

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 | 21/07/2018 11:18 |
| Date Of Accident | 20/07/2018 19:20 |
| Exact Location Of Accident | BISHAN RD AFTER TURNING FROM BRADDELL RD |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------------------|
| Vehicle Registration Number | SGA3456K |
| Insured/Policyholder | |
| Name Of Registered Owner | ZHANG SHAOYING |
| NRIC No | S2675884Z |
| Email Address | NOEMAIL |
| Mobile Phone No | (LOCAL) +65-96835365 |
| Alternative Phone No | OFFICE-96835365 |

Vehicle Particulars

| | |
|--|---------------------------------------|
| Manufacturer | BMW |
| Model | 318I 2.0 AT D/AB 2WD 4DR GAS/D SR DRL |
| 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 | NTUC INCOME INSURANCE CO-OPERATIVE LTD |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | 5085184297-01 |
| Cover Note Number | - |

Driver

| | |
|----------------------|-----------------------|
| Name of Driver | ZHANG SHAOYING |
| NRIC No | S2675884Z |
| Date Of Birth | 23/02/1958 |
| Occupation | INDOOR |
| Date Of Driving Pass | 03/01/1996 |
| Driving Experience | 22 YEARS AND 6 MONTHS |
| Gender | FEMALE |
| Mobile Number | (LOCAL) +65-96835365 |
| Fax Number | |
| Contact Number | OFFICE-96835365 |
| Email Address | NOEMAIL |

| | |
|---|----------------------------|
| Address | BLK 61 BISHAN ST 21 #06-03 |
| Postcode | 574044 |
| 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 - CHANGE/CROSS LANE |
| 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 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: : UNKNOWN GENDER: : FEMALE |

Details of Police Action

| | |
|---|--|
| Was the accident reported to the police? | YES |
| If Yes, Please state which Police Station | |
| Police Station Name | BISHAN NEIGHBOURHOOD POLICE CENTRE |
| Police Station Address | ROAD: 20 BISHAN STREET 23 , POSTCODE: 579757 , COUNTRY: SINGAPORE |
| Police Station Contact | TEL NO: 1800-5529999 - FAX NO: 65561905 |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

I WAS TRAVELLING ALONG BISHAN RD AFTER TURNING OUT FROM BRADDELL RD ON THE CENTER LANE I INTENDED TO FILTER INTO EXTREME RIGHT LANE, AFTER CHECK THE BLIND SPOT AND CLEAR FOR ME TO FILTERING, WHILE MY VEH MORE HALF BODY INSIDE THE LANE, SUDDENLY VEH B (BEARING NO GBE5112C) COME FROM THE EXTREME RIGHT LANE WITH HIGH SPEED AND COLLIDED ONTO MY VEH RIGHT FRONT PORTION. AFTER THE IMPACT, WE BOTH VEH STOP, THEN SUDDENLY VEH B MOVING FORWARD CAUSING MORE DAMAGE TO MY VEH. AFTER ALIGHTED FROM THE VEH WE EXCHANGE PARTICULAR, I QUESTION THE DRIVER WHY YOU DRIVE SO FAST AND WHY YOU DON'T STOP AFTER IMPACT, HE SAY DUE TO HEAVY LOAD CANNOT STOP IN TIME. I ALSO REALIZED INSIDE THE VAN TOTAL 4 PERSON INCULDE THE DRIVER. ADD POLICE REPORT : T/20180906/2158

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 | GBE5112C |
| Vehicle Make/Model/Colour | |
| Details Of Properties | |
| Vehicle Category | COMMERCIAL VEHICLE |

| | |
|-------------------------------------|-------------------------------------|
| Name of Driver | HUZAIRI BIN AZMAN |
| NRIC/Passport Number | S9109711G |
| Contact Number | |
| Address | |
| Postcode | |
| Insurance Company Name | |
| Nature Of Damage | |
| No. Of Passenger (Including Driver) | 4 |
| Passenger 1 | NAME: : UNKNOWN GENDER: : FEMALE |
| Passenger 2 | NAME: : UNKNOWN GENDER: : FEMALE |
| Passenger 3 | NAME: : UNKNOWN GENDER: : FEMALE |

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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5. Any false reporting may be referred to the Police for investigation.
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.: _____

Accident Sketch Plan

SKETCH PLAN

A= SGA 3456K
B= GEC 1112C

Bishan Rd After turning from Braddell Rd.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please Refer to Statement

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:
NRIC/FIN No.:

