

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	19/12/2018 15:43
Date Of Accident	18/12/2018 10:00
Exact Location Of Accident	KPE (MCE) BEFORE AIRPORT RD EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJB7262K
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Insured/Policyholder

Name Of Registered Owner	TEW CHANG YUAN IVAN
NRIC No	S8325039I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-81210341
Alternative Phone No	OFFICE-81210341

Vehicle Particulars

Manufacturer	PEUGEOT
Model	508 ALLURE 1.6 BLUEHDI EAT6
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	FWD SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	PNPV2018-00003027
Cover Note Number	

Driver

Name of Driver	TEW CHANG YUAN IVAN (ZHAO ZHANGYAN, IVAN)
NRIC No	S8325039I
Date Of Birth	16/08/1983
Occupation	INDOOR
Date Of Driving Pass	09/03/2012
Driving Experience	6 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81210341
Fax Number	
Contact Number	OFFICE-81210341
Email Address	NOEMAIL

Address	31 PUNGGOL FIELD #16-03
Postcode	828816
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	CLEAR
Road Surface	DRY

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	3
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	PUNGGOL N.P.C
Police Station Address	ROAD: 21A TEBING LANE , POSTCODE: 828837 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20181218/2133.

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	SHC3922J
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number

SJS1543A

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)

DETAILS OF INJURED PERSON 1

Name

TEW CHANG YUAN IVAN (ZHAO ZHANGYAN, IVAN)

Approximate Age

Injuries Sustain

NECK & BACK

Injured person in which vehicle?

SJB7262K

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 detection¹, 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.

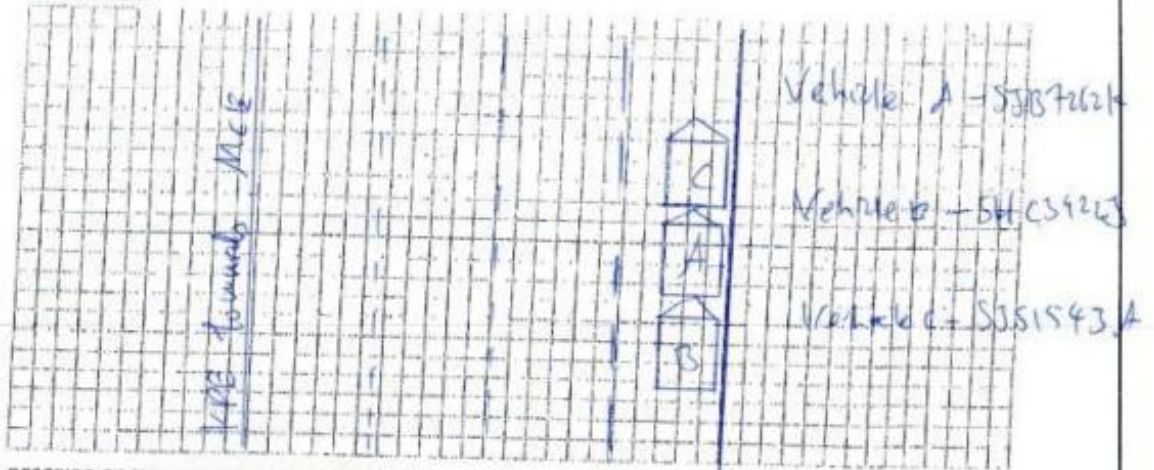
Policyholder's Signature
Date & Time:

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

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

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

My vehicle A was traveling along KPE towards MCE on lane 1, in front of me the vehicle C slow down and came to a stop. So I also slow down and came to a stop without any contact with the front vehicle C. Suddenly the vehicle B being on to my rear position of my vehicle A. The impact was too great and pushes my vehicle A to hit on to the front vehicle C. total there are 3 cars involved.

