

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	18/01/2019 18:40
Date Of Accident	18/01/2019 08:00
Exact Location Of Accident	AIRPORT BLVD TWDS TERMINAL 2
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKP5726S
Insured/Policyholder	
Name Of Registered Owner	WIJESURIYA APPUHAMILAGE CHANDRATHILAKA WIJESURIYA
NRIC No	S2711194G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-85228025
Alternative Phone No	OFFICE-85228025

Vehicle Particulars

Manufacturer	HYUNDAI
Model	ELANTRA 1.6 AT ABS D/AB 2WD 4DR
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	REPORTING ONLY
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	5097164849
Cover Note Number	

Driver

Name of Driver	WIJESURIYA APPUHAMILAGE CHANDRATHILAKA WIJESURIYA
NRIC No	S2711194G
Date Of Birth	13/01/1960
Occupation	OUTDOOR
Date Of Driving Pass	20/10/2014
Driving Experience	4 YEARS AND 2 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-85228025
Fax Number	
Contact Number	OFFICE-85228025
E-Mail Address	NOEMAIL

Address	BLK 273B PUNGGOL PLACE #04-868
Postcode	822273
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	COLLISION - MAJOR/MINOR RD
Weather Conditions	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	2
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)	2
Passenger 1	NAME: : - GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20190118/7007.

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	UNKNOWN
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)

Accident Sketch Plan

GENERAL / MOTORCYCLE

SKETCH PLAN

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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.:

Police Report



**SINGAPORE
POLICE FORCE**



T/20190118/7007

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

1 of 3
Report No. T/20190118/7007

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/01/2019 13:01	Vide Report No.:	Station Diary No.:
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Informant's Particulars			
Name of Informant: WIJESURIYA APPUHAMILAGE CHANDRATHILAKA WIJESURIYA		Address: APT BLK 692A CHOA CHU KANG CRESCENT #19-02 SINGAPORE 681692	
ID Type / ID No.:		Contact No.:	
NRIC NO / S2711194G		Home/Office:	Mobile: 85228025
Nationality: SINGAPORE CITIZEN		Email: 2013wije@gmail.com	
Sex: Male	Age: 59	Date of Birth: 13/01/1960	Type of Informant: Driver
Race: Sinhalese		Language: English	Institution / School Name:
Occupation: Self-Employed		Driving Licence Information: Class:	Date of Expiry:

General Information of the Accident				
Type of Accident:	Non-Injury Hit and Run	Drink Drive: No	Date/Time of Accident: 18/01/2019 08:00	Type of Location: Y-Junction
Location: T2 BOULEVARD				
Weather: Raining		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 Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKP5726S	Car	HYUNDAI	ELANTRA 1.6 AT ABS D/AB 2WD 4DR	Red	Slightly Damaged	0

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKP5726S	NTUC Income Insurance Co-Operative Limited	5097164849	04/01/2018	23/03/2019

Police Report



**SINGAPORE
POLICE FORCE**



T/20190118/7007

2 of 3

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

Report No. T/20190118/7007

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	WIJESURIYA APPUHAMILAGE CHANDRATHILAKA WIJESURIYA	ID No.	S2711194G
Related Vehicle	SKP5726S (Car)	Contact No.	85228025
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 18/01/2019, AT ABOUT 08:01HR, I WAS DRIVING MY VEHICLE - SKP5726S, ALONG WITH A PASSENGER TO CHANGI AIRPORT, ALONG AIRPORT BOULEVARD, ENTERING TO TERMINAL 2 BOULEVARD, I WAS ON THE RIGHT LANE, WHEN SUDDENLY, A MAROON COLOURED HONDA MPV, CAME OUT FROM THE SIDE ROAD, WITHOUT STOPPING AT THE STOPLINE, AND GRAZED ACROSS MY VEHICLE'S REAR RIGHT PORTION. I THEN ALIGHTED MY VEHICLE, WITH INTENTION TO EXCHANGE PARTICULARS WITH THE DRIVER, BUT THE DRIVER DROVE OFF AND NEVER CAME BACK.

FROM MY IN-CAR CAMERA, I AM ABLE TO MAKE OUT HIS VEHICLE NUMBER - "SLA XXXX P".

Police Report



**SINGAPORE
POLICE FORCE**



T/20190118/7007

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

3 of 3
Report No. T/20190118/7007

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
ESTHER CHONG
Contact No.: 65476368

Authentication Stamp
NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
18/01/2019 13:01

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



현대자동차(주)		HYUNDAI MOTOR COMPANY	
변속기 TRANSM	차축 AXLE	도장 PAINT	의장 TRIM
YR7 RY		KMHDH41CMEU293862	
정비부호 S.V.C	형식 APPD	승인 MODEL	번호 NO
		1800 kg	
		3000 kg	
		1- 970 kg	
		2- 950 kg	

Accident Photo

