

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	27/07/2018 14:05
Date Of Accident	26/07/2018 08:00
Exact Location Of Accident	TOA PAYOH CENTRAL BY TOA PAYOH LOR 2
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SFR8831A
Insured/Policyholder	
Name Of Registered Owner	YEE PUI YING
NRIC No	S1616994C
Email Address	YEE181@SINGNET.COM.SG
Mobile Phone No	(LOCAL) +65-93842298
Alternative Phone No	OFFICE-93842298

Vehicle Particulars

Manufacturer	NISSAN
Model	SYLPHY-1.6 (A)
Exact Purpose for which vehicle was being used at time of accident	
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	SOMPO INSURANCE SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D17MTPV0101309
Cover Note Number	

Driver

Name of Driver	YEE PUI YING
NRIC No	S1616994C
Date Of Birth	09/07/1963
Occupation	OUTDOOR
Date Of Driving Pass	02/01/2003
Driving Experience	15 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93842298
Fax Number	
Contact Number	OFFICE-93842298
Email Address	YEE181@SINGNET.COM.SG

Address	BLK 83 REDHILL LANE #06-77
Postcode	150083
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	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?	YES
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.	YES
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	RIVER VALLEY NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 4 DELTA AVENUE , POSTCODE: 161004 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2789999 - FAX NO: 62786427
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

AS SKETCH PLAN

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	SLG9514X
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 INJURED PERSON 1

Name	YEE PUI YING
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SFR8831A
Were seat belts worn?	NO
Was this injured conveyed to hospital by ambulance?	NO
Address	BLK 83 REDHILL LANE #06-77
Postcode	150083

Accident Sketch Plan

SKETCH PLAN

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6. The report will be forwarded by the insurers of the GSA 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 submission 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 elsewhere.

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 the accident shall be collectively referred to as the "Insurers"). The Insurers' lawyers/law firms, the Mediators' lawyers/law firms and any relevant government agency/authority (such as the police, for the purposes) 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 making 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 used 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 (b) above may be shared / disclosed:
 - (i) to all Insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulatory, law enforcement and government agencies as reasonably required for the purposes stated; or
 - (ii) for complying with requirements under any regulation, law or court order.

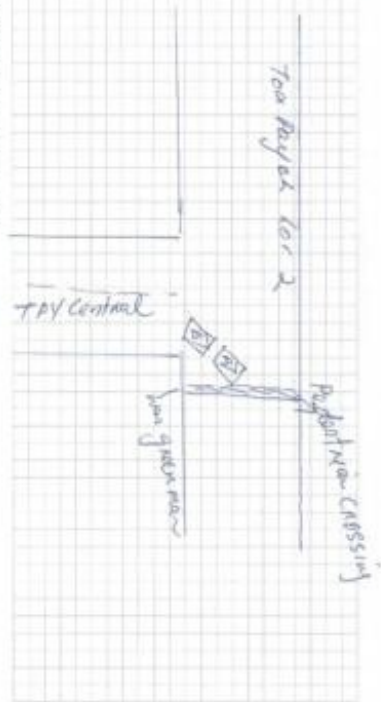
Policyholder's Signature
Date & Time:

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

Insuring Office Representative Signature
Name
MISC/Ref No:

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Police Report attached

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 Center's Signature
Name: _____
Participant No. _____

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S1616994C




Name
YEE PUI YING
余 培 瑛
Race
CHINESE
Date of birth 09-07-1963 Sex M
Country of birth SINGAPORE




S1616994C

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S1616994C
Name
YEE PUI YING
Birth Date: 09 Jul 1963
Issue Date: 02 Jan 2003



000084599F

4337686



NRIC No. S1616994C




Date of Issue
15-01-2009

Address
APT BLK 83 REDHILL LANE
#06-77
SINGAPORE 150083

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSIES

	PASS DATE
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	24 Sep 1983

NP 428A



Licence No: S1616994C



**SINGAPORE
POLICE FORCE**



T/20180727/2045

Police Station Of Origin:
River Valley NPP
4 Delta Avenue #01-02 SINGAPORE 161004
Tel No: 1800-2789999

