#### 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 witholding 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

	STATI	

Date Of Report

29/06/2018 15:41 28/06/2018 20:20

Date Of Accident

Exact Location Of Accident

PIE TOWARDS TUAS (AFTER ENG NEO EXIT)

Country/State of Loss

SINGAPORE

### **DETAILS OF OWN VEHICLE**

Vehicle Registration Number

SKD158C

#### Insured/Policyholder

Name Of Registered Owner

NGAN WEE LING, CHARMIAN

NRIC No

S7735364Z

**Email Address** 

CHARMIAN.NGAN@HOTMAIL.COM

Mobile Phone No

(LOCAL) +65-96551212

Alternative Phone No

OTHERS-98343018

#### **Vehicle Particulars**

Manufacturer

BMW

Model

3201-2.0 (A)

Exact Purpose for which vehicle was being used at

time of accident

Are you claiming under your own insurance policy

NO

for repair to your vehicle?

THIRD PARTY

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

GA054874

Cover Note Number

## Driver

Name of Driver

NGAN WEE LING, CHARMIAN

NRIC No Date Of Birth S7735364Z 12/12/1977

Occupation

INDOOR

Date Of Driving Pass

18/11/1998

Driving Experience

19 YEARS AND 7 MONTHS

Gender

**FEMALE** 

Mobile Number

(LOCAL) +65-96551212

Fax Number

Contact Number

OTHERS-98343018

EMail Address

CHARMIAN.NGAN@HOTMAIL.COM

BLK 204A COMPASSVALE DRIVE Address

#10-449

Postcode 541204

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

Was any body injured in the Accident? NO

Was any injured conveyed to hospital by NO ambulance?

Was any other material or property damaged? YES

I have been approached by unknown person(s) NO soliciting/offering accident claims assistance.

Number of Passengers (Including Driver)

Passenger 1

NAME: : SOH CHEE WEE

GENDER: : MALE

**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

ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY: Police Station Address

2

**SINGAPORE** 

Police Station Contact TEL NO: 65470000 - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

**Circumstances of Accident** 

PLEASE REFER TO SKETCH PLAN.

Attachment(s)

Are accident photos available for attachment? YES

NO

Was there any video captured by Car Camera?

YES

Was there any audio recorded?

NO

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number Vehicle Make/Model/Colour

SJA1791U

**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

SLU5121Z

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

SFX6652G

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 4**

Vehicle Registration Number

SLD3888Y

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

#### **SKETCH PLAN**

### **IMPORTANT NOTICE**

يَوْمَتُ مُ

- 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.
- Information provided must be as <u>truthful and accurate as possible</u>. Any wilful misrepresentation or withholding of material facts may allow insurance companies to <u>repudiate policy liability</u>.
- 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.
- 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, involces, 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 .:

5-12N

GIARMC SketchPlanForm\_V3

# Sketch Plan Pg. 2

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Police Station Of Origin: Traffic Police Division HQ 10 Ubi Avenue 3 SINGAPORE 408865

Report No. T/20180629/7008

Tel No: 65470000

### REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/06/2018 14:30			Vide Report No.:		Station Diary No.:	
Informant's Particulars						
Name of Ir	formant:		Address:	<del></del>		
NGAN WEE LING, CHARMIAN			APT BLK 204A COMPASSVALE DRIVE #10-449 SINGAPORE 541204			
ID Type / II	D No.:		Contact No.:			
NRIC NO /	S7735364	1Z	Home/Office: Mobile: 96551212			
Nationality: SINGAPORE CITIZEN			Email: charmian.ngan@gmail.com			
Sex: Female	Age: 40	Date of Birth: 12/12/1977	Type of Informant: Driver			
Race: Chinese			Language: Institution / School Name: English		School Name:	
Occupation: PROPERTY AGENT			Driving Licence Information: Class: 2B,2A,3	Date of Ex	piry;	

<b>General Informat</b>	ion of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 28/06/2018 20:20	)	Type of Location: Straight Road
Location:					
PAN ISLAND EX	PRESSWAY				
PIE towards Tuas	before BKE exit				
Weather: Clear		Road Surface: Dry		Road	Speed Limit:
Traffic Flow: Traffic Control: Traffic Volume Dual Carriage Way Not Controlled Heavy					
Type of Collision: Between Moving Vehicles - Head To Rear					ne conveyed by llance:

	ehicle Involved					
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SFX6652G	Car	KIA	Forrte	White	Slightly Damaged	0
SJA1791U	Car	ТОҮОТА	Vios	Silver	Seriously Damaged	1
SKD158C	Car	BMW	320I AT ABS D/AB 2WD 2DR GAS/D SR	White	Seriously Damaged	1





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

2 of 4 Report No. T/20180629/7008

### CONTINUATION OF REPORT

Details of V	ehicle involved					
Vehicle No	Type	Make	Model	Color	Condition	No of Passenger
SLD3888Y	Car	VOLVO		Black		0
SLU5121Z	Car	HYUNDAI	Tucson	Silver	Slightly Damaged	0

Details of V	ehicle:Insurance			
Vehicle No	Insurance Company	-Insurance No	Effective	Expiry Date
SKD158C	AXA INSURANCE SINGAPORE PTE	GA054874	31/07/2017	30/07/2018

Details of Perso	n Involved		4.0		
Any Pedestrian I	nvolved: No		and the second s		
No. of Pedestria	ns Injured: NIL	Use of Pe	destriar	Cross	sina: NA
Driver					
Name	NGAN WEE LING, CHARMIAN		ID No.		S7735364Z
Related Vehicle	SKD158C (Car)		Conta	ct No.	96551212
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	***************************************	Class of Driving Licence & Expiry Date		Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment		Date Disc	charge 28/06/2018		
No. of Days gran	ted Medical Leave   05	Degree of Injury   Serious			
Passenger					
Name	Soh Chee Wee		ID No.		\$7202957G
Related Vehicle	SKD158C (Car)		Contact No.		96278087
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL		Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL
Date Treatment	Date Disch	charge   28/06/2018		/2018	
No. of Days grant	Degree of Injury   Serious				

### Brief Details.

I was travelling along PIE towards Tuas before BKE exit. Vehicles in front of me slowed down and stopped. I also slowed down & stopped. Suddenly, SJA1791U hit onto my rear. The strong impact caused my vehicle to surge forward and hit onto SLD3888Y in front. When I got down to inspect, I realised I was involved in a 5 car collision.

- 1) SFX6652G 2) SLD3888Y



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



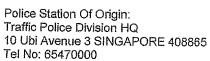
3 of 4

Report No. T/20180629/7008

CONTINUATION OF REPORT

- 3) SKD158C
- 4) SJA1791U 5) SLU5121Z







4 of 4 Report No. T/20180629/7008

кероп No. 1/20180

CONTINUATION OF REPORT

Sketch Plan Informant is not able to provide sketch plan

NP168

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 29/06/2018 14:30
Officer In Charge Of Case: TP / TPHQ / WONG SIEU LUI Contact No.: 65476151	Classification Of Case:
Authentication Stamp	