

## 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	04/10/2018 21:57
Date Of Accident	04/10/2018 09:10
Exact Location Of Accident	ALONG WOODLANDS AVE 12
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBE7351R
<b>Insured/Policyholder</b>	
Name Of Registered Owner	GOLDBELL LEASING PTE LTD
Co Reg No	199001196N
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-64942833

### Vehicle Particulars

Manufacturer	TOYOTA
Model	HIACE-3.0 D DX (M)
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?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	YES
Policy Number	29004183
Cover Note Number	

### Driver

Name of Driver	GOH CHIN SIEN
NRIC No	S7642656B
Date Of Birth	29/12/1976
Occupation	OUTDOOR
Date Of Driving Pass	21/09/1998
Driving Experience	20 YEARS AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96911617
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 217C SUMANG WALK #15-216
Postcode	823217
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - LESSEE
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	COLLISION - CHANGE/CROSS LANE
Weather Conditions	CLEAR
Road Surface	DRY

#### 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?	
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 NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> NO. 20 CLEMENTI AVENUE 5 , <b>POSTCODE:</b> 129858 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-8729999 - <b>FAX NO:</b> 67748639
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO POLICE REPORT NO. T/20181004/2083 :- ON 4TH OCTOBER 2018 AT ABOUT 0910HRS, I WAS DRIVING MY VEHICLE GBE7351R ALONG WOODLANDS AVE 12 TOWARDS CTE. THERE WAS A TRAFFIC JAM DUE TO PEAK PERIOD AND I WAS ON THE RIGHT MOST LANE GOING STRAIGHT TOWARDS SLE/BKE. AFTER WHICH, TWO VEHICLES ON MY LEFT SIGNALLED RIGHT SO I ALLOWED THEM TO PROCEED IN FRONT OF ME. SUBSEQUENTLY, ANOTHER THIRD VEHICLE ABRUPTLY CUT ONTO MY LANE HITTING MY FRONT LEFT DOOR, LEFT SIDE MIRROR AND FENDER. I THEN FOLLOWED HIM THINKING HE WOULD STOP AHEAD BUT HE DID NOT STOP. I MANAGE TO RETRIEVE HIS VEHICLE REGISTRATION NUMBER AS SKT1639R (DARK BLU COLOURED TOYOTA HARRIER). I HAVE A CAMERA INSIDE MY CAR AND I AM ABLE TO SUBMIT THE FOOTAGE IF NECESSARY. MY VAN SUFFERED SCRATCHES AND DENTS ON THE FRONT LEFT SIDE. MY LEFT SIDE MIRROR'S COVER CAME OFF AS WELL. NO ONE WAS INJURED.

#### 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	SKT1639R
Vehicle Make/Model/Colour	TOYOTA / HARRIER
Details Of Properties	VEH B
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**

**IMPORTANT NOTICE**

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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:

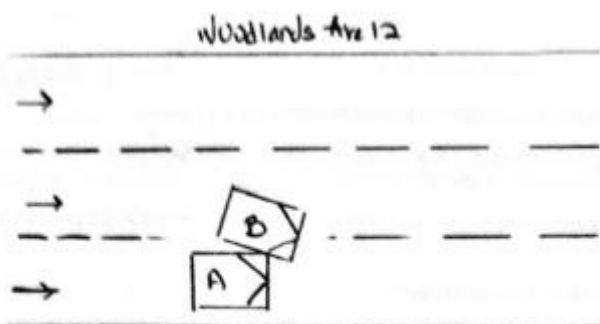
A

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



Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

### SKETCH PLAN



Yoh A. GBE 7351 R  
B: SKT 1639 R

**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

Refer to police report ref: T/20181004/2083 dd 10/4/18

DECLARATION  
I/We declare the foregoing

### DECLARATION

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



Policyholder's Signature  
Date & Time:

A

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

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:

# Police Report



**SINGAPORE  
POLICE FORCE**



T/20181004/2083

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

1 of 3

Report No. T/20181004/2083

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 04/10/2018 14:01	Vide Report No.:	Station Diary No.: 108
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### Informant's Particulars

