

## 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	02/04/2019 15:18
Date Of Accident	27/03/2019 08:25
Exact Location Of Accident	AYE TOWARDS TUAS AFTER LOWER DELTA ROAD JUNCTION
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLJ9286M
<b>Insured/Policyholder</b>	
Name Of Registered Owner	GOLDBELL CAR RENTAL PTE LTD
Co Reg No	200710651D
Email Address	PHILLIP.STEPHENS@DYSON.COM
Mobile Phone No	(LOCAL) +65-92314824
Alternative Phone No	OFFICE-92314824

### Vehicle Particulars

Manufacturer	TOYOTA
Model	COROLLA ALTIS-1.6 (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	COMMERCIAL VEHICLE

### Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	999994316
Cover Note Number	

### Driver

Name of Driver	STEPHENS PHILLIP ANDREW
Passport No/FIN	G3350441T
Date Of Birth	28/06/1989
Occupation	INDOOR
Date Of Driving Pass	09/03/2018
Driving Experience	1 YEAR AND 0 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92314824
Fax Number	
Contact Number	OTHERS-92314824
EEmail Address	PHILLIP.STEPHENS@DYSON.COM

Address	9 KIM TIAN ROAD #31-17 HIGHLINE RESIDENCES
Postcode	168593
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

#### 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?	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)	1

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TIONG BAHRU NEIGHBOURHOOD POLICE POST
Police Station Address	<b>ROAD:</b> BLK 128 KIM TIAN ROAD #01-123/ 125 , <b>POSTCODE:</b> 160128 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-2739999 - <b>FAX NO:</b> 62785651
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO SKETCH AND POLICE REPORT T/20190327/2106

#### 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	SKK4484Y
Vehicle Make/Model/Colour	MERCEDES BENZ
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	TAN KUAN HIANG
NRIC/Passport Number	S7406280F
Contact Number	93699111
Address	
Postcode	
Insurance Company Name	

Nature Of Damage  
No. Of Passenger (Including Driver)


DETAILS OF INJURED PERSON 1	
Name	STEPHENS PHILLIP ANDREW
Approximate Age	
Injuries Sustain	NECK AND BACK PAIN
Injured person in which vehicle?	SLJ9286M
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

## Accident Sketch Plan

### SKETCH PLAN

#### IMPORTANT NOTICE

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2. This Form must be completed by the Policyholder and/or the Authorized Driver.
3. Information provided must be as truthful and accurate as possible. Any willful 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 Traffic Police Department for investigation.
6. This report will be forwarded by the insurers to 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.
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' law firms/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/are 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.


27.03.19 10:55
03/04/2019

Policyholder's Signature & Time: \_\_\_\_\_  
 Driver's Signature (if driver is not the policyholder) / Date & Time: \_\_\_\_\_  
 Witnessed by Reporting Centre Personnel: \_\_\_\_\_

Sketch Plan \*



## Accident Sketch Plan

Describe Circumstance of the Accident \*

At 08.25, I was driving along the A14 towards Tins. I was in the inside lane. There was stationary traffic in all lanes. ~~to~~ The cars in front began to brake so I gently put on the brakes to bring the car to a <sup>complete</sup> stop. Throughout, I did not change lanes.

A few seconds later, the car behind me hit my car in the rear. I got out the car after ~~some time~~ some time to inspect the damage. We were on a very busy road, so I summoned the ~~the~~ driver to pull onto the hard shoulder. We stopped there and exchanged details.

My car was drivable, so we drove off after exchanging information. The ~~the~~ driver explained that he was very tired, which is why he didn't stop.


POLICE REPORT T/20190327/2106

### Declaration

(We declare the foregoing particulars are true in every respect.)



Policyholder's Signature

\*  27.03.19 10:50  
Driver's Signature (if driver is not the policyholder) / Date & Time

 03/04/2019  
Validated by Reporting Centre Personnel

# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20190327/2106

Police Station Of Origin:  
Tiong Bahru NPP  
128 Kim Tian Road #01-123 SINGAPORE  
160128  
Tel No: 1800-2739999

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Report No. T/20190327/2106

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 27/03/2019 15:18	Vide Report No.:	Station Diary No.: 44
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### Informant's Particulars

Name of Informant: STEPHENS PHILLIP ANDREW	Address: APT BLK 9 KIM TIAN ROAD #31-17 HIGHLINE RESIDENCES SINGAPORE 168593		
ID Type / ID No.: FIN NO / G3350441T	Contact No.: Home/Office: Mobile: 92314824		
Nationality: BRITISH	Email:		
Sex: Male	Age: 29	Date of Birth: 28/06/1989	Type of Informant: Driver
Race: Caucasian	Language: English		Institution / School Name:
Occupation: ENGINEER	Driving Licence Information: Class: 3		Date of Expiry: 08/03/2023

### General Information of the Accident

Type of Accident:	Non-Injury Others	Drink Drive: No	Date/Time of Accident: 27/03/2019 08:25	Type of Location: Straight Road
Location: Along Road 1 AYER RAJAH EXPRESSWAY  Towards Tuas after Lower Delta Junction				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
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
SKK4484Y	Car				Slightly Damaged	0
SLJ9286M	Car				Slightly Damaged	0

### Details of Person Involved

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



# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20190327/2106

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Report No. T/20190327/2106

Police Station Of Origin:  
Tiong Bahru NPP  
128 Kim Tian Road #01-123 SINGAPORE  
160128  
Tel No: 1800-2739999

## CONTINUATION OF REPORT

<b>Driver</b>			
Name	TAN KUAN HIANG		ID No. S7406280F
Related Vehicle	SKK4484Y (Car)		Contact No. 93699111
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
<b>Driver</b>			
Name	STEPHENS PHILLIP ANDREW		ID No. G3350441T
Related Vehicle	SLJ9286M (Car)		Contact No. 92314824
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: 08/03/2023
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

### Brief Details.

On 27/03/2019 at about 0825hrs, while I was driving along AYE on left most lane towards Tuas, I slow down and came to a stop as the traffic was heavy. When my car came to a stop the vehicle behind me collided onto the rear of my car. No one was injured. We exchanged particulars and left. I called my insurance company and was told by them to file a police report.

# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20190327/2106

Police Station Of Origin:  
Tiong Bahru NPP  
128 Kim Tian Road #01-123 SINGAPORE  
160128  
Tel No: 1800-2739999

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Report No. T/20190327/2106

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:  
A /  
Sgt 2 LOO CHIN HWEE

Signature Of Informant:

Signature Of Interpreter:  
Not applicable

Date/Time:  
27/03/2019 15:18

Officer In Charge Of Case:  
TP / GIA /  
Staff Sgt WONG SIEU LUI  
Contact No.: 65476151

Classification Of Case:

Authentication Stamp  
NP168



Signature

Singapore Police Force



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



**Accident Photo**





Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo



