SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Mobile Number

Fax Number
Contact Number

EMail Address

- 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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	01/03/2019 12:31
Date Of Accident	27/02/2019 10:20
Exact Location Of Accident	WOODLANDS CAUSEWAY TOWARDS MALAYSIA
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SMD261M
Insured/Policyholder	
Name Of Registered Owner	KENNETH LEE KUAN BOO
NRIC No	S7242090Z
Email Address	KENSAN1211@GMAIL.COM
Mobile Phone No	(LOCAL) +65-96806803
Alternative Phone No	OTHERS-96806803
Vehicle Particulars	
Manufacturer	VOLKSWAGEN
Model	GOLF-1.4 TSI (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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 29090922 AVW
Cover Note Number	
Driver	
Name of Driver	KENNETH LEE KUAN BOO
NRIC No	S7242090Z
Date Of Birth	12/11/1972
Occupation	OUTDOOR
Date Of Driving Pass	28/11/1990
Driving Experience	28 YEARS AND 2 MONTHS
Gender	MALE

(LOCAL) +65-96806803

KENSAN1211@GMAIL.COM

OTHERS-96806803

Address BLK 635A PUNGGOL DRIVE

#17-611

Postcode 821635

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

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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? YES

Foreign Vehicle Registration Number JNR9988 (PRIVATE CAR)

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?

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

NO

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?

If Yes, against whom?

against whom?

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190228/2174

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 JNR9988

Vehicle Make/Model/Colour

Details Of Properties

Vehicle Category PRIVATE CAR

Name of Driver WONG CHAN YU

NRIC/Passport Number 790918055179

Contact Number 92349958

Address Postcode Insurance Company Name Nature Of Damage

No. Of Passenger (Including Driver)

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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- The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
- Any false reporting may be referred to the Police for investigation.
- 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.
- 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:
 - 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

2019

(ii) for complying with requirements under any regulations, laws or court orders.

Policyholder's Signature

Date & Time: 01 3 2019

Driver's Signature

(If driver is not the policyholder)

Date & Time: 013

Reporting Centre Por

NRIC/FIN No.

Accident Sketch Plan

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DECLARATION	articulars are true in every re	espect.	
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POLICE REPORT





Institution / School Name:

Date of Expiry:

1 of 3 Report No. T/20190228/2174

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

Male

Race: Chinese

Occupation:

46

MEDIACORP CAMERA MAN

REPORT OF A TRAFFIC ACCIDENT Station Diary No.: Vide Report No.: Date/Time Report Made: 103 28/02/2019 21:58 Informant's Particulars Address: Name of Informant: APT BLK 635A PUNGGOL DRIVE #17-611 SINGAPORE KENNETH LEE KUAN BOO 821635 Contact No.: ID Type / ID No.: Mobile: 96806803 Home/Office: NRIC NO / S7242090Z Email: Nationality: SINGAPORE CITIZEN Type of Informant: Date of Birth: Sex: Age:

Driving Licence Information:

Class: 2B.2A.2.3,4,5

Driver

Language:

12/11/1972

General Information of the Accident Type of Location: Date/Time of Drink Non-Injury Type of Straight Road Drive: Accident: Foreign Vehicle Accident No 27/02/2019 10:20 Location: Along Road 1 CAUSEWAY Along Woodlands Causeway bridge heading towards Johor Bahru, slightly after Woodlands Checkpoint Road Speed Limit: Road Surface: Weather: Dry Clear Traffic Volume: Traffic Control: Traffic Flow: Heavy Not Controlled Anyone conveyed by Type of Collision: ambulance: Between Moving Vehicles - Head To Rear

Details of Vehicle Involved						
Vehicle No.	The second second second second	Make	Model	Color	Condition	No of Passenger
JNR9988	Car				Slightly Damaged	0
SMD261M	Car	VOLKSWAGO N	GOLF 1.4 TSI HL	Silver	Slightly Damaged	0

Details of V	ehicle Insurance	The state of the s		1
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMD261M	MSIG INSURANCE (SINGAPORE) PTE. LTD.	A50507483	30/07/2018	29/07/2019

POLICE REPORT



T/20190228/2174

112013022012114

Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999 2 of 3 Report No. T/20190228/2174

CONTINUATION OF REPORT

Details of Perso	n Involved				915-	
Any Pedestrian Ir	nvolved: No					
No. of Pedestrians Injured: NIL			Use of Ped	destriar	Cross	ing: NA
Driver						
Name	WONG CHAN YU			ID No.		790918055179
Related Vehicle	JNR9988 (Car)		Contact No.		92349958	
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date		Class: NIL Date of Expiry: NIL	
Date Treatment	NIL Date Disc		harge	NIL		
No. of Days gran	nted Medical Leave NIL		Degree of Injury NIL			
Driver				10.10		ATTENDED TO THE PARTY OF THE PA
Name	KENNETH LEE KUAN BOO		ID No.		S7242090Z	
Related Vehicle	SMD261M (Car)		Contact No.		96806803	
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date		Class: 2B,2A,2,3,4,5 Date of Expiry: NIL	
Date Treatment	NIL		Date Disc	Date Discharge NIL		
No. of Days gran	ted Medical Leave	NIL	Degree of	Injury	NIL	

Brief Details.

On 27/02/2019 at around 1020 hours, I was driving on the right lane of a 2- lane road along Woodlands Causeway Bridge heading into Johor Bahru.

As the traffic was heavy, I came to a complete stop. Subsequently, I felt a bump on the back of my car. I then came down of the vehicle and noticed that another vehicle had hit onto the back of my car. I then exchanged my particulars with the said driver.

I have been driving for the past 29 years and this is the first time such incident happened. I have an inbuilt camera in my vehicle but I believe that the footages could have already been overwritten. I do not know if there are any CCTVs at the said location.

POLICE REPORT





Police Station Of Origin: Punggol N.P.C 21A Tebing Lane SINGAPORE 828837 Tel No: 1800-6049999 3 of 3 Report No. T/20190228/2174

CONTINUATION OF REPORT

Sketch Plan

NP168

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 3 CHIANG JING XUAN	Signature Of Informant:
Signature Of Interpreter: Not applicable	Date/Time: 28/02/2019 21:58
Officer In Charge Of Case: TP / AEIT / SSI 2 SITIMARSITA BINTE BOHARI Contact No.: 65476219	Classification Of Case:





































