

## 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	14/05/2019 17:37
Date Of Accident	14/05/2019 07:30
Exact Location Of Accident	START OF HILLCREST ROAD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLJ32M
<b>Insured/Policyholder</b>	
Name Of Registered Owner	GOH SIAK MING
NRIC No	S7905373B
Email Address	SIKMING@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91183160
Alternative Phone No	OTHERS-91183160

### Vehicle Particulars

Manufacturer	AUDI
Model	A4 SEDAN 1.4 TFSI S
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	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SI18V14537/VPC/R02
Cover Note Number	

### Driver

Name of Driver	GOH SIAK MING
NRIC No	S7905373B
Date Of Birth	01/03/1979
Occupation	INDOOR
Date Of Driving Pass	26/06/1998
Driving Experience	20 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91183160
Fax Number	
Contact Number	OTHERS-91183160
Email Address	SIKMING@GMAIL.COM

Address	42 HILLCREST ROAD
Postcode	288917
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 - 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	TANGLIN POLICE DIVISIONAL HQ ( 'E' DIVISION )
Police Station Address	<b>ROAD:</b> 21 KAMPONG JAVA ROAD , <b>POSTCODE:</b> 228892 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-3910000 - <b>FAX NO:</b> 63964900
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

ON 14/05/2019, 730AM, I WAS STATIONARY AT THE START OF HILLCREST ROAD, AWAITING TO TURN LEFT CUT ONTO DUNEARN ROAD. I SAW A BUS SIGNALLING LEFT TO TURN INTO HILLCREST ROAD AND AS I WAS ABOUT TO TURN LEFT ONTO DUNEARN ROAD, I FELT A BIG IMPACT OF MY VEHICLE (A). AT THAT MOMENT, MY HEAD WAS TURNED TO THE RIGHT TO SEE ONCOMING CAR AND THE IMPACT JERKED MY NECK FORWARD AND BACKWARDS AND TO THE LEFT. DESPITE THE PAIN, I GET OUT AND TOOK PHOTOS OF VEHICLE (B). MY CAR HAD BEEN PUSHED FORWARD OUT DUNEARN ROAD BY THE IMPACT. I NOTICED DAMAGE TO MY REAR BUMPER. THE DRIVER OF VEHICLE (B), TOLD ME SHE HAD ONLY SEEN THE BUS TURNING IN AND FORGOT TO CHECK THE FRONT AND STEPPED ON ACCELERATOR, KNOCKING INTO MY CAR. ROAD WAS DRY. (POLICE REPORT ATTACHED)

#### 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	SLP1887A
Vehicle Make/Model/Colour	MERCEDES /CLA/ BLUE
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	PU XIA
NRIC/Passport Number	S7188474J

Contact Number	91380136
Address	
Postcode	
Insurance Company Name	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Nature Of Damage	
No. Of Passenger (Including Driver)	

#### DETAILS OF INJURED PERSON 1

Name	
Approximate Age	
Injuries Sustain	PAIN AT NECK
Injured person in which vehicle?	SLJ32M
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

## Sketch Plan

### SKETCH PLAN

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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:

