

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	07/12/2018 10:05
Date Of Accident	06/12/2018 17:00
Exact Location Of Accident	PIE (CHANGI) NEAR L/P:434
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJR3004G
Insured/Policyholder	
Name Of Registered Owner	FISHING BEE
Co Reg No	53369233D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96505845
Alternative Phone No	OFFICE-96505845

Vehicle Particulars

Manufacturer	KIA
Model	CERATO FORTE 1.6(A) SX ABS D/AB 2WD 4DR
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL 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 HIRE

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5093724296
Cover Note Number	

Driver

Name of Driver	LIM HONG BEE (LIN FENGMEI)
NRIC No	S7108452C
Date Of Birth	03/03/1971
Occupation	OUTDOOR
Date Of Driving Pass	03/11/2000
Driving Experience	18 YEARS AND 1 MONTH
Gender	FEMALE
Mobile Number	(LOCAL) +65-96505845
Fax Number	
Contact Number	OFFICE-96505845
Email Address	NOEMAIL

Address	BLK 214 SERANGOON AVENUE 4 #04-104
Postcode	550214
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	DRIZZLING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles involved in the accident	4
Was any body injured in the Accident?	YES
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)	3
Passenger 1	NAME: : - GENDER: : MALE
Passenger 2	NAME: : - GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	SERANGOON NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 50 SERANGOON AVE 2 #01-02 , POSTCODE: 556129 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4880999 - FAX NO: 64883561
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20181206/2182.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	VIDEO FOOTAGE WITH DRIVER
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJV6809K
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR

Name of Driver	GOH TOH JIEW
NRIC/Passport Number	S0098755G
Contact Number	90610299
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SJL5261Z
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ONG BING SOON
NRIC/Passport Number	S8850560C
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number	SLG6895R
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	IBRAHIM BIN SUANT
NRIC/Passport Number	S1681055Z
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	LIM HONG BEE (LIN FENGMEI)
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SJR3004G
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Accident Sketch Plan

SKETCH PLAN

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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.

FISHING BEE
Co Reg No: 53369233D

Policyholder's Signature
Date & Time:

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

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

Accident Sketch Plan

SKETCH PLAN

PHE (charging)

A

B

C

D

A: SJR30046

B: SJW809K

C: SA5761Z

D: AL6805R

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report - 7/5/18/206/2182.

DECLARATION

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

FISHING BEE
Co Reg No: 53369233D

Policyholder's Signature
Date & Time:

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

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

Q2018AC (Accident Report Form) 1/3

Police Report



**SINGAPORE
POLICE FORCE**



T/20181206/2182

Police Station Of Origin:
Serangoon N.P.C
50 Serangoon Avenue 2 #01-02 SINGAPORE
556129
Tel No: 1800-4880999

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Report No: T/20181206/2182

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 06/12/2018 22:15	Vide Report No.:	Station Diary No.: 76
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Informant's Particulars			
Name of Informant: LIM HONG BEE		Address: APT BLK 214 SERANGOON AVENUE 4 #04-104 SINGAPORE 550214	
ID Type / ID No.: NRIC NO / S7108452C		Contact No.: Home/Office: Mobile: 96505845	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Female	Age: 47	Date of Birth: 03/03/1971	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: GRAB DRIVER		Driving Licence Information: Class: Date of Expiry:	

General Information of the Accident				
Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 06/12/2018 17:00	Type of Location: Straight Road
Location: Along Road 1 PAN ISLAND EXPRESSWAY Towards Airport, L/P 434				
Weather: Drizzling		Road Surface: Wet	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
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
SJL5261Z	Car	HONDA	FIT 1.3G A	Blue	Slightly Damaged	0
SJR3004G	Car	KIA	CERATO FORTE 1.6(A) SX ABS D/AB 2WD 4DR	Maroon	Slightly Damaged	2
SJV6809K	Car	TOYOTA	RUSH 1.5X A	Red	Slightly Damaged	0

Police Report



**SINGAPORE
POLICE FORCE**



T/20181206/2182

Police Station Of Origin:
Serangoon N.P.C
50 Serangoon Avenue 2 #01-02 SINGAPORE
556129
Tel No: 1800-4880999

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Report No. T/20181206/2182

CONTINUATION OF REPORT

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLG6895R	Car	KIA	CERATO FORTE Koup 1.6 AT SX ABS D/AB SR	Black	Slightly Damaged	0

Details of Person Involved					
Any Pedestrian Involved: No					
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA		
Driver:					
Name	ONG BING SOON		ID No.	S8850560C	
Related Vehicle	SJL5261Z (Car)		Contact No.	NIL	
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
Driver:					
Name	LIM HONG BEE		ID No.	S7108452C	
Related Vehicle	SJR3004G (Car)		Contact No.	96505845	
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL		Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL	
Date Treatment	06/12/2018		Date Discharge	06/12/2018	
No. of Days granted Medical Leave		05	Degree of Injury		Slight
Driver:					
Name	GOH TOH JEW		ID No.	S0098755G	
Related Vehicle	SJV6809K (Car)		Contact No.	90610299	
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

Police Report



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T/20181206/2182

Police Station Of Origin:
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50 Serangoon Avenue 2 #01-02 SINGAPORE
556129
Tel No: 1800-4880999

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Report No. T/20181206/2182

CONTINUATION OF REPORT

Name	IBRAHIM BIN SUANT	ID No.	S1681055Z
Related Vehicle	SLG6895R (Car)	Contact No.	NIL
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 06/12/2018 at around 1700hrs, I was driving my vehicle SJR3004G along PIE towards Changi side. There weather was drizzling, the road was wet and the traffic was moderate.

The vehicle in front of me jammed break which cause me to sudden break in order not to hit onto the front vehicle. I managed to avoid and my vehicle stopped for 2 second as I was in a shock. Out of sudden, I felt a few impact coming from the rear, the impact was moderate.

There were 2 passengers inside my vehicle, I made a check on them and luckily they were not injured. I make a check with other driver and they were exchanging particular and taking photos of the incident. The Traffic Police came by to assist on the incident. I left when the officer informed to leave as the traffic was been obstructed by us. I proceeded to the airport to send my passengers to the designation.

I felt pain at my stomach area and went to hospital at Mount Alvernia for a check. The doctor informed could be a muscle injury from the accident. I was given a 5 days MC from the doctor.

Police Report



**SINGAPORE
POLICE FORCE**



T/20181206/2182

Police Station Of Origin:

Serangoon N.P.C

50 Serangoon Avenue 2 #01-02 SINGAPORE

556129

Tel No: 1800-4880999

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Report No. T/20181206/2182

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:

F /

Sgt 2 LAM CHEW KIT

Signature Of Interpreter:

Not applicable

Signature Of Informant:

Date/Time:

06/12/2018 22:15

Officer In Charge Of Case:

TP / GIT /

Sr Staff Sgt YUS MASTARI I KHAZALI

Contact No.: 65476214

SN 154

Classification Of Case:

Authentication Stamp

NP168

Singapore Police Force

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



KIA 기아자동차(주) KIA MOTORS CORPORATION

변속기 TRANSM	차축 AXLE	도장 PAINT	외장 TRIM
B		IR	WK
형식 SYL	승인 APPD	번호 MODEL	NO
KNAFH221395000007			
형식승인년월일 MODEL APPD DATE			

Accident Photo

