

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 liability.
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	09/10/2018 18:45
Date Of Accident	09/10/2018 09:30
Exact Location Of Accident	ALONG ROAD 1 PAN ISLAND EXPRESSWAY
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJY4646K
Insured/Policyholder	
Name Of Registered Owner	ALATAS SINGAPORE PTE LTD
Co Reg No	200007503W
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-64693911

Vehicle Particulars

Manufacturer	AUDI
Model	A4 1.8 TFSI MU
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	5077401437-02
Cover Note Number	

Driver

Name of Driver	GISBERT LUNDA
Passport No/FIN	S2723908J
Date Of Birth	25/01/1960
Occupation	INDOOR
Date Of Driving Pass	12/04/2012
Driving Experience	6 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97360225
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	210 LOYANG AVENUE #01-03
Postcode	509063
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	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

General Information of the Accident

Type Of Accident	COLLISION - HEAD TO REAR
Weather Conditions	RAINING
Road Surface	WET

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?	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	CLEMENTI N.P.C
Police Station Address	ROAD: 20 CLEMENTI AVE 5 , POSTCODE: 129858 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO THE SKETCH PLAN AND POLICE REPORT . T/2018009/2105

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	SLQ6709T
Vehicle Make/Model/Colour	PEUGEOT / WHITE
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LIM SIAN RONG SASON
NRIC/Passport Number	S8219867I
Contact Number	93201182
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SKT5876X
Vehicle Make/Model/Colour	MAZDA 3
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


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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: WONG KHENG SEN, GEORGE
NRIC/FIN No.: 62787143X



Sketch Plan #2

SKETCH PLAN

A	SKT5876X
B	SU 4646K
C	SLG 6709T

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Please refer to the police report NO. T/2018/009/205

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: *Wong Han Sheng, Henry*
NRIC/FIN No.: *G21871432*



Police Report



**SINGAPORE
POLICE FORCE**



T/20181009/2105

Police Station Of Origin:
Clementi N.P.C
20 Clementi Avenue 5 SINGAPORE 129858
Tel No: 1800-8729999

1 of 4

Report No. T/20181009/2105

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 09/10/2018 15:12	Vide Report No.:	Station Diary No.: 124
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Informant's Particulars:			
Name of Informant: GISBERT LUNDA		Address: 210 LOYANG AVENUE #01-03 SINGAPORE 509063	
ID Type / ID No.: NRIC NO / S2723008J		Contact No.: Home/Office: Mobile: 97360225	
Nationality: AUSTRIAN		Email:	
Sex: Male	Age: 58	Date of Birth: 25/01/1960	Type of Informant: Driver
Race: Caucasian		Language: English	Institution / School Name:
Occupation: WORKSHOP TECHNICAL DIRECTOR		Driving Licence Information: Class: 3 Date of Expiry:	

Scene Information on Accident:				
Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 09/10/2018 09:30	Type of Location: Y-Junction
Location: Along Road 1 PAN ISLAND EXPRESSWAY PIE towards Tuas, near to Exit 17, Lane 1				
Weather: Drizzling		Road Surface: Wet		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						
Registration No.	Vehicle	Make	Model	Color	Condition	No. of Passengers
SJY4848K	Car	AUDI	A4	White	Slightly Damaged	0
SKT5876X	Car	MAZDA	Mazda 3	Red	Slightly Damaged	0
SLQ8709T	Car	PEUGEOT	White	White	Slightly Damaged	0

Police Report



**SINGAPORE
POLICE FORCE**



T/20181009/2105

2 of 4

Police Station Of Origin:

Clementi N.P.C

20 Clementi Avenue 5 SINGAPORE 129858

Tel No: 1800-8729999

Report No. T/20181009/2105

CONTINUATION OF REPORT

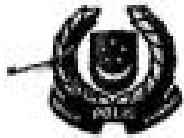
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Name	GISBERT LUNDA	ID No.	S2723908J
Related Vehicle	SJY4646K (Car)	Contact No.	97360225
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Name	AZHAKAN KUMARATH KOCHUMADHAVAN	ID No.	S2638389G
Related Vehicle	SKT5876X (Car)	Contact No.	91013971
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
Name	LIM JIAN RONG JASON	ID No.	S8218867I
Related Vehicle	SLQ6709T (Car)	Contact No.	93201182
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 09/10/2018 at about 0930hrs, I was driving my company car a white Audi A4 with registration number SJY4646K along PIE (Tuas) on the extreme right lane. The road surface was wet and it was drizzling.

When I was near to Toa Payoh Exit (Exit 17), the traffic was congested and I was prepared to stop. I was driving behind a red Mazda 3 with registration number SKT5876X and I started to slow down. As I came to stop behind the red Mazda, there was an impact coming from the rear of my vehicle nudging me forward, colliding into the rear of the red Mazda in front of me.

Police Report



**SINGAPORE
POLICE FORCE**



T/20181009/2105

3 of 4

Police Station Of Origin:

Clementi N.P.C

20 Clementi Avenue 5 SINGAPORE 129858

Tel No: 1800-8729999

Report No. T/20181009/2105

CONTINUATION OF REPORT

After the collisions, I alighted from my vehicle to make a check. I discovered that it was a chain accident involving 3 cars which I was positioned in the middle. The car that collided into mine was a white Peugeot with registration number SLQ6709T driven by a young man named Jason. The driver of the red Mazda also came down and spoke to us.

The red Mazda suffered a scratch about 2cm long. The white Peugeot behind me suffered scratches on the front bumper at the lower right and a damaged registration plate holder. The damages to my car was a dented rear trunk, a faulty left tail light and there were rattling noise coming from the rear. The white Peugeot driver was on the phone after the accident.

Soon after, a man came and he approached us. He introduced himself as a Derrick and he claimed to own a car workshop which he may be able to render assistance to us. He provided his name cards to me. The man had given me 2 name cards which bears his name Derrick Lim HP: 82689809 however belonged to different companies at the same area. I suspect that the white Peugeot driver and Derrick Lim are acquaintance.

Subsequently, a red tow truck arrived and the tow truck driver approached us and he only asked me if I needed tow truck service to tow my vehicle to a workshop. I refused the offer and managed to exchange particulars with the respective drivers. After the exchange of particulars, we left the accident location separately.

There is no camera in my car. I do not know if the other 2 cars has cameras installed. I think that there might be CCTVs in the vicinity. No one was injured and no police was called in.

Police Report



**SINGAPORE
POLICE FORCE**



T/20181008/2105

4 of 4

Police Station Of Origin:
Clementi N.P.C
20 Clementi Avenue 5 SINGAPORE 129858
Tel No: 1800-8729999





Report No. T/20181008/2105

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 85474885 stating the report number as reference.

Signature Of Officer Recording The Report: D / Sgt 2 JAVIN ANG YEE PING 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 09/10/2018 15:12
Officer In Charge Of Case: TP / GIA / Staff Sgt WONG SIEU LUI Contact No.: 65476151	Classification Of Case:
Authentication Stamp NP168 	SN 27
 SIGNATURE	