DECLARATION

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

Policyholder's Signature
Date & Time:

GIARMI, SketchPlanForm V5

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

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

Police Report



**SINGAPORE
POLICE FORCE**



T/20181218/2133

Police Station Of Origin:
Punggol N.P.C
21A Tebing Lane SINGAPORE 828837
Tel No: 1800-6049999

1 of 3

Report No. T/20181218/2133

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/12/2018 17:46	Vide Report No.:	Station Diary No.: 60
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Informant's Particulars

Name of Informant: TEW CHANG YUAN, IVAN			Address: 31 PUNGGOL FIELD #16-03 SINGAPORE 828816	
ID Type / ID No.: NRIC NO / S8325039I			Contact No.: Home/Office: Mobile: 81210341	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 35	Date of Birth: 16/08/1983	Type of Informant: Driver	
Race: Chinese			Language: English	Institution / School Name:
Occupation: Banker			Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 18/12/2018 09:55	Type of Location: Straight Road
Location: Along Road 1 KALLANG PAYA LEBAR EXPRESSWAY	Entering tunnel twds ECP direction (before Airport Rd exit)			
Weather: Clear	Road Surface: Dry	Road Speed Limit: 80 Km/h		
Traffic Flow: Dual Carriage 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
SHC3922J	Car				Seriously Damaged	1
SJB7262K	Car	PEUGEOT	508 ALLURE 1.6 BLUEHDI EAT6	Grey	Seriously Damaged	0
SJS1543A	Car				Slightly Damaged	0

Police Report



**SINGAPORE
POLICE FORCE**



T/20181218/2133

Police Station Of Origin:
Punggol N.P.C
21A Tebing Lane SINGAPORE 828837
Tel No: 1800-6049999

2 of 3

Report No. T/20181218/2133

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJB7262K	FWD Singapore Pte. Ltd	PNPV2018-00003027	03/04/2018	02/04/2019

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TEW CHANG YUAN, IVAN		ID No. S8325039I
Related Vehicle	SJB7262K (Car)		Contact No. 81210341
Hospital/Clinic	UNIHEALTH 24HRS CLINIC (TOA PAYOH)	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	18/12/2018	Date Discharge	18/12/2018
No. of Days granted Medical Leave	05	Degree of Injury	Slight

Brief Details.

On 18/12/2018 at about 0958hrs, I was driving my vehicle (SJB7262K) along KPE on the lane one entering the tunnel, towards the direction of ECP (before Airport Rd exit). I suddenly notice that the vehicle in front of me (SJS1543A) suddenly brake and I reacted by applying brake on my vehicle also. I managed to stop my vehicle and did not hit onto the vehicle that was in front of me. When my vehicle came to a stop, I suddenly felt an impact at the rear of my vehicle, the impact caused my vehicle to inch forward and hit onto the vehicle in front of me (SJS 1543A). I then come out of my vehicle and notice that a taxi (SHC3922J) had hit onto the rear of my vehicle. I also notice that the vehicle in front of me (SJS1543A) had applied brake as there were another chain vehicles collision front of SJS1543A, however the vehicle in front of me (SJS1543A) did not hit onto any vehicles that were involved in the chain collision in front of it.

After the accident, I felt unwell and thus went to seek medical treatment at UniHealth 24hrs Clinic (Toa Payoh) and was given 5 days of Medical Leave by the doctor. I am lodging this report for the purposes of insurance claims. That's All

Police Report



SINGAPORE
POLICE FORCE



T/20181218/2133

3 of 3

Report No. T/20181218/2133

Police Station Of Origin:
Punggol N.P.C
21A Tebing Lane SINGAPORE 828837
Tel No: 1800-6049999

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 /

Sr Staff Sgt CHAN LEE WAH

Signature Of Informant:

X

Signature Of Interpreter:

Not applicable

Date/Time:

18/12/2018 17:46

Officer In Charge Of Case:

TP / AEIT /

SI ANG YI TING, STEPHANIE

Contact No: 65476414

Classification Of Case:

Authentication Stamp

NP168

Singapore Police Force

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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