

## 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	25/02/2019 11:54
Date Of Accident	23/02/2019 13:45
Exact Location Of Accident	JUNCTION OF CAIRNHILL RD/ORCHARD RD B/F GRANGE RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKK8788U
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SAMANTHA LEE HUI QIAN
NRIC No	S8807328B
Email Address	ARDIAN.PUTRA.P@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91881333
Alternative Phone No	OTHERS-90608230

### Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	JETTA
Exact Purpose for which vehicle was being used at time of accident	PRIVTAE 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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3016191800
Cover Note Number	

### Driver

Name of Driver	ARDIAN PRATAMA PUTRA BIN BUANG
NRIC No	S8790020G
Date Of Birth	13/01/1987
Occupation	INDOOR
Date Of Driving Pass	21/11/2012
Driving Experience	6 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90608230
Fax Number	
Contact Number	OFFICE-91881333
EEmail Address	ARDIAN.PUTRA.P@GMAIL.COM

Address	BLK 92 DAWSON ROAD #06-30
Postcode	141092
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
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 (including own vehicle) 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)	2
Passenger 1	NAME: : SAMANTHA LEE HUI QIAN GENDER: : FEMALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	KEBUN BARU NEIGHBOURHOOD POLICE POST
Police Station Address	<b>ROAD:</b> BLK 111 ANG MO KIO AVENUE 4 , <b>POSTCODE:</b> 560111 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-4589999 - <b>FAX NO:</b> 64574454
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190224/2034

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SME3326K
Vehicle Make/Model/Colour	AUDI A4
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	BRIENS PIERRE ROBERT
NRIC/Passport Number	S7882755F
Contact Number	90176202

Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

#### DETAILS OF INJURED PERSON 1

Name SAMANTHA LEE HUI QIAN  
Approximate Age  
Injuries Sustain SLIGHT INJURY  
Injured person in which vehicle? SKK8788U  
Were seat belts worn? YES  
Was this injured conveyed to hospital by ambulance? NO  
Address  
Postcode

#### DETAILS OF INJURED PERSON 2

Name ARDIAN PRATAMA PUTRA BIN BUANG  
Approximate Age  
Injuries Sustain SLIGHT INJURY  
Injured person in which vehicle? SKK8788U  
Were seat belts worn? YES  
Was this injured conveyed to hospital by ambulance? NO  
Address  
Postcode

## Accident Sketch Plan

### SKETCH PLAN


#### IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
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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.

\_\_\_\_\_  
Policyholder's Signature  
Date & Time:

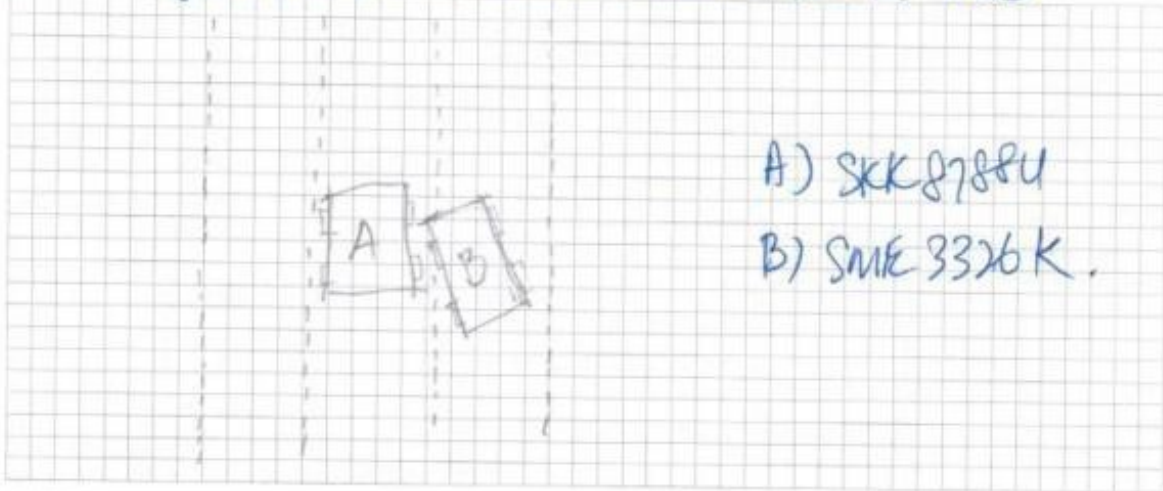
  
25/02/2019 1157hrs  
\_\_\_\_\_  
Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

  
25/02/2019  
\_\_\_\_\_  
Reporting Centre Personnel's Signature  
Name:   
NRIC/FIN No.:

## Accident Sketch Plan

SKETCH PLAN

JUNCTION RD & CRITCH RD BEFORE GRONLHE ROAD



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Handwritten text across the grid: PUS REFER TO POLICE REPORT 7/20190224/2034

### 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: KASHI  
NRIC/FIN No.: 60103



# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20190224/2034

Police Station Of Origin:  
Kebun Baru NPP  
111 Ang Mo Kio Avenue 4 SINGAPORE  
560111  
Tel No: 1800-4589999