Accident Sketch Plan



**SINGAPORE
POLICE FORCE**



T/20180906/2158

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/20180906/2158

CONTINUATION OF REPORT

| Details of Vehicle Insurance | | | | |
|------------------------------|--|---------------|------------|-------------|
| Vehicle No. | Insurance Company | Insurance No | Effective | Expiry Date |
| SGA3456K | NTUC Income Insurance Co-Operative Limited | 5085184297-01 | 22/12/2017 | 21/12/2018 |

| Details of Person Involved | | | | |
|-----------------------------------|-------------------|-----|--|-----------------------------------|
| Any Pedestrian Involved: No | | | | |
| No. of Pedestrians Injured: NIL | | | Use of Pedestrian Crossing: NA | |
| Driver | | | | |
| Name | HUZAIRI BIN AZMAN | | ID No. | S9109711G |
| Related Vehicle | GBE5112C (Van) | | Contact No. | NIL |
| 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 | ZHANG SHAOYING | | ID No. | S2675884Z |
| Related Vehicle | SGA3456K (Car) | | Contact No. | 96835365 |
| 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 |

Brief Details.

On the above mentioned date, time and location, I was driving my car (SGA3456K) along Bishan Road after turning from Braddell Road, on the middle lane. I then filter to the extreme right lane, I also checked my blindspot before filtering into the lane. When my vehicle was almost in the first lane, there was a vehicle from the rear (GBE5112C) that was driving very fast. However, I moved to the left a little to avoid any collision, however the other vehicle squeezed through on the right side and collided onto the right side of my vehicle. Due to the impact, we both stopped. When suddenly, the other driver continued to move forward causing more damages to my vehicle. After which, we both alighted to exchange particulars. I then asked the other driver why was he driving so fast and he did not stop after the impact. However, one of the passengers informed me that its due to heavy load and could not stop in time.

No one was injured at that point of time.

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Accident Photo



Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



T/20180906/2158

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

1 of 4

Report No. T/20180906/2158

REPORT OF A TRAFFIC ACCIDENT

| | | |
|--|------------------|---------------------------|
| Date/Time Report Made: 06/09/2018 22:53 | Vide Report No.: | Station Diary No.: 106 |
|--|------------------|---------------------------|

Informant's Particulars

| | | | | | |
|--|------------|------------------------------|--|----------------------------|--|
| Name of Informant: ZHANG SHAOYING | | | Address: APT BLK 61 BISHAN STREET 21 #06-03 SINGAPORE 574044 | | |
| ID Type / ID No.: NRIC NO / S2675884Z | | | Contact No.: Home/Office: Mobile: 96835365 | | |
| Nationality: SINGAPORE CITIZEN | | | Email: | | |
| Sex: Female | Age: 60 | Date of Birth: 23/02/1958 | Type of Informant: Driver | | |
| Race: Chinese | | | Language: | Institution / School Name: | |
| Occupation: Sports coach | | | Driving Licence Information: Class: Date of Expiry: | | |

General Information of the Accident

| | | | | |
|--|----------------------|------------------------------------|--|-------------------------------------|
| Type of Accident: | Non-Injury Others | Drink Drive: No | Date/Time of Accident: 20/07/2018 19:20 | Type of Location: Straight Road |
| Location: Along Road 1 BISHAN ROAD Along Bishan Road after turning from Braddell Road | | | | |
| Weather: Clear | | Road Surface: Dry | | Road Speed Limit: |
| Traffic Flow: Dual Carriage Way | | Traffic Control: Not Controlled | | Traffic Volume: Heavy |
| Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction | | | | Anyone conveyed by ambulance: No |

Details of Vehicle Involved

| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
|-------------|------|--------|---------------------------------------|--------|------------------|-----------------|
| GBE5112C | Van | TOYOTA | LITEACE 5 DR | Silver | Slightly Damaged | 3 |
| SGA3456K | Car | BMW | 318I 2.0 AT D/AB 2WD 4DR GAS/D SR DRL | Black | Slightly Damaged | 1 |

Details of Vehicle Insurance

| Vehicle No. | Insurance Company | Insurance No | Effective | Expiry Date |
|-------------|-------------------|--------------|-----------|-------------|
|-------------|-------------------|--------------|-----------|-------------|

Police Report



**SINGAPORE
POLICE FORCE**



T/20180906/2158

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

2 of 4

Report No. T/20180906/2158

CONTINUATION OF REPORT

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| SGA3456K | NTUC Income Insurance Co-Operative Limited | 5085184297-01 | 22/12/2017 | 21/12/2018 |

| Details of Person Involved | | | | |
|-----------------------------------|-------------------|-----|--|-----------------------------------|
| Any Pedestrian Involved: No | | | | |
| No. of Pedestrians Injured: NIL | | | Use of Pedestrian Crossing: NA | |
| Driver | | | | |
| Name | HUZAIRI BIN AZMAN | | ID No. | S9109711G |
| Related Vehicle | GBE5112C (Van) | | Contact No. | NIL |
| 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 | ZHANG SHAOYING | | ID No. | S2675884Z |
| Related Vehicle | SGA3456K (Car) | | Contact No. | 96835365 |
| 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 |

Brief Details.