Name of Informant: GOH CHIN SIEN			Address: APT BLK 217C SUMANG WALK #15-216 SINGAPORE 823217	
ID Type / ID No.: NRIC NO / S7642656B			Contact No.: Home/Office: Mobile: 96911617	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 41	Date of Birth: 29/12/1976	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: DELIVERY DRIVER			Driving Licence Information: Class: 2B,3	Date of Expiry:

### General Information of the Accident

Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 04/10/2018 09:10	Type of Location: Straight Road
Location: Along Road 1 WOODLANDS AVENUE 12				
Along Woodlands Avenue 12 towards SLE/BKE				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Heavy
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
GBE7351R	Van				Slightly Damaged	0

## Police Report



**SINGAPORE  
POLICE FORCE**



T/20181004/2083

2 of 3

Police Station Of Origin:

Clementi N.P.C

20 Clementi Avenue 5 SINGAPORE 129858

Tel No: 1800-8729999

Report No. T/20181004/2083

### CONTINUATION OF REPORT

#### Brief Details.



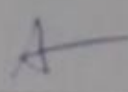
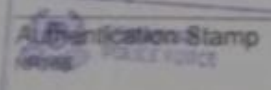
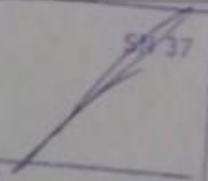
On 4th October 2018 at about 0910hrs, I was driving my vehicle bearing registration number GBE7351R along Woodlands Avenue 12 towards CTE. There was a traffic jam due to peak period and I was on the right most lane going straight towards SLE/BKE. After which, two vehicles on my left signalled right so I allowed them to proceed in front of me. Subsequently, another third vehicle abruptly cut onto my lane hitting my front left door, left side mirror and fender.

I then followed him thinking he would stop ahead but he did not stop. I manage to retrieve his vehicle registration number as SKT1839R (Dark blue coloured Toyota Harrier). I have a camera inside my car and I am able to submit the footage if necessary.

My van suffered scratches and dents on the front left side. My left side mirror's cover came off as well. No one was injured.



# Police Report

 <b>SINGAPORE POLICE FORCE</b>		 T:20181004/2083
Police Station Of Origin: Clementi N.P.C 20 Clementi Avenue 5 SINGAPORE 129858 Tel No: 1800-8729999		3 of 3 Report No: T:20181004/2083
CONTINUATION OF REPORT		
<b>Sketch Plan</b> Informant is not able to provide sketch plan		
<p>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 <u>report number</u> as reference.</p>		
Signature Of Officer Recording The Report: D / Sgt 2 KHAIRUL ANWAR LLOVIDO BIN JOHARI	Signature Of Informant: 	
Signature Of Interpreter: Not applicable	Date/Time: 04/10/2018 14:01	
Officer In Charge Of Case: TP / HRT / SI KALESWARI PALANI Contact No: 65476902	Classification Of Case:	
  SIGNATURE		



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





## Driving License

**REPUBLIC OF SINGAPORE**  
IDENTITY CARD NO. **S7642656B**

Name: **GOH CHIN SIEN**

Race: **CHINESE**

Date of birth: **29-12-1976** Sex: **M**

Country of birth: **SINGAPORE**

3992105

NRIC No. **S7642656B**

Date of issue: **22-01-2007**

APT BLK 217C SUMANG WALK #15-218  
SINGAPORE 823217

NRIC No: **S7642656B** Date: **18/08/2016**

**REPUBLIC OF SINGAPORE DRIVING LICENCE**

NRIC Number: **S7642656B**

Name: **GOH CHIN SIEN (WU ZHENGXIAN)**

Birth Date: **29 Dec 1976**

Issue Date: **26 Aug 2003**

00007728348

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASSES

Class	Description	PASS DATE
Class 2B	Motorcycles not exceeding 200 cc	18 Sep 1995
Class 3	Motor Cars and Motor Tractors the weight of which unladen does not exceed 3,500 kilograms	21 Sep 1998

NP 428A

Licence No: **S7642656B**

CLASS 3 ~ 21 SEP 1998