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Report No. T/20190224/2034

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 24/02/2019 13:57	Vide Report No.:	Station Diary No.: 17
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### Informant's Particulars

Name of Informant: ARDIAN PRATAMA PUTRA BIN BUANG			Address: APT BLK 92 DAWSON ROAD #06-30 SINGAPORE 141092		
ID Type / ID No.: NRIC NO / S8790020G			Contact No.: Home/Office: Mobile: 90608230		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 32	Date of Birth: 13/01/1987	Type of Informant: Driver		
Race: Javanese			Language:		Institution / School Name:
Occupation: Police officer			Driving Licence Information: Class: Date of Expiry:		

### General information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 23/02/2019 13:45	Type of Location: Junction
Location: Along Road 1 CAIRNHILL ROAD ORCHARD ROAD Junction before Grange Road				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working	Traffic Volume: Moderate	
Type of Collision: Between Moving Vehicles - Side Swipe - Same Direction				Anyone conveyed by ambulance: No

### Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SKK8788U	Car				Slightly Damaged	1
SME3326K	Car				Slightly Damaged	0

### Details of Person Involved

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

# POLICE REPORT



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POLICE FORCE**



T/20190224/2034

Police Station Of Origin:  
Kebun Baru NPP  
111 Ang Mo Kio Avenue 4 SINGAPORE  
560111  
Tel No: 1800-4589999

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Report No. T/20190224/2034

## CONTINUATION OF REPORT

<b>Passenger</b>			
Name	Lee Hui Qian, Samantha		ID No. S8807328B
Related Vehicle	SKK8788U (Car)		Contact No. 91881333
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	03	Degree of Injury	Slight
<b>Driver</b>			
Name	ARDIAN PRATAMA PUTRA BIN BUANG		ID No. S8790020G
Related Vehicle	SKK8788U (Car)		Contact No. 90608230
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	03	Degree of Injury	Slight
<b>Driver</b>			
Name	Briens Pierre Robert		ID No. S7882755F
Related Vehicle	SME3326K (Car)		Contact No. 90176202
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 the 23/02/2019 at about 1347hrs, I was driving vehicle "SKK8788U" along Cairnhill Road going towards Orchard Road. As I was approaching the traffic junction just before Grange Road, I intended to check turn left into Orchard road, however the vehicle on the right, turned left as well, which led to a collision between moving vehicles. After the collision, I have stopped my vehicle to make a check on the opposing party. The driver was conscious and doesn't require any immediate medical attention, we had then exchanged our particulars. I wish to include that, before the collision, the opposing driver of vehicle "SME3326K" failed to signal left, which led to the accident.

I wish to state that both vehicle suffered from slight damages, there are scratches and dents on my vehicle's right passenger and driver's door. The opposing party's vehicle suffered from scratches & dent on the front left bumper. After the accident, I felt uncomfortable on my back area, I wish to state that, I

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POLICE FORCE**



T/20190224/2034

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Report No. T/20190224/2034

### CONTINUATION OF REPORT

have previous medical issues on my back area, and strongly believed the pain is reoccurring due to the accident. I would like to include that, during the accident, my Wife was also in the vehicle, after the accident, her rear neck area felt a little uncomfortable, as such we have then went to the GP, and was given 3 days of outpatient leave respectively.

I wish to state that, during the accident, no government properties were damaged, neither was the Ambulance or the Police activated. There is a in-car camera installed in my vehicle, and it is in working condition.



POLICE REPORT



SINGAPORE  
POLICE FORCE



T/20190224/2034

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Tel No: 1800-4589999

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Report No. T/20190224/2034

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 1 AVERY CHUA CHANG RONG

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

Sr Staff Sgt STEPHANIE, CHEUNG TSZ YING

Contact No.: 90020518

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

24/02/2019 13:57

Classification Of Case:

ID

REPUBLIC OF SINGAPORE  
IDENTITY CARD NO. **S8790020G**



Name  
**ARDIAN PRATAMA PUTRA BIN BUANG**

Race  
**JAVANESE**

Date of Birth  
**13-01-1987**

Sex  
**M**

Country/Place of Birth  
**INDONESIA**



REPUBLIC OF SINGAPORE **DRIVING LICENCE**



Licence Number **S8790020G**

Name  
**ARDIAN PRATAMA PUTRA BIN BUANG**

Birth Date **13 Jan 1987**

Issue Date **01 Oct 2009**



5900693



NRIC No. **S8790020G**



Date of Issue  
**26-03-2018**

Address  
**APT BLK 92 DAWSON ROAD  
#06-30  
SINGAPORE 141092**

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

Class	Description	Valid Until
Class 1B	Motorcycles <= 200 CC	01 Oct 2017
Class 1A	Motorcycles between 201 CC and 400 CC	30 Dec 2011
Class 2	Motorcycles > 400 CC	30 Oct 2013
Class 3	Motor cars <= 2000 kg with <= 7 passengers, exclusive of the driver; and motor motorcoaches <= 2500 kg	21 Nov 2015

S8790020G S / No. 9000199189

Licence No. **S8790020G**



NP 425A

Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo

