

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	03/08/2018 17:42
Date Of Accident	02/08/2018 23:20
Exact Location Of Accident	JUNC KOH SENG RD & TEMBELING RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKT2008E
Insured/Policyholder	
Name Of Registered Owner	KHOO LENG HONG
NRIC No	S0250188J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90292952
Alternative Phone No	OFFICE-90292952

Vehicle Particulars

Manufacturer	TOYOTA
Model	PREMIO 1.5F A
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	5072052188-02
Cover Note Number	

Driver

Name of Driver	KHOO LENG HONG
NRIC No	S0250188J
Date Of Birth	16/09/1943
Occupation	INDOOR
Date Of Driving Pass	01/10/1976
Driving Experience	41 YEARS AND 10 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-90292952
Fax Number	
Contact Number	OFFICE-90292952
Email Address	NOEMAIL

Address	BLK 506B SERANGOON NORTH AVENUE 4 #13-430
Postcode	552506
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 - MAJOR/MINOR RD
Weather Conditions	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	2
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
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)	4
Passenger 1	NAME: : HEW MOI GENDER: : FEMALE
Passenger 2	NAME: : TAN GIM BEE GENDER: : FEMALE
Passenger 3	NAME: : LIM KIM CHOOI GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	SERANGOON NORTH NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 108 SERANGOON NORTH AVENUE 1 #01-709 , POSTCODE: 550108 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2849999 - FAX NO: 63431742
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20180803/2098.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLL5975Z
Vehicle Make/Model/Colour	

Details Of Properties

Vehicle Category	PRIVATE CAR
Name of Driver	LEONG KIN KOK MICHAEL
NRIC/Passport Number	S0165543D
Contact Number	97626488
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	KHOO LENG HONG
Approximate Age	
Injuries Sustain	NECK & BACK
Injured person in which vehicle?	SKT2008E
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

DETAILS OF INJURED PERSON 2

Name	HEW MOI
Approximate Age	
Injuries Sustain	NECK & BACK
Injured person in which vehicle?	SKT2008E
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

DETAILS OF INJURED PERSON 3

Name	TAN GIM BEE
Approximate Age	
Injuries Sustain	NECK & BACK
Injured person in which vehicle?	SKT2008E
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

DETAILS OF INJURED PERSON 4

Name	LIM KIM CHOOI
Approximate Age	
Injuries Sustain	NECK & BACK
Injured person in which vehicle?	SKT2008E
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Accident Sketch Plan


SKETCH PLAN

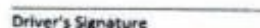
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7. By the lodgment of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.
8. **Consent under the Personal Data Protection Act (PDPA)**

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/PIN No.:

Accident Sketch Plan

SKETCH PLAN

Refer to
Attachment

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

refer to dralke police report

T 1 2018 0803 12098

DECLARATION

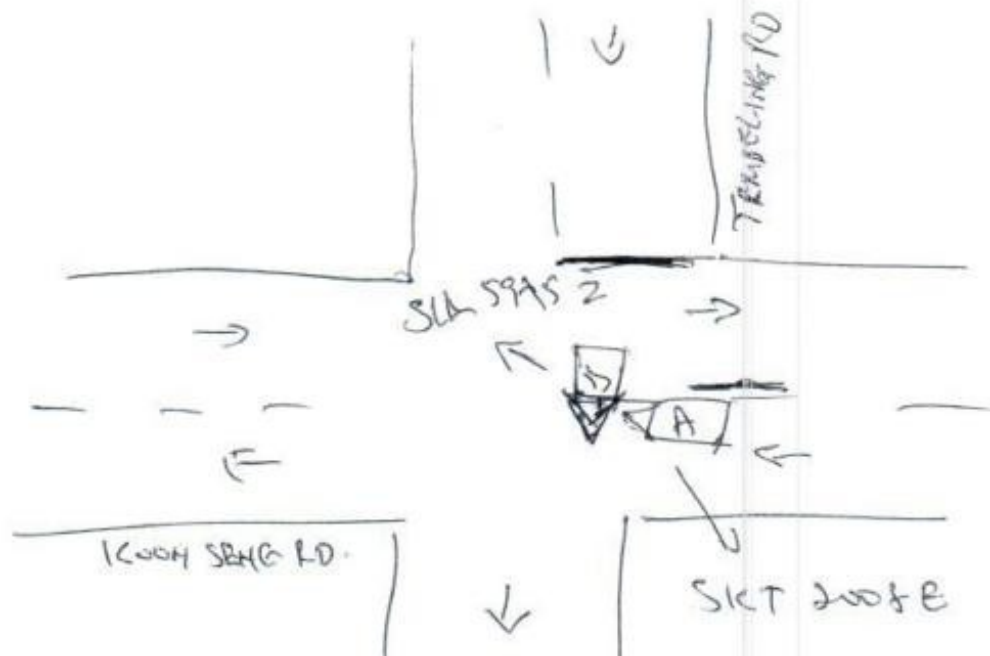
I/We declare the foregoing particulars are true in every respect.

