

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	13/05/2019 16:14
Date Of Accident	12/05/2019 13:25
Exact Location Of Accident	SHEARES LINK
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJT9837U
Insured/Policyholder	
Name Of Registered Owner	LAU WAI KEAT
NRIC No	S1588152F
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96328930
Alternative Phone No	OTHERS-96328930

Vehicle Particulars

Manufacturer	HYUNDAI
Model	AVANTE-1.6 (A)

Exact Purpose for which vehicle was being used at time of accident

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	DIRECT ASIA INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	MT/00555704
Cover Note Number	

Driver

Name of Driver	LAU WAI KEAT
NRIC No	S1588152F
Date Of Birth	31/07/1963
Occupation	INDOOR
Date Of Driving Pass	20/07/1991
Driving Experience	27 YEARS AND 9 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96328930
Fax Number	
Contact Number	OTHERS-96328930
Email Address	NOEMAIL

Address	BLK 635 BEDOK RESERVOIR ROAD #10-21
Postcode	410635
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 - CROSS JUNCTION
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?	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)	2
Passenger 1	NAME: : PAX 1
	GENDER: : FEMALE

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
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 ATTACHED STATEMENT RECORDED BY LILY - PROGRESSIVE CAR CARE PTE LTD 67415336

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	SHD4966X
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	AU SOO HAI
NRIC/Passport Number	S0368464D
Contact Number	
Address	

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

Sketch Plan

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 Person's Signature
Name: 
NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN

SKETCH PLAN

Vehicle

A -

B -

Ag-fer tuattach

Legend

Vehicle

Motorcycle

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

refer to police report

DECLARATION

I/We declare the foregoing particulars are true in every respect.
Please be advised that your insurer may have a fourteen (14) days clause whereby the claim against own policy must be made within the stipulated time frame from the day of occurrence. Kindly check your policy for more details.

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.:



SINGAPORE POLICE FORCE



T/20190513/7007

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

Report No. T/20190513/7007

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 13/05/2019 11:49		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: LAU WAI KEAT			Address: APT BLK 635 BEDOK RESERVOIR ROAD #10-21 SINGAPORE 410635		
ID Type / ID No.: NRIC NO / S1588152F			Contact No.: Home/Office: Mobile: 96328930		
Nationality: SINGAPORE CITIZEN			Email: kelvinkeat@gmail.com		
Sex: Male	Age: 55	Date of Birth: 31/07/1963	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: IT MANAGER			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 12/05/2019 13:25	Type of Location: Straight Road
Location: SHEARES LINK				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 50 Km/h
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		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
SHD4966X	Car	HYUNDAI	i40 CRDi	Blue	Seriously Damaged	2
SJT9837U	Car	HYUNDAI	AVANTE+1. 6+AT+ABS+ D/AB+2WD+ 4DR	Red	Seriously Damaged	1

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SJT9837U	DIRECT ASIA INSURANCE (SINGAPORE) PTE. LTD.	MT/00555704	12/11/2018	11/11/2019



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

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LAU WAI KEAT	ID No.	S1588152F
Related Vehicle	SJT9837U (Car)	Contact No.	96328930
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Passenger			
Name	Wong Seck Chun	ID No.	S0821671A
Related Vehicle	SJT9837U (Car)	Contact No.	96328930
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	Slight
Driver			
Name	Au Soo Hai	ID No.	S0368464D
Related Vehicle	NIL	Contact No.	NIL
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

I was driving home with my mother in my own car from Bayfront Avenue towards Sheares Link. My mother is an 84 year-old lady and she was seated on the front left seat next to me. I was driving along Bayfront Avenue and then turned right at the traffic junction to Sheares Link, planning to go by Sheares Avenue then to ECP. I managed to cross the traffic junction normally and safely. While I was on Sheares Link for about 6 meters from the traffic junction, a Comfort Delgro Taxi, license plate SHD 4966X, suddenly cut across in front of my car from the opposing carriage way of Sheares Link via a side filtering opening or way. I could estimate the distance between us was about 2-3 feet because my license plate was later "eaten" up by his hind wheel. SHD 4966X slid across the front of my car. There were sliding marks on my car's front bumper caused by SHD 4966X. SHD 4966X



**SINGAPORE
POLICE FORCE**



T/20190513/7007

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Report No. T/20190513/7007

CONTINUATION OF REPORT

was intending to filter through to cut across the road which I was travelling on, to the entrance of Marina Bay Sand Hotel. Marina Bay Sand hotel was crowded with cars, vans and buses. SHD 4966X sped across me but somehow slowed down a little, probably due to another oncoming vehicle on my left lane. The distance was too close between us and I was not expecting this taxi SHD 4966X to cut across suddenly or I could not be stopping my car to let SHD 4966X pass. I could hardly manage to press my car horn on time, however I immediately jammed my brakes but was not possible to avoid any collision. The front left corner of my car hit SHD 4966X, the Comfort Delgro taxi's front left door at around 1:25pm. I was travelling probably at 25-30km/h after crossing the traffic junction. Even though I did not have sufficient time to react, the damages on the taxi's front left door was not as great as my car. The front left part of my car, bumper and bonnet was badly damaged. Taxi SHD 4966X had two Korean tourist passengers inside (a male and a female, probably in their 30s) and both seated behind. It seems the female was slightly hurt on her shoulder due to the impact. The male could be seated on the back seat left door and the female on the right of SHD 4966X. My mother received some impact on her chest due the seat belt tension. After the hit, my car remained on the road but the taxi SHD 4966X had already moved its position to the side of the road before I could record the original scene of the accident. No pedestrian was involved in this accident. I do not have the taxi's passenger details as they are his passengers and are foreigners.



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Report No. T/20190513/7007

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 /
ANG YI TING, STEPHANIE
Contact No.: 65476414

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:
13/05/2019 11:49

Classification Of Case: