

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	27/08/2018 14:24
Date Of Accident	27/08/2018 09:00
Exact Location Of Accident	ALONG AYE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGT7519L
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Insured/Policyholder

Name Of Registered Owner	LIEM YEW SIA (LIN YOUXIA)
NRIC No	S7730700A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90119825
Alternative Phone No	Office-90119825

Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	A180

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?	YES
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If No, Please state action to be taken

Vehicle Category	PRIVATE CAR
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Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	2100433048-02
Cover Note Number	

Driver

Name of Driver	LIEM YEW SIA (LIN YOUXIA)
NRIC No	S7730700A
Date Of Birth	17/10/1977
Occupation	INDOOR
Date Of Driving Pass	26/06/2006
Driving Experience	12 YEARS AND 2 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-90119825
Fax Number	
Contact Number	OFFICE-90119825
EMail Address	NOEMAIL
Address	BLK 141 PASIR RIS ST 11 #07-165
Postcode	510141
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	5
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	MARINA BAY N.P.C
Police Station Address	ROAD: 1 PRINCE EDWARD LINK , POSTCODE: 078872 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes,against whom?	

Circumstances of Accident

REFER POLICE REPORT NO: T/20180827/2011. MARINA BAY NPC.

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	SFE8129M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TOH SEO HIN

NRIC/Passport Number	S1801786E
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SLS1174H
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	SLR5482Y
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	SLB2432X
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

SKETCH PLAN

IMPORTANT NOTICE

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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 27/02018 1105


Driver's Signature

(If driver is not the policyholder)

Date & Time 27/02018 1105

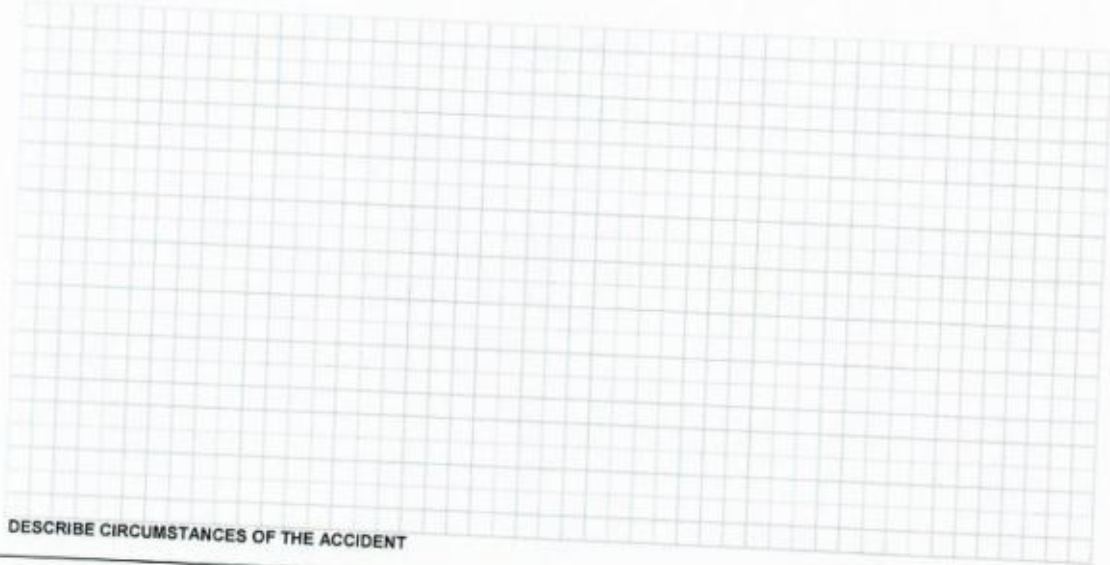
Kerlyn Ong Kai Li
DID : 6771 4420 HP : 9186 5113
Email : kerlyn.ong@cyclearrriage.com.sg
Cycle & Carriage Industries Pte Ltd
Customer Service Centre - Pandan Loop

Reporting Centre Personnel's

Name: KERLYN

NRIC/FIN No.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER TO POLICE REPORT NO. T/20180827/2011

A large rectangular box for describing the circumstances of the accident.

DECLARATION

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

Please note that you have 14 calendar days to revert and file the claim under your own policy. Failing to do so, your insurance company will not allow nor accept the claim.