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



Police Report



**SINGAPORE
POLICE FORCE**



T/20180803/2098

Police Station Of Origin:
Serangoon North NPP
108 Serangoon North Ave 1 #01-709
SINGAPORE 550108
Tel No: 1800-2849999

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Report No. T/20180803/2098

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 03/08/2018 16:19	Vide Report No.: G/20180802/0268	Station Diary No.: 13
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Informant's Particulars			
Name of Informant: KHOO LENG HONG		Address: APT BLK 506B SERANGOON NORTH AVENUE 4 #13-430 SINGAPORE 552506	
ID Type / ID No.: NRIC NO / S0250188J		Contact No.: Home/Office: Mobile: 90292952	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Female	Age: 74	Date of Birth: 16/09/1943	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: CHURCH		Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 02/08/2018 23:20	Type of Location: X-Junction
Location: Along Road 1 KOON SENG ROAD				
At the junction Koon Seng Road and Tembeling road				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKT2008E	Car	TOYOTA	PREMIO 1.5F A	White		3
SLL5975Z						1

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKT2008E	NTUC Income Insurance Co-Operative Limited	5072052188-02	28/10/2017	27/10/2018

Police Report



**SINGAPORE
POLICE FORCE**



T/20180803/2098

Police Station Of Origin:
Serangoon North NPP
108 Serangoon North Ave 1 #01-709
SINGAPORE 550108
Tel No: 1800-2849999

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Report No. T/20180803/2098

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Passenger			
Name	TAN GIM BEE	ID No.	S0323022H
Related Vehicle	SKT2008E (Car)	Contact No.	NIL
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	03/08/2018	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Passenger			
Name	HEW MOI	ID No.	S2735655I
Related Vehicle	SKT2008E (Car)	Contact No.	NIL
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	03/08/2018	Date Discharge	03/08/2018
No. of Days granted Medical Leave	05	Degree of Injury	NIL
Driver			
Name	KHOO LENG HONG	ID No.	S0250188J
Related Vehicle	SKT2008E (Car)	Contact No.	90292952
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	03/08/2018	Date Discharge	03/08/2018
No. of Days granted Medical Leave	04	Degree of Injury	NIL

Police Report



**SINGAPORE
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T/20180803/2098

Police Station Of Origin:
Serangoon North NPP
108 Serangoon North Ave 1 #01-709
SINGAPORE 550108
Tel No: 1800-2849999

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Report No. T/20180803/2098

CONTINUATION OF REPORT

Passenger			
Name	LIM KIM CHOOI	ID No.	S0685234C
Related Vehicle	SKT2008E (Car)	Contact No.	NIL
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	03/08/2018	Date Discharge	03/08/2018
No. of Days granted Medical Leave	05	Degree of Injury	NIL
Driver			
Name	LEONG KIN KOK MICHAEL	ID No.	S0165543D
Related Vehicle	SLL5975Z	Contact No.	97626488
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 02.08.2018 at around 2330hrs, I was driving my vehicle SKT2008E with 3 of church members travelling along Koon Seng road towards Still road. As I was driving, suddenly there was a fast oncoming vehicle SLL5975Z from the right side of Tembeling road which dashed across and hit onto my vehicle's front side. I was traumatized by the impact and the rest of my church members was observed to be injured. Both of us then shifted our vehicles to the road shoulder to prevent bus obstruction. I alighted and the said driver approached me blaming that I was in the wrong. One of my church members made a call to her son Lim Beng Heng Derrick S7419809J who made a call to the ambulance. A while later traffic police and ambulance arrived at the scene. Two were conveyed to Changi General Hospital while the other two passengers were sent by Derrick. All statements was recorded. Traffic police IO Feroz advised me to lodge an accident report. I wish to state that the said driver had admitted that it was his mistakes as he did not stop before the white line.

Police Report



**SINGAPORE
POLICE FORCE**



T/20180803/2098

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Police Station Of Origin:
Serangoon North NPP
108 Serangoon North Ave 1 #01-709
SINGAPORE 550108
Tel No: 1800-2849999

Report No. T/20180803/2098

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:
F /
Sgt 3 MUHAMMAD ASYRAF BIN ARIS

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
03/08/2018 16:19

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

Classification Of Case:

SN 154

Authentication Stamp
NP168



Signature:
Singapore Police Force

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