On the above mentioned date, time and location, I was driving my car (SGA3456K) along Bishan Road after turning from Braddell Road, on the middle lane. I then filter to the extreme right lane, I also checked my blindspot before filtering into the lane. When my vehicle was almost in the first lane, there was a vehicle from the rear (GBE5112C) that was driving very fast. However, I moved to the left a little to avoid any collision, however the other vehicle squeezed through on the right side and collided onto the right side of my vehicle. Due to the impact, we both stopped. When suddenly, the other driver continued to move forward causing more damages to my vehicle. After which, we both alighted to exchange particulars. I then asked the other driver why was he driving so fast and he did not stop after the impact. However, one of the passengers informed me that its due to heavy load and could not stop in time.

No one was injured at that point of time.

Police Report



**SINGAPORE
POLICE FORCE**



T/20180906/2158

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/20180906/2158

CONTINUATION OF REPORT

Police Report



SINGAPORE
POLICE FORCE



T/20180906/2158

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/20180906/2158

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:
E /
Sgt 2 MOHAMAD FAIZAL BIN HASHIM TOH

Signature Of Informant:

Signature Of Interpreter:
Sgt 2 ZHU JIANBIN /

Date/Time:
06/09/2018 22:53

Officer In Charge Of Case:
TP / GIA /
Staff Sgt WONG SIEU LUI
Contact No: 65476151 SN 061

Classification Of Case:

Authentication Stamp
NP168

SIGNATURE

Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: S66550020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MMA118094172 Vehicle Registration No: SGA 3456K
Name(as shown in NRIC) : Zhang Shao Ying NRIC/FIN/Passport No : 526758842
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : _____ Singapore()
Contact (Tel) : _____ Mobile No. : 9683 5365
Email Address : _____
Date of Accident : 20/7/18 Time of Accident : 19:20
Place of Accident : Bishan Rd After turning from braddell Rd.
Insurance Company : NTUC

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

1. Add in statement that I wish to state that vehicle B ^{behind} collided on my vehicle front right portion (~~rear~~ front right rim portion).
2. Add in GBE5112C was taking over from my behind. ~~car~~ Vehicle B hit my car 2 times.
3. After first impact, we both veh moving together. at least 10 meter. then Veh B push my veh back to center lane. and veh B moving forward. stop in front of me on the first lane. As can see on the scene photo which I taken. Veh B was stop in front of me.

Zhang Shao Ying
Policyholder / Driver's Signature
Date: _____

[Signature]
Reporting Centre Personnel's Signature
Name: _____
NRIC/FIN No.: 26/7/18
Date: _____

Addendum Sheet



GENERAL INSURANCE ASSOCIATION OF SINGAPORE RECORDS MANAGEMENT CENTRE
6 Raffles Quay #18-00 Singapore 048580
Tel (65) 6224 0010 Fax (65) 6224 0030
Operating Hours : Monday to Friday, 09:00 – 17:00
UEN: S66550020G / GST Reg. No.: M400017735

IMPORTANT NOTE: Please submit the completed Addendum form to the same Authorised Reporting Centre with whom you submitted the Original Report.

ADDENDUM

(A) PARTICULARS OF PERSON MAKING THE AMENDMENTS:

Original Report No : MNA118094172-01 Vehicle Registration No: SGA3456K
Name (as shown in NRIC) : ZHANG SHAOYING NRIC/FIN/Passport No : S2675884Z
(*Vehicle Driver / Vehicle Owner) (*) Please delete as appropriate
Address : BLK 61, BISHAN ST21 #06-03 Singapore 574044
Contact (Tel) : — Mobile No.: 96835365
Email Address : NOEMAIL
Date of Accident : 20/07/2018 Time of Accident : 19:20
Place of Accident : BISHAN RD AFTER TURNING FROM BRADDELL RD
Insurance Company: NTUC Income Insurance Co-operative Ltd.

(B) ADDITIONAL INFORMATION / AMENDMENTS:

I have made a report on the above mentioned accident and would like to include additional information or make the following amendments:

Add Police Report.

Zhang Shaoying
Policyholder / Driver's Signature
Date:

7/9/2018
Reporting Centre Personnel's Signature
Name:
NRIC/FIN No.:
Date: