

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	16/08/2018 09:28
Date Of Accident	16/08/2018 08:30
Exact Location Of Accident	QUEENSWAY TOWARDS ALEXANDRA RD
Country/State Of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKF5071A
Insured/Policyholder	
Name Of Registered Owner	LIM MENG HWA
NRIC No	S1394452J
Email Address	WEIHONG.NETLINK@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91915997
Alternative Phone No	OTHERS-97680728

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	SCIROCCO-1.4 TSI (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	5100908722
Cover Note Number	28/05/2018 - 27/05/2019

Driver

Name of Driver	LIM WEI HONG
NRIC No	S9728544F
Date Of Birth	26/08/1997
Occupation	INDOOR
Date Of Driving Pass	19/11/2015
Driving Experience	2 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97680728
Fax Number	
Contact Number	
Email Address	WEIHONG.NETLINK@GMAIL.COM

Address	BLK 416 YISHUN AVE 11 #07-365
Postcode	760416
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	CHILDREN
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	SIDE SWIPE
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?	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)	2
Passenger 1	NAME: : ONG POH HUI
	GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TANGLIN POLICE DIVISIONAL HQ ('E' DIVISION)
Police Station Address	ROAD: 21 KAMPONG JAVA ROAD , POSTCODE: 228892 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-3910000 - FAX NO: 63964900
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

MY VEHICLE WAS TRAVELLING ON THE LEFT LANE OF QUEENSWAY TOWARDS ALEXANDRA RD. TRAFFIC WAS HEAVY. VEHICLE B WAS FORCEFULLY EXITING OUT FROM THE SLIP RD AND I GIVE WAY TO VEHICLE B. VEHICLE B WAS IN FRONT OF MY VEHICLE. ABOUT THREE CARS LENGTH AWAY FROM THE SLIP RD, I DECIDED TO FILTER TO THE CENTRE LANE TO PROCEED FORWARD. AFTER I CHANGED LANE TO THE CENTRE LANE AND PROCEED FORWARD, VEHICLE B ON THE LEFT LANE ABRUPTLY CUT INTO MY LANE WITHOUT ANY SIGNAL LAMP AND HIT ONTO MY VEHICLE FRONT LEFT PORTION. AFTER THE ACCIDENT, VEHICLE B DRIVER IMMEDIATELY SHIFTED HIS VEHICLE IN FRONT OF MY VEHICLE (PHOTOS AS ATTACHED, AFTER ACCIDENT). VEHICLE B DRIVER AFTER ALIGHTING FROM HIS VEHICLE, TOLD ME TO JUST CLAIM VIA INSURANCE. VEHICLE B HAD AN IN-CAR CAMERA ON BOARD HIS VEHICLE.

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	SHC3520K
Vehicle Make/Model/Colour	MERCEDES BENZ TAXI
Details Of Properties	REAR RIGHT PORTION
Vehicle Category	TAXI

Name of Driver	LOH
NRIC/Passport Number	
Contact Number	98190728
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Sketch Plan Pg. 1

NTUC Income Motor Service Centre

Report No/ MT

D.O.A

Vehicle No

Make Model

Report Date: 8/16/2018 Start Time: 10:11 AM

Reporting Type: 7P End Time:

SKETCH PLAN

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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.
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/are 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 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 reasonable required for the purposes stated; or
 - (ii) for complying with requirements under any regulations, law or court orders;

8/16/2018 10:09

Policyholder's Signature
Date & Time:

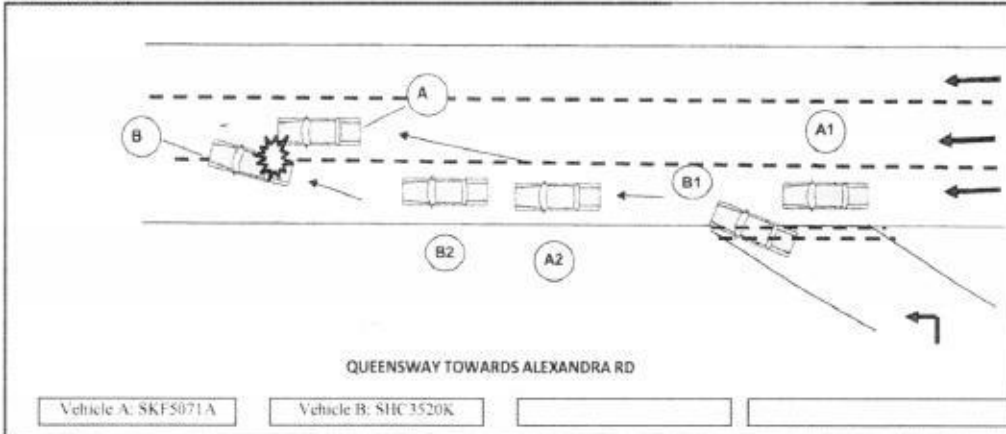
8/16/2018 10:09

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

Reporting Centre Personnel's Signature
Name: Chen JunLiang
NRIC Fin No: S990765

Sketch Plan Pg. 2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

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DECLARATION

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

8/16/2018 10:09

Policyholder's Signature
Date & Time:

8/16/2018 10:09

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

Reporting Centre Personnel's Signature
Name: Chen Jun Liang
NRIC/Fin No: S990765



**SINGAPORE
POLICE FORCE**



E/20180816/7005

1 of 2

POLICE REPORT (NP299)

Report No. E/20180816/7005

Police Station Of Origin
Tanglin Police Divisional HQ
21 Kampong Java Road SINGAPORE
228892
Tel No:1800-3910000

Date/Time Report Made 16/08/2018 10:02	Vide Report No.	Station Diary No.
Name Of Informant LIM WEI HONG	Address APT BLK 416 YISHUN AVENUE 11 #07-365 SINGAPORE 760416	
ID Type / ID No. NRIC NO / S9728544F	Contact No. Home/Office: Mobile: 97680728	
Nationality SINGAPORE CITIZEN	Email Address limweihong_zen@hotmail.com	
Occupation Sales and marketing manager	Sex Male	Age 20
Institution/School Name	Date of Birth 26/08/1997	Race Chinese
Date/Time Of Incident 16/08/2018 08:30 - 16/08/2018 08:35	Location Of Incident QUEENSWAY	
Brief details.		

I was travelling along queensway towards Alexandra on the centre lane of a three lane carriageway. A taxi, abruptly cut into my lane from the left without signalling intention. His act of carelessness resulted in a collision. He shifted his vehicle after the collision, which lead me to suspect he is out to cheat the claims from insurance as the moment he alighted from his vehicle, he told me loudly to make an accident report and claim.

There was a LTA surveillance camera along the road I was travelling.

My vehicle no.: SKF5071A

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: 16/08/2018 10:02
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp



**SINGAPORE
POLICE FORCE**



E/20180816/7005

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. E/20180816/7005

Other Party veh no.: SHC3520K

Subjects Involved			
Victim			
Person Name	LIM WEI HONG		
ID Type	NRIC NO	ID No	S9728544F
Gender	Male	Age	20
Race	Chinese	Language	English
Occupation	Sales and marketing manager		
Address	APT BLK 416 YISHUN AVENUE 11 #07-365 SINGAPORE 760416	Mobile No	97680728
Is Informant A Victim?	Yes		
Person Name	LIM WEI HONG (Informant)		

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: 16/08/2018 10:02
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	