(Please contact your insurance company for any further details)


Policyholder's Signature
Date & Time 27/02018 1105


Driver's Signature
(If driver is not the policyholder)
Date & Time 27/02018 1105

Kerlyn Ong Kai Li
DID : 6771 4420 HP : 9186 5113
Email : kerlyn.ong@cyclecarriage.com.sg
Cycle & Carriage Personnel Pte Ltd
Customer Service - Pandan Loop
Name: KERLYN
NRIC/FIN No.:



Police Station Of Origin:
Marina Bay N.P.C
70 Marina View SINGAPORE 018962
Tel No: 1800-2229999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 27/08/2018 09:47		Vide Report No.:		Station Diary No.: 10	
Informant's Particulars					
Name of Informant: LIEM YEW SIA		Address: APT BLK 141 PASIR RIS STREET 11 #07-165 SINGAPORE 510141			
ID Type / ID No.: NRIC NO / S7730700A		Contact No.: Home/Office: Mobile: 90119825			
Nationality: SINGAPORE CITIZEN		Email:			
Sex: Male	Age: 40	Date of Birth: 17/10/1977	Type of Informant: Driver		
Race: Chinese		Language:		Institution / School Name:	
Occupation: PROJECT MANAGER		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: 27/08/2018 09:00	Type of Location: Straight Road
Location: Along Road 1 AYER RAJAH EXPRESSWAY MCE towards AYE				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One 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
SFE8129M	Car				Slightly Damaged	0
SGT7519L	Car	MERCEDES BENZ	A180 (R17)	Blue	Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SGT7519L	AIG ASIA PACIFIC INSURANCE PTE. LTD.	2100433048-02	15/10/2017	14/10/2018

Accident Sketch Plan



SINGAPORE
POLICE FORCE



T/20180827/2011

Police Station Of Origin:
Marina Bay N.P.C
70 Marina View SINGAPORE 018962
Tel No: 1800-2229999

2 of 3

Report No. T/20180827/2011

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LIEM YEW SIA	ID No.	S7730700A
Related Vehicle	NIL	Contact No.	90119825
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 27/8/2018 at about 0900hrs I was driving along lane 1 of MCE near the Keppel Road exit. I saw a few stationary vehicles in front of me which are in my lane. I was not able to stop in time and I knocked into the rear of a white Mercedes registration plate SFE8129M. I did not sustain any injuries. I made a check on the driver and she did not sustain any injuries as well. The vehicles were stationary because there was a collision among them earlier on. I wish to state that I do not have an in car camera however I have taken pictures of the vehicles involved in the collision earlier before me. There were also LTA officers at scene.

The following vehicles involved in the collision as follows:

First car: SLS1174H
Second car: SLR5482Y
Third car: SLB2432X
Fourth car: SFE8129M

I do not know if the first 3 drivers sustained any injuries. I am lodging this report for insurance claim. That is all.

Accident Sketch Plan



SINGAPORE
POLICE FORCE



T/20180827/2011

Police Station Of Origin:
Marina Bay N.P.C
70 Marina View SINGAPORE 018962
Tel No: 1800-2229999

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Report No. T/20180827/2011

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:
A /
Sgt 2 TAMMY TAN QIYING

Signature Of Interpreter:
Not applicable

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

Signature Of Informant:

Date/Time:
27/08/2018 09:47

Classification Of Case:

Authentication Stamp

NP168



SN 173

Signature:

Signature Pn?

Accident Sketch Plan

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: **S7730700A**

Name: **LIEM YEW SIA (LIN YOUXIA)**

Birth Date: **17 Oct 1977**

Issue Date: **26 Jun 2006**

061427640C

FOR C&C USE ONLY

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S7730700A**

Name: **LIEM YEW SIA (LIN YOUXIA)**
林 尤 侠

Race: **CHINESE**

Date of birth: **17-10-1977**

Country/Place of birth: **SINGAPORE**

Sex: **M**

S7730700A

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(S)

PASS DATE

Class 3 Motor Cars <= 3000kg with <= 7 passengers, exclusive of the driver, and other motor vehicles <= 2500kg 26 Jun 2006

FOR C&C USE ONLY

NP 428A



54161

MRC No: S7730700A

REPUBLIC AUTO PTE LTD

301 ALEXANDRA ROAD

MERCEDES-BENZ CENTER

SINGAPORE 159968

TEL: 6844 4448 FAX: 6866 1717

20-09-2015

Address

APT BLK 141 PASIR RIS STREET 11

#07-166

SINGAPORE 510141

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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