

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	06/12/2018 11:35
Date Of Accident	05/12/2018 09:15
Exact Location Of Accident	PIE TO KPE ENTRANCE EXIT 2C MERGING LANE KPE TUNNE
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJN8639M
Insured/Policyholder	
Name Of Registered Owner	CHEN LIU SY
NRIC No	S6904202C
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97661623
Alternative Phone No	OFFICE-97661623

Vehicle Particulars

Manufacturer	HYUNDAI
Model	AVANTE-1.6 (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	5098052222
Cover Note Number	

Driver

Name of Driver	CHEN WEY SY
NRIC No	S7015176F
Date Of Birth	03/05/1970
Occupation	OUTDOOR
Date Of Driving Pass	20/08/1988
Driving Experience	30 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97661623
Fax Number	
Contact Number	
Email Address	IVANCHENWY@HOTMAIL.COM

Address	BLK 53 PIPIT ROAD #04-114
Postcode	370053
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SIBLING
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	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?	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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	MACPHERSON NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 54 PIPIT ROAD #01-82/84 , POSTCODE: 370054 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7449999 - FAX NO: 65476366
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

AS PER POLICE REPORT NO. T20181205/2105.

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	SH7559S
Vehicle Make/Model/Colour	TAXI / BLUE
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	LIM HUNG MING
NRIC/Passport Number	S7724357G
Contact Number	88236969
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name CHEN WEY SY

Approximate Age

Injuries Sustain

Injured person in which vehicle? SJN8639M

Were seat belts worn? YES

Was this injured conveyed to hospital by ambulance? NO


Address

Postcode

A: SN 863911
B: SH 75595

As per Police Report no. T/2018 1205/2105

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

Driver's Signature: 
(If driver is not the policyholder)
Date & Time: 06/12/10



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

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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:
NRIC/FIN No.:



06/12/18
11:00am



Police Station Of Origin:
MacPherson NPP
54 Pipit Road #01-82/84 SINGAPORE
370054
Tel No: 1800-7449999

Report No. T/20181205/2105

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/12/2018 16:50	Vide Report No.:	Station Diary No.: 37
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Informant's Particulars

Name of Informant: CHEN WEY SY			Address: APT BLK 53 PIPIT ROAD #04-114 SINGAPORE 370053	
ID Type / ID No.: NRIC NO / S7015176F			Contact No.: Home/Office:	Mobile: 97661623
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 48	Date of Birth: 03/05/1970	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: OUTDOOR SALES			Driving Licence Information: Class: 2B,3 Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 05/12/2018 09:15	Type of Location: EXPRESSWAY
Location: KALLANG PAYA LEBAR EXPRESSWAY PIE TO KPE ENTRANCE EXIT 2C MERGING LANE KPE TUNNEL				
Weather: Clear		Road Surface: Dry		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

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SH7559S	Taxi	TOYOTA	PRIUS HYBRID 1.8 CVT	Blue		1
SJN8639M	Car	HYUNDAI	HD AVANTE 1.6 A	Grey	Seriously Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA



**SINGAPORE
POLICE FORCE**



T/20181205/2105

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Police Station Of Origin:
MacPherson NPP
54 Pipit Road #01-82/84 SINGAPORE
370054
Tel No: 1800-7449999

Report No. T/20181205/2105

CONTINUATION OF REPORT

Driver			
Name	CHEN WEY SY	ID No.	S7015176F
Related Vehicle	SJN8639M (Car)	Contact No.	97661623
Hospital/Clinic	SINGAPORE GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,3 Date of Expiry: NIL
Date Treatment	05/12/2018	Date Discharge	05/12/2018
No. of Days granted Medical Leave	03	Degree of Injury	NIL

Brief Details.

On 5/12/2018 at about 9.15am, I was driving my car a grey Hyundai Avante bearing vehicle number SJN8639M along the Pan Island Expressway (PIE) and was heading to the Kallang Expressway (KPE). As I entered the KPE tunnel, the traffic was quite heavy. As I was about to enter the KPE tunnel completely, suddenly the vehicle in front of me brake at the merging lane section. I then applied my brake to stop my car from hitting the front vehicle. I managed not to hit the vehicle in front of me, however a blue taxi bearing vehicle number SH7559S hit the rear side of my vehicle. Due to the accident, my rear bumper was dislodged. I managed to exchange particulars with the taxi driver and also took some photos of both vehicles involved. After which we left the area as it was a merging lane to KPE tunnel and it causes some congestion. On the same day at about 1.00pm, I went to Singapore General Hospital and was given three days mc. I could not remember the vehicle that was in front of me however my car do have an in-car camera.



SINGAPORE
POLICE FORCE



T/20181205/2105

Police Station Of Origin:
MacPherson NPP
54 Piplit Road #01-82/84 SINGAPORE
370054
Tel No: 1800-7449999

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Report No T/20181205/2105

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 65474885 stating the **report number** as reference.

Signature Of Officer Recording The Report:

G /

Sgt 3 MOHAMED KAMAL BIN AZIZ

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

05/12/2018 16:50

Officer In Charge Of Case:

TP / AEIT /

SSI 2 JUREMAH BINTE AHMAD

Contact No.: 65472076

Classification Of Case:

Authentication Stamp

NP168

SINGAPORE
POLICE FORCE