

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	28/05/2019 12:52
Date Of Accident	27/05/2019 20:00
Exact Location Of Accident	JUNCTION OF BAYFRONT AVE AND MARINA BOULEVARD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLP5542T
Insured/Policyholder	
Name Of Registered Owner	LIM CHOO LEONG (LIN ZHULONG)
NRIC No	S7426689D
Email Address	BRANDANLIM@GMAIL.COM
Mobile Phone No	(LOCAL) +65-92955529
Alternative Phone No	OTHERS-92955529

Vehicle Particulars

Manufacturer	HONDA
Model	SHUTTLE-1.5 G (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	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN30474218011
Cover Note Number	

Driver

Name of Driver	LIM CHOO LEONG (LIN ZHULONG)
NRIC No	S7426689D
Date Of Birth	03/08/1974
Occupation	INDOOR
Date Of Driving Pass	22/07/1994
Driving Experience	24 YEARS AND 10 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-92955529
Fax Number	
Contact Number	OTHERS-92955529
EEmail Address	BRANDANLIM@GMAIL.COM

Address	BLK 2 KITCHENER LINK #04-06
Postcode	207229
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 - CHANGE/CROSS LANE
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: : FAHRUNG CHATCHAMINI GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	CENTRAL POLICE DIVISIONAL HQ (A DIVISION)
Police Station Address	ROAD: 391 NEW BRIDGE ROAD #03-112 POLICE CANTONMENT COMPLEX BLOCK A , POSTCODE: 088762 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2240000 - FAX NO: 62200877
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN AND POLICE REPORT: A/20190528/7013.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	SD CARD WITH TRAFFIC POLICE
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SHF362D
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	

Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

SKETCH PLAN

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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)**

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.

P
Date

Signature

28 MAY 2019

12:52 pm

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

NRIC/PIN No.: **Kwee Choo**
S6840583A

SKETCH PLAN

→ Bayfront Ave

traffic light

SLP 5542T

SHF 362D taxi

Marine Bay Sound

Marina Boulevard

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police report: A/20190528/7013.

DECLARATION

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

Policyholder Signature _____

Date & Time

78 MAY 2013

Driver's Signature

(If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature

Name:

Name: **Pon Kwee Choo**
NRIC/FIN No.: **S6840583A**



**SINGAPORE
POLICE FORCE**



A/20190528/7013

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POLICE REPORT (NP299)

Report No. A/20190528/7013

Police Station Of Origin
Central Division HQ
A 391 New Bridge Road #03-112 Police
Cantonment Complex SINGAPORE 088762
Tel No:1800-2240000

Date/Time Report Made 28/05/2019 11:20	Vide Report No.	Station Diary No.
Name Of Informant LIM CHOO LEONG	Address BLK 2 KITCHENER LINK #04-06 SINGAPORE 207229	
ID Type / ID No. NRIC NO / S7426689D	Contact No. Home/Office: Mobile: 92955529	
Nationality SINGAPORE CITIZEN	Email Address brandanlim@gmail.com	
Occupation	Sex	Age
Property Management	Male	44
Institution/School Name	Date of Birth	Race
	03/08/1974	Chinese
Date/Time Of Incident 27/05/2019 20:00 - 27/05/2019 21:30	Language English	
	Location Of Incident REPORT NO: