	24/11/2017	23/11/2018

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Rider				
Name	FADZLY		ID No.	NIL
Related Vehicle	FBM4999A (Motorcycle)		Contact No.	87507303
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	Slight
Driver				
Name	NG HWEE MIAN		ID No.	S8575245F
Related Vehicle	SKG9305U (Car)		Contact No.	91846624
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	PAUL TAN SIANG LOK		ID No.	S7724906J
Related Vehicle	SLS9187T (Car)		Contact No.	66015620
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

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20180625/2078

Police Station Of Origin:
Clementi NPP
427 Clementi Avenue 3 #01-456
SINGAPORE 120427
Tel No: 1800-7759999

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Report No. T/20180625/2078

CONTINUATION OF REPORT

Brief Details.

On 25/06/2018 at about 0905hrs, I was driving my private car bearing license plate number SLS9187T, Toyota (Silver/Prius C CVT) along AYE towards Tuas near Alexandra Road on the lane 1. At that time the traffic volume was heavy and weather was drizzling. As I can see there was a private car bearing license plate number SKG9305U, Mercedes (White/C180) behind me. The said Mercedes car had overtake my vehicle by changing the lane to lane 2. I then continued driving on the same lane, suddenly I heard a loud bang from the rear of my car and I stopped immediately and I stepped out of my car to make a check. I saw there was the rider fell down to the left near to my left car bumper.

Subsequently, the Mercedes lady car driver who also stopped on the lane 2 in front about 15 meters away and she stepped out of her car to walk back to the incident location to make a check. I believed that the Mercedes car who also involved in the accident as the rider knocked onto her rear bumper first and the rider motorcycle got swerve and knocked onto my rear bumper.

I observed that the rider was conscious and sustains minor injuries on his right arm and right knee. The Mercedes lady driver who called for the ambulance to scene. After which, the ambulance and Traffic Police arrived at scene. The ambulance paramedic attended to the rider and I was advised by the traffic Police to proceed to Police station to lodge a traffic police report.

I wish to state that I have no idea whether the rider has been conveyed by the ambulance to the hospital or not as I already left the incident location. I have a build-in video camera in my car and recorded some of incident.

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20180625/2078

Police Station Of Origin:
Clementi NPP
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SINGAPORE 120427
Tel No: 1800-7759999

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Report No: T/20180625/2078

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:
D /
Sgt 3 ZAMBREE BIN SA'AT

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / AEIT /
SSI 2 SITIMARSITA BINTE BOHARI
Contact No.: 65476219

Authentication Stamp
NP168

Signature Of Informant:

Date/Time:
25/06/2018 14:08

Classification Of Case:

ACCIDENT SCENE



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

