### 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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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

aforesaid.	sent to the archiving of this report at the centre and to copies of the report being made available
	ACCIDENT STATEMENT
Date Of Report	01/09/2018 16:23
Date Of Accident	24/08/2018 13:20
Exact Location Of Accident	JUNC OF PAYA LBAR ROAD TOWARD TAISENG &UBI AVE 2
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	GW9489K
Insured/Policyholder	
Name Of Registered Owner	BK PNEUMATICS & CONTROLS PTE LTD
Co Reg No	201600156H
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-84489788
Vehicle Particulars	
Manufacturer	ТОУОТА
Model	LITEACE 5DR
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	REPORTING ONLY
Vehicle Category	COMMERCIAL VEHICLE
Insurance Company	
Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	DMCPHQ17-002990
Cover Note Number	
Driver	
Name of Driver	LEE JIN
NRIC No	S2010217I

 Name of Driver
 LEE JIN

 NRIC No
 \$2010217I

 Date Of Birth
 \$11/02/1949

 Occupation
 INDOOR

 Date Of Driving Pass
 \$19/08/1969

Driving Experience 49 YEARS AND 0 MONTHS

Gender MALE

Mobile Number (LOCAL) +65-86001558

Fax Number

Contact Number

EMail Address SAYANG1977@HOTMAIL.COM

APT BLK 123 MARSILING RISE #05-86 SINGAPORE 730123

Address

Postcode

Was driver an employee of the Insured's Company YES

If No, Relationship of the Driver with the Insured

Vehicle Registration Number of Driver's Own

Vehicle

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Insurance Company of Driver's Own Vehicle

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#### **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 2 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.

Number of Passengers (Including Driver)

#### **Details of Police Action**

Was the accident reported to the police? YES

If Yes, Please state which Police Station

POLICE STATION NAME [OTHER] WOODLANDS EAST N.P.C.

Was notice of intended Prosecution given? NO

If Yes, against whom?

### **Circumstances of Accident**

REFER TO POLICE REPORT NO:T/20180825/2024 LODGED AT WOODLANDS EAST N.P.C. ON 24/08/2018 AT ABOUT 1320HRS, I WAS DRIVING MY VAN (GW9489K) ALONG LANE 2 OF PAYA LEBAR ROAD TOWARD TAISENG, AS I WAS HEADING TO KAMPONG UBI INDUSTRIAL ESTATE TO COLLECT DELIVERY. THERE IS A JAM AT THE AREA. ABOUT 15M BEFORE THE JUNCTION OF PAYA LEBAR ROAD TOWARDS TAISENG AND UBI AVE 2, I HAD STOP AS THERE WERE STILL MANY VEHICLES IN FRONT OF ME AND I HAD TO WAIT FOR THEM TO MOVE. SUDDENLY, I FELT A SLIGHT JERK FROM MY VAN. I EXITED MY VAN TO CHECK WHAT HAD HAPPENED AND REALIZE THAT THE FRONT OF A CAR (SJV3482M) HAD HIT ONTO THE REAR OF MY VAN . THE DRIVER OF THE CAR ALSO EXITED HIS CAR. WE DID A BRIEF CHECK ON OUR CARS AND THEN EXCHANGED HAND PHONE NUMBERS. HE INTRODUCED HIMSELF AS MR TAN HP:92977075. I ALSO CHECKED AND SAW THAT THE BACK OF MY VAN HAD ONLY MINOR SCRATCHES. NO ONE WAS INJURED DURING THE ACCIDENT. THE CHECK AND EXCHANGE OF PARTICULARS ONLY TOOK ABOUT 2-3 MINS. WE BOTH THEN LEFT THE SCENE.

### 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 SJV3482M

Vehicle Make/Model/Colour MERCEDES BENZ/E 250CGI COUPE/RED

**Details Of Properties** 

Vehicle Category PRIVATE CAR

Name of Driver TAN

NRIC/Passport Number

Contact Number 92967075

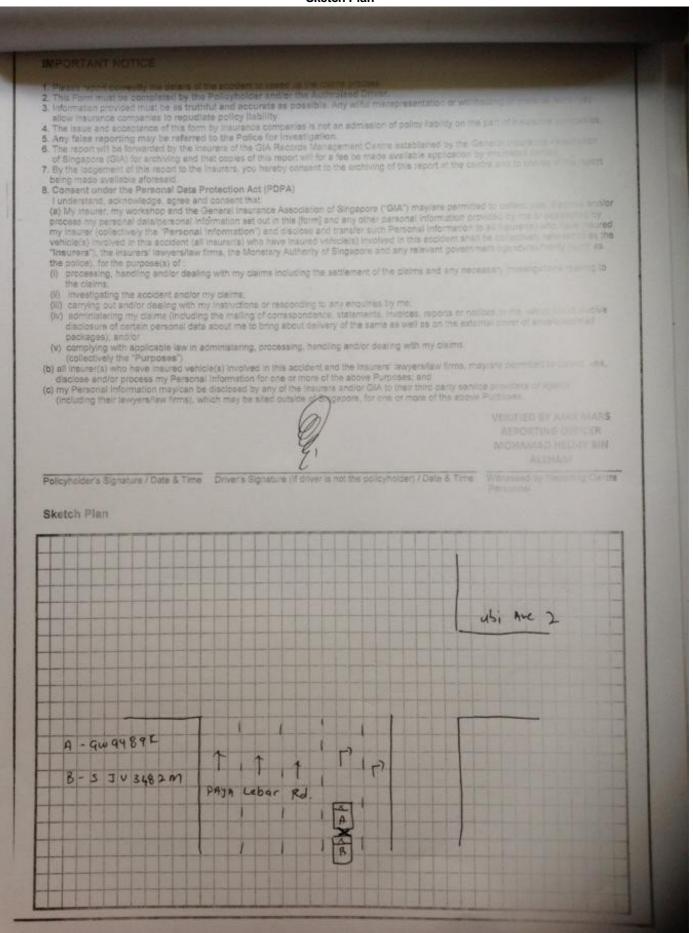
Address Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

#### **Sketch Plan**



### **POLICE REPORT**





Police Station Of Origin: Woodlands East N.P.C. 3 Woodlands Drive 63 SINGAPORE 737890 Tel No: 1800-7679999

Report No. T/20180825/2024

## REPORT OF A TRAFFIC ACCIDENT

The second second second second	ate/Time Report Made: 5/08/2018 09:18		Vide Report No.:	Station Diary No.: 61	
Informa	nt's Partice	ulars		The second second	
Name of LEE JIN	Informant:		Address: APT BLK 123 MARSILING RIS	E #05-86 SINGAPORE 730123	
The second secon	/ ID No.: D / S20102	171	Contact No.: Home/Office:	Mobile: 86001558	
National	ity: ORE CITIZ	EN	Email:		
Sex: Male	Age: 69	Date of Birth: 11/02/1949	Type of Informant. Driver		
Race: Chinese			Language:	Institution / School Name:	
Occupati			Driving Licence Information: Class: 3	Date of Expiry:	

Type of Accident:	Non-Injury Others	Drir Driv No	/e:	Date/Time of Accident: 24/08/2018 13:20	Type of Location: X-Junction	
PAYA LEBAR		D TOWARDS 1 Road Surf	AISE	NG, AND UBI AVE 2	Road Speed Limit	
Clear Traffic Flow:	Traff		ntrol:	/orking	Traffic Volume: Heavy	
One Way  Type of Collis  Retween Mov	ion: ing Vehicles - Head 1			WEIGHT CO.	Anyone conveyed by ambulance:	

Details of Ve	enicle invo	IVEU	Model	Color	Condition	No of Passenger
Vehicle No.	Type	Make	Model		Slightly	0
GW9489K	Van	TOYOTA		Silver	Damaged	100
	THE STATE OF THE S		Red	Slightly	0	
SJV3482M	Car	MERCEDES BENZ	1100	Damaged		

Details of Person Involved	
Any Pedestrian Involved: No	Use of Pedestrian Crossing: NA
No. of Pedestrians Injured: NIL	Use of Federalian Grossing

### POLICE REPORT



T/20180825/2024

Police Station Of Origin: Woodlands East N.P.C. 3 Woodlands Drive 63 SINGAPORE 737890 Tel No: 1800-7679999

2 of 3 Report No. T/20180825/2024

CONTINUATION OF REPORT

Driver						
Name	LEE JIN		ID No.		S20102171	
Related Vehicle	GW9489K (Van)		Conta	ct No.	86001558	
Hospital/Clinic	NIL		Class Drivin Licens Expiry	g ce &	Class: 3 Date of Expiry: NIL	
Date Treatment	NIL		Date Disc	harge	NIL	
No. of Days granted Medical Leave		NIL	Degree of Injury NIL			

### Brief Details.

On 24/08/2018 at about 1320hrs, I was driving my van (GW9489K) along lane 2 of Paya Lebar Road towards Taiseng, as I was heading to Kampong Ubi Industrial Estate to collect delivery. There is a jam at the area

About 15m before the junction of Paya Lebar Road towards Taiseng and Ubi Ave 2, I had to stop as there were still many vehicles in front of me, and I had to wait for them to move. Suddenly, I felt a slight jerk from my van. I exited my van to check what had happened, and realize that the front of a car (SJV3482M) had hit onto the rear of my van. The driver of the car also exited his car. We did a brief check on our cars and then exchanged hand phone numbers. He introduced himself as Mr Tan, Hp. 92977075. I also checked and saw that the back of my van had only minor scratches.

No one was injured during the accident.

The check and exchange of particulars only took about 2-3mins. We both then left the scene.

### **POLICE REPORT**



Police Station Of Origin: Woodlands East N.P.C. 3 Woodlands Drive 63 SINGAPORE 737890 Tel No: 1800-7679999



Report No. T/20180825/2024

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:  J /  EISEN MAH SHI YAO
	Signature Of Interpreter: Not applicable
10000	Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151 SN 130
AN	Singapore Police Force

Signature Of Info	rmant:	
Date/Time: 25/08/2018 09:1	8	
Classification C	f Case:	_



















# **Driving License**



**Driving License** 