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



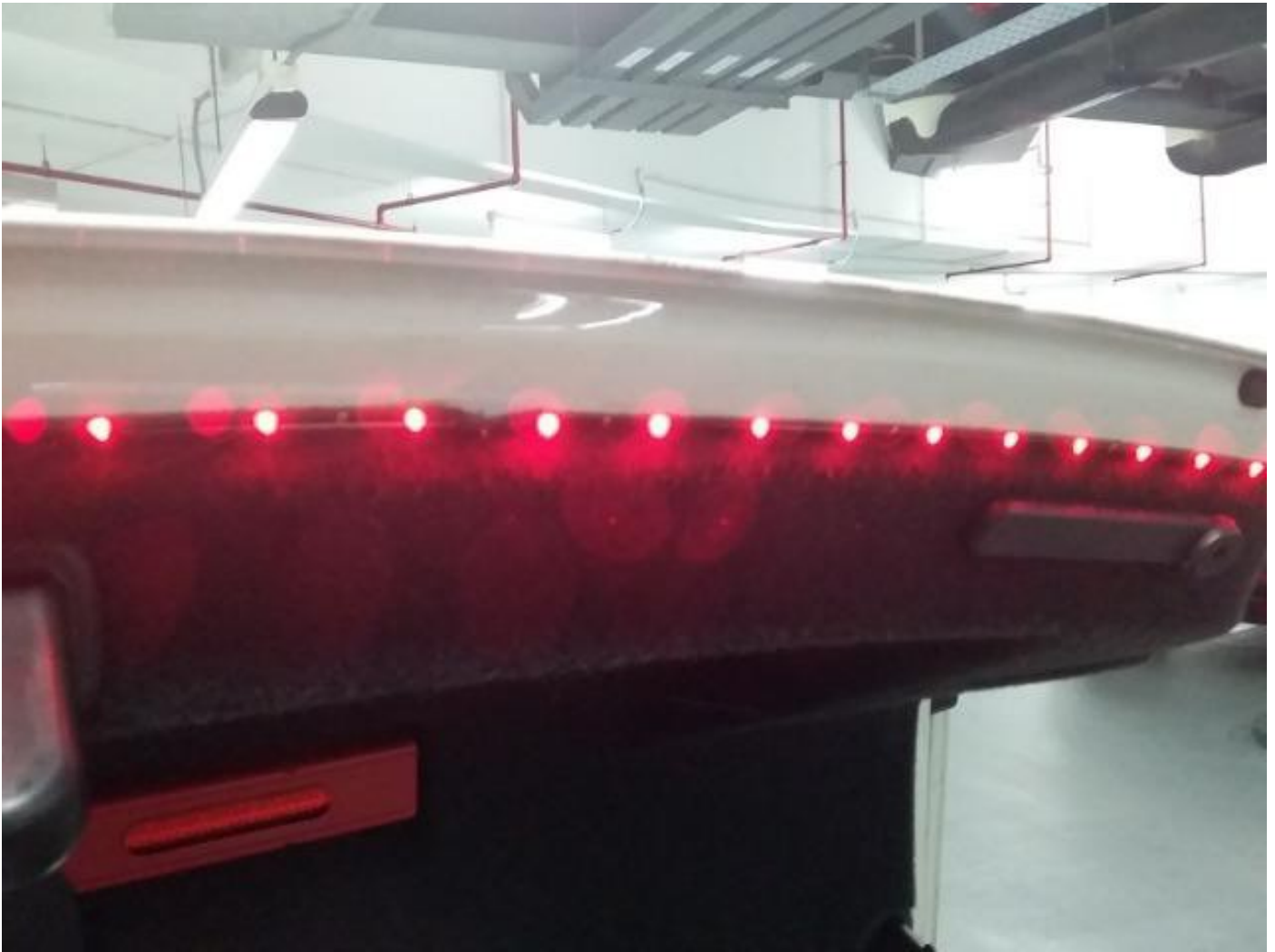
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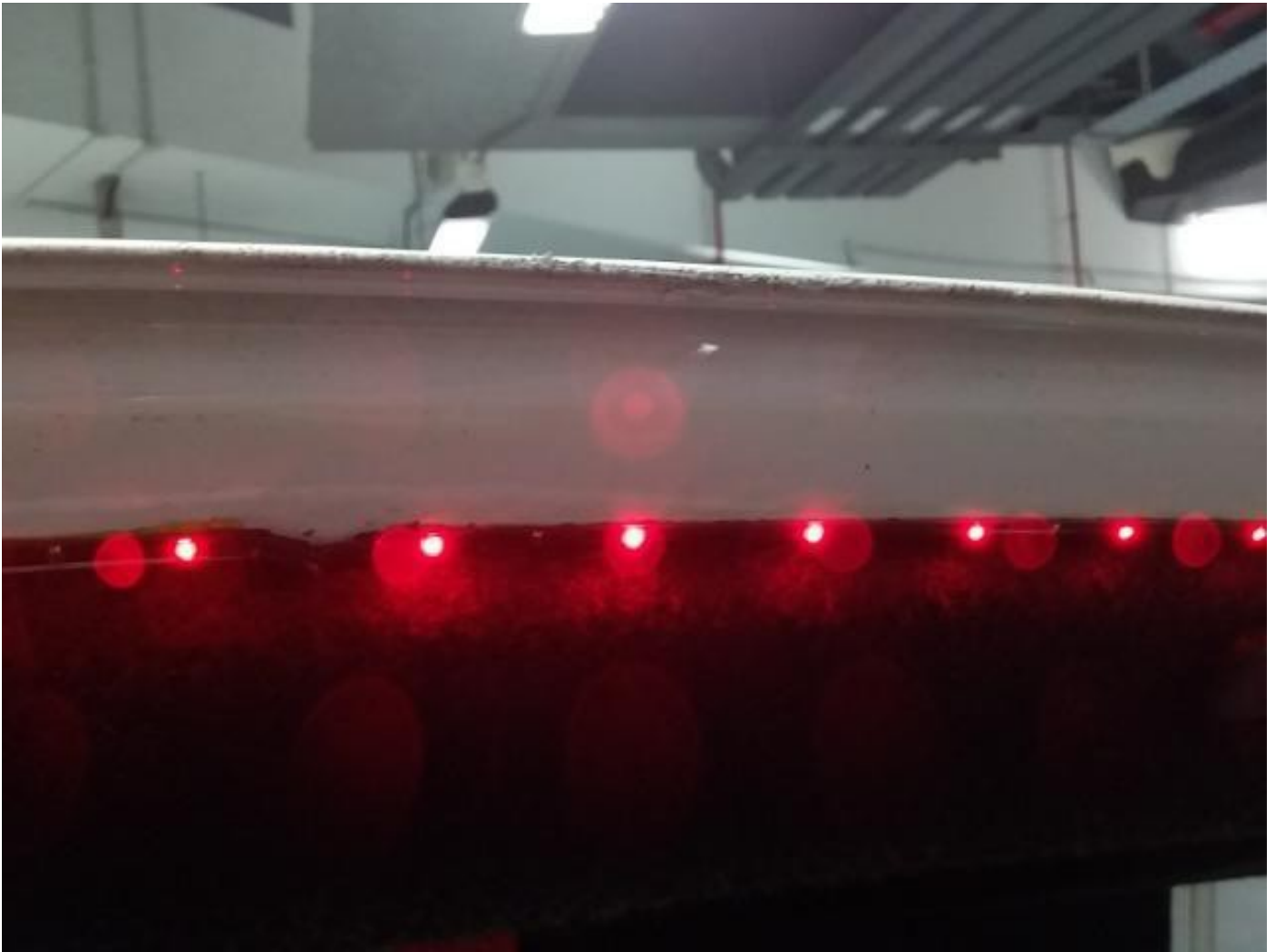
Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