1 of 4

Report No. T/20180727/2045

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 27/07/2018 12:51	Vide Report No.:	Station Diary No.: 9
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Informant's Particulars			
Name of Informant: YEE PUI YING		Address: APT BLK 83 REDHILL LANE #06-77 SINGAPORE 150083	
ID Type / ID No.: NRIC NO / S1616994C		Contact No.: Home/Office: Mobile: 9384 2298	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 55	Date of Birth: 09/07/1963	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: SERVICES ENGINEER		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: 26/07/2018 20:00	Type of Location: T-Junction
Location: Junction of Road 1 and Road 2 TOA PAYOH CENTRAL LORONG 2 TOA PAYOH at the T-junction of Toa Payoh Central and Lorong 2 Toa Payoh.				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control: Traffic Light - Working	Traffic Volume: Moderate	
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
SFR8831A	Car	NISSAN	SYLPHY 1.6 CVT ABS D/AIRBAG 2WD 4DR	Grey	Seriously Damaged	1
SLG9514X	Car					0

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



**SINGAPORE
POLICE FORCE**



T/20180727/2045

Police Station Of Origin:
River Valley NPP
4 Delta Avenue #01-02 SINGAPORE 161004
Tel No: 1800-2789999

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Report No. T/20180727/2045

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 /

Sr Staff Sgt CHEN TIANXIANG, IVAN

Signature Of Informant:

[Handwritten Signature]

Signature Of Interpreter:

Not applicable

Date/Time:

27/07/2018 12:51

Officer In Charge Of Case:

TP / AEIT /

SSI 2 YEO GEAK ENG CECILIA

Contact No.: 65476404

Classification Of Case:

Authentication Stamp

NP168



SN 069

SIGNATURE



**SINGAPORE
POLICE FORCE**



T/20180727/2045

Police Station Of Origin:
River Valley NPP
4 Delta Avenue #01-02 SINGAPORE 161004
Tel No: 1800-2789999

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Report No. T/20180727/2045

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SFR8831A	TENET SOMPO INSURANCE PTE. LTD.	D17MTPV0101309 5	25/09/2017	24/09/2018

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	YEE PUI YING		ID No.	S1616994C
Related Vehicle	SFR8831A (Car)		Contact No.	9384 2298
Hospital/Clinic	ACCESS+MEDICAL		Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	26/07/2018		Date Discharge	26/07/2018
No. of Days granted Medical Leave	03	Degree of Injury	Slight	
Passenger				
Name	WONG YOKE WAN		ID No.	S6904077B
Related Vehicle	SFR8831A (Car)		Contact No.	96421329
Hospital/Clinic	ACCESS+MEDICAL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	26/07/2018		Date Discharge	26/07/2018
No. of Days granted Medical Leave	03	Degree of Injury	Slight	

Brief Details.

On 26 July 2018 at about 8pm, I was driving my vehicle with my wife sitting at the front passenger seat at the junction of Toa Payoh central toward Lorong 2 Toa Payoh.

It was a T junction and I stopped my vehicle inside the right turn pocket to let the pedestrian cross, suddenly a vehicle SLG9514X hit onto my vehicle rear. At that point of time, the green man light was on and my vehicle was stationary.

My vehicle was badly damage on rear boot and boot cover cannot be close. At that point of time, both my wife and I felt dizzy and I had my neck and shoulder ached I also felt my left abdominal pain and my wife had her head, neck and backbone pain however, we did not call for the traffic police and ambulance to scene.

My wife and I then seek medical treatment at our GP Access+medical located at 86 Redhill close #01-600 on the 26 July 2018 and was given 3 days MC for both of us from 27 July 2018 to 29 July 2018. We were also referral to Alexandra Hospital to seek further treatment and was given 3 days MC from 26 July 2018

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

