

## 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	18/03/2019 14:36
Date Of Accident	16/03/2019 11:30
Exact Location Of Accident	6 TANJONG RHU RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKC9969A
<b>Insured/Policyholder</b>	
Name Of Registered Owner	PHUA PENG YONG ALVIN
NRIC No	S7906936A
Email Address	PHUA_ALVIN@YAHOO.COM.SG
Mobile Phone No	(LOCAL) +65-93666307
Alternative Phone No	OFFICE-93666307

### Vehicle Particulars

Manufacturer	BMW
Model	X3 XDRIVE20I ABS 4WD HID DSC
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?	YES
If No, Please state action to be taken	
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	5107296421
Cover Note Number	-

### Driver

Name of Driver	PHUA PENG YONG ALVIN
NRIC No	S7906936A
Date Of Birth	16/03/1979
Occupation	INDOOR
Date Of Driving Pass	29/03/2000
Driving Experience	18 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93666307
Fax Number	
Contact Number	OFFICE-93666307
Email Address	PHUA_ALVIN@YAHOO.COM.SG

Address	BLK 610 YISHUN ST 61 #12-215
Postcode	760610
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	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?	YES
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	BEDOK POLICE DIVISIONAL HQ (G DIVISION)
Police Station Address	<b>ROAD:</b> 30 BEDOK NORTH ROAD , <b>POSTCODE:</b> 469676 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-2440000 - <b>FAX NO:</b> 64443009
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT.

#### 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	SGP277B
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ASHVIN BAPULAL DESAI
NRIC/Passport Number	S1198424Z
Contact Number	
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	

No. Of Passenger (Including Driver)

**DETAILS OF INJURED PERSON 1**

Name	PHUA PENG YONG ALVIN
Approximate Age	
Injuries Sustain	BACK & NECK
Injured person in which vehicle?	SKC9969A
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

### SKETCH PLAN

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 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)**

(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.

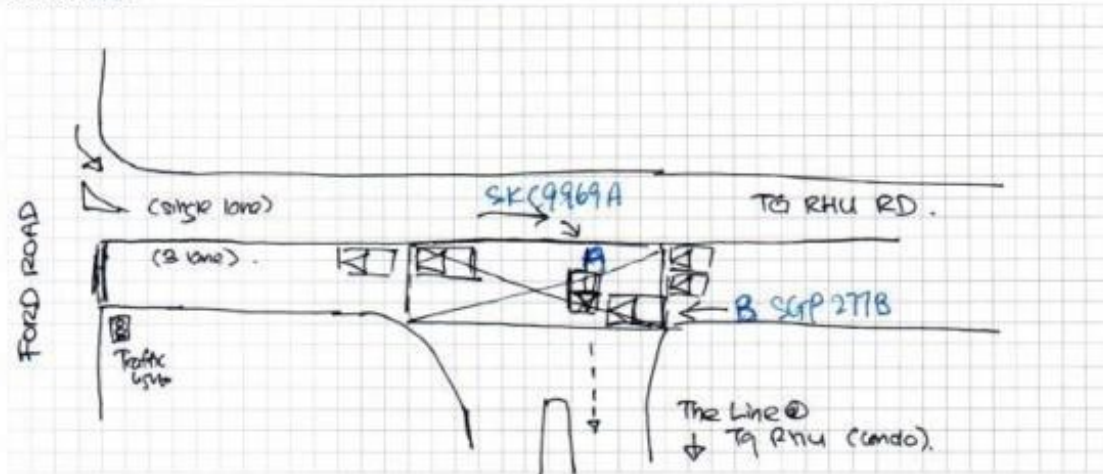
(e) the information so collected under (d) above may be shared / disclosed:

- (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.

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

## Accident Sketch Plan

### SKETCH PLAN



### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

At about 1130hrs, I (the driver of SKC9969A) was making a right hand turn into my place (6 Tq Rhu Rd). There was a traffic build up at the junction of Ford Road and Tq Rhu Road due to ongoing construction/lane closure, hence the long traffic line up at Tq Rhu Road leading to Ford Road. I was making the right turn into my home after checking that there was no on coming traffic on my left and while checking avoiding a car that was partially within the yellow box.

As I clear the first 2 lanes (where the cars have stopped before the junction box), I was driving forward to check the 3rd lane, as I move to get a view, the on coming car, SGP 2718 collided into me.

### DECLARATION

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

Policyholder's Signature

Date & Time:

16/03/19

1648 hrs

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**



G/20190316/7031

1 of 2

## POLICE REPORT (NP299)

Report No. G/20190316/7031

Police Station Of Origin  
Bedok Division HQ  
30 Bedok North Road SINGAPORE 469676  
Tel No: 1800-2440000

Date/Time Report Made 16/03/2019 23:33	Vide Report No.	Station Diary No.
Name Of Informant PHUA PENG YONG ALVIN	Address APT BLK 610 YISHUN STREET 61 #12-215 SINGAPORE 760610	
ID Type / ID No. NRIC NO / S7906936A	Contact No. Home/Office: Mobile: 93666307	
Nationality SINGAPORE CITIZEN	Email Address Phua_alvin@yahoo.com.sg	
Occupation Singapore Armed Forces personnel	Sex Male	Age 40
Institution/School Name	Date of Birth 16/03/1979	Race Chinese
Date/Time Of Incident 16/03/2019 11:30 - 16/03/2019 11:45	Location Of Incident 6 TANJONG RHU ROAD #11--06 SINGAPORE 435883	

### Brief details.

At about 1130hrs thereabout, I the driver of SKC9969A was making a right turn into my place (6 Tg Rhu Rd) after entering Tg Rhu Rd from Ford Road. There was a traffic build up at the junction of Ford Rd and Tg Rhu Rd due to lane closure for works. Hence this result Kng a Long Traffic Line up at Tg Rhu Rd toward Ford Road.

I was making the right turn into my home after checking that there was no on coming traffic to the best of my view while avoiding a car that was partially within the yellow box.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 16/03/2019 23:33
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp

## POLICE REPORT



**SINGAPORE  
POLICE FORCE**



G/20190316/7031

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20190316/7031

As I clear the first 2 lanes, where the cars had stopped before the yellow box, as I was driving forward to check the 3rd lane, the on coming car (SGP277B) collided into my left front.

After exchanging details and photos, I felt a dull pain and sore on my back right muscle. An ambulance was called in and was sent to TTSH for further examination. The diagnosis was a neck sprain and contusion of shoulder region. Was discharged on the same day with pain killers and muscle relaxant.

The Report Number issued to me by the Traffic Police On-site is G/20190316/0113

That is all I have to report.

Signature Of Officer Recording The Report: Not applicable	Signature Of Informant: The identity of the person making this report has been authenticated by SingPass. No signature is required.
Signature Of Interpreter: Not applicable	Date/Time: 16/03/2019 23:33
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	

Accident Photo





Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Accident Photo