14/5/19.  
3:15pm

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

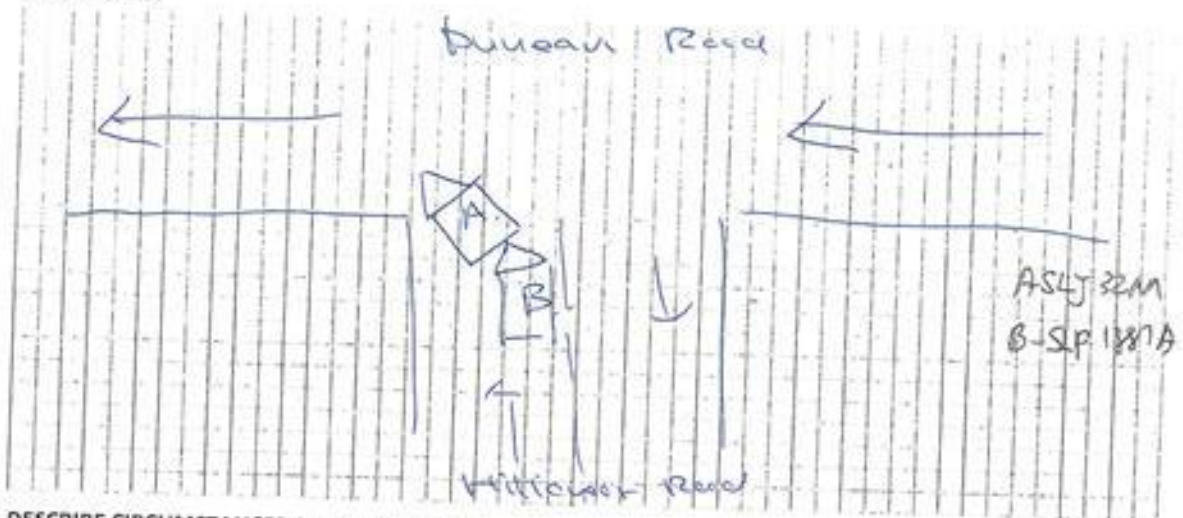
Name: NONG BAHAR SARI, Sy

NRIC/FIN No.: C287143X



## Sketch Plan #2

### SKETCH PLAN



### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 14/5/19, around 730am, I was stationary at the start of Hillcrest Road, awaiting to turn left out onto Duneau Road. I saw a bus signalling left to turn into Hillcrest Road and as I was about to turn left onto Duneau Road, I felt a big impact in the rear of my vehicle (A). At that moment, my head was turned to the right to see oncoming car and the impact jerked my neck forwards and backwards and to the left. Despite the pain, I got out and took photos of vehicle B. My car had been pushed forward onto Duneau Road by the impact. I noticed damage to my rear bumper. The driver of vehicle B told me she had only seen the bus turning in and forgot to check the front and stepped on accelerator, knocking into my car. Road was dry.

### DECLARATION

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

*[Signature]*

Policyholder's Signature  
Date & Time:

14/5/19  
320pm

Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

*[Signature]*

Reporting Centre Personnel's Signature

Name: *[Signature]*  
NRIC/FIN No: 62971752



# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



E/20190515/7006

1 of 2

## POLICE REPORT (NP299)

Report No. E/20190515/7006

Police Station Of Origin  
Tanglin Division HQ  
21 Kampong Java Road SINGAPORE  
228892  
Tel No:1800-3910000

Date/Time Report Made 15/05/2019 10:14	Vide Report No.	Station Diary No.
Name Of Informant GOH SIAK MING	Address 42 HILLCREST ROAD SINGAPORE 288917	
ID Type / ID No. NRIC NO / S7905373B	Contact No. Home/Office:	Mobile: 91183160
Nationality SINGAPORE CITIZEN	Email Address siakming@gmail.com	
Occupation Doctor	Sex Male	Age 40
Institution/School Name	Date of Birth 01/03/1979	Race Chinese
Date/Time Of Incident 14/05/2019 07:25 - 14/05/2019 07:30	Location Of Incident HILLCREST ROAD	

### Brief details.

at around 730am, my vehicle SLJ 32 M was stationary at the start of hillcrest road, awaiting on coming traffic to clear before turning left out to dunearn road. I was looking right and saw a large bus turning left into hillcrest road. Just as I was about to move off, I felt a huge impact on the rear of my car. the vehicle behind had hit into my car. the driver name is Pu Xia and Vehicle registration number is SLP 1887A. the impact jerked my neck backwards and forwards and to the left. my vehicle was also pushed forward onto dunearn road into oncoming traffic as a result. i felt neck pain, nausea and headache but i got down from the car to settle the details as it would obstruct all the traffic coming out from hillcrest road. the driver of the car told me she only concentrated on seeing the bus turn in and she stepped on the accelerator to

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: 15/05/2019 10:14
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp

# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



E/20190515/7006

2 of 2

POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. E/20190515/7006

move without checking the front.

road condition was dry.

i am making this report for record purposes as well as a report for careless driving as this could have resulted in further injury if there was a oncoming car .

<b>Subjects Involved</b>			
<b>Suspect</b>			
Person Name	pu xia		
ID Type	NRIC NO	ID No	S7188474J
Gender	Female	Home/Office No	91380136
<b>Victim</b>			
Person Name	GOH SIAK MING		
ID Type	NRIC NO	ID No	S7905373B
Gender	Male	Age	40
Race	Chinese	Language	English
Occupation	Doctor	Address Type	
Address	42 HILLCREST ROAD SINGAPORE 288917		Mobile No
Is Informant A Victim?	Yes		
Person Name	GOH SIAK MING (Informant)		

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: 15/05/2019 10:14
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

