

### 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 11:40
Date Of Accident	04/12/2018 12:50
Exact Location Of Accident	BLK 732 JURONG WEST ST 73
Country/State of Loss	SINGAPORE

#### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJS3521A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	LEE MAN
NRIC No	S2554407B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96774221
Alternative Phone No	OFFICE-96774221

#### Vehicle Particulars

Manufacturer	TOYOTA
Model	ALTIS
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	5052971977-06
Cover Note Number	

#### Driver

Name of Driver	LI YUANJUN
NRIC No	S8235005E
Date Of Birth	15/10/1982
Occupation	INDOOR
Date Of Driving Pass	30/04/2004
Driving Experience	14 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90290812
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address	BLK 736 JURONG WEST ST 75 #09-13
Postcode	640736
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - DRIVER
Vehicle Registration Number of Driver's Own Vehicle	-
	-
	-
Insurance Company of Driver's Own Vehicle	-
	-
	-

#### General Information of the Accident

Type Of Accident	SIDE SWIPE
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?	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	NANYANG N.P.C
Police Station Address	ROAD: 2 JURONG WEST AVE 5 , POSTCODE: 649482 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7929999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

REFER TO ATTACHED

#### 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	GBB2498A
Vehicle Make/Model/Colour	
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

IMPORTANT NOTICE

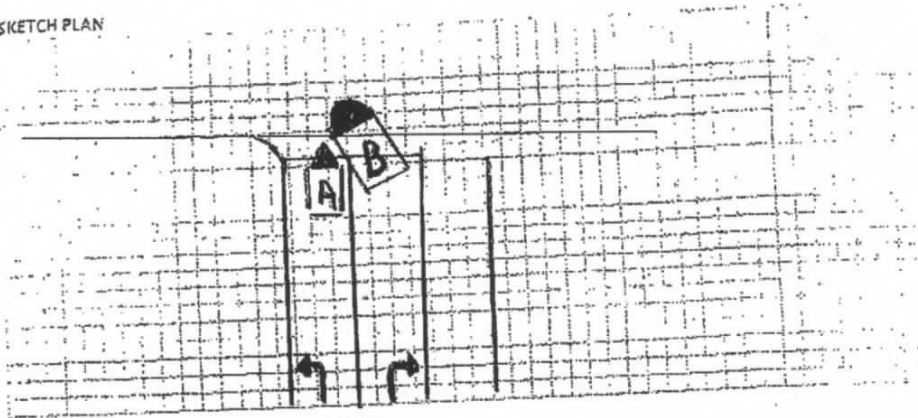
1. Please report correctly the details of the accident to speed up the claims process.
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5. Any false reporting may be referred to the Police for investigation.
6. The report will be forwarded by the insurers of the GIA Records Management Centre established 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 lodging 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)  
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/meli 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.:

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

See police Report

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:  
NRIC/FIN No.:



**SINGAPORE  
POLICE FORCE**



T/20181205/2076

1 of 3

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999

Report No. T/20181205/2076

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 05/12/2018 14:29		Vide Report No.:		Station Diary No.: 96	
Name of Informant: LI YUANJUN		Address: APT BLK 736 JURONG WEST STREET 75 #09-13 SINGAPORE 640736			
ID Type / ID No.: NRIC NO / S8235005E		Contact No.:		Mobile: 90290812	
Nationality: SINGAPORE CITIZEN		Email:			
Sex: Female	Age: 36	Date of Birth: 15/10/1982	Type of Informant: Driver		
Race: Chinese		Language:		Institution / School Name:	
Occupation: GRAB DRIVER		Driving Licence Information: Class:		Date of Expiry:	

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 04/12/2018 13:00	Type of Location: T-Junction
Location: Junction of Road 1 and Road 2 JURONG WEST STREET 73 JURONG WEST STREET 72 beside block 732 Jurong West Street 73.				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow:		Traffic Control:		Traffic Volume:
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

GBD2498A	Lorry			Silver	Slightly Damaged	1
SJS3521A	Car			Black	Seriously Damaged	0

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



**SINGAPORE  
POLICE FORCE**



T/20181205/2076

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Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
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Tel No: 1800-7929999

Report No. T/20181205/2076

## CONTINUATION OF REPORT

Name	SAMSUDEEN YUSUF SAMSL KHUTHA	ID No.	G0841142K
Related Vehicle	GBD2498A (Lorry)	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
Name	LI YUANJUN	ID No.	S8235005E
Related Vehicle	SJS3521A (Car)	Contact No.	90290812
Hospital/Clinic	NG TENG FONG HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	04	Degree of Injury	Slight

**Brief Details.**

On 04/12/2018 at about 1300hrs, I was driving my vehicle bearing the registration number of SJS3521A along Jurong West Street 73. Upon reaching the traffic junction of Jurong West Street 73 and Jurong West Street 72, my vehicle was positioned at the left lane and was about to turn left towards Jurong West Street 73. A vehicle, Lorry, bearing the registration number GBD2498A was on the right side of the lane, the right side of the lane was supposed to turn right as there was no left turn arrow sign indicated on the right lane.

When the light turned green, the lorry turned left and collided with my front right side of the vehicle. I alighted and made a check and there was damage at the front right side of my car, front right side headlight and bumper was severely dented and damaged.

I then called 999 for assistance, at the mean time the lorry driver gave me his particulars. I was later conveyed to Ng Teng Fong Hospital by Ambulance. Traffic police was at scene, I wish to state that I have given my In-car camera SD card to the traffic police. I was later given 04 days of MC REF 48699640 from Ng Teng Fong Hospital.



**SINGAPORE  
POLICE FORCE**



T/20181205/2076

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Report No. T/20181205/2076

Police Station Of Origin:  
Nanyang N.P.C  
2 Jurong West Avenue 5 SINGAPORE  
649482  
Tel No: 1800-7929999

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/  
Sgt 1 SOH XUAN YI

Signature Of Informant:

Signature Of Interpreter:  
Not applicable

Date/Time:  
05/12/2018 14:29

Officer In Charge Of Case:  
TP / GIT /

Classification Of Case:

Contact No.:

Authorisation Stamp

SN 127



Signature:

Singapore Police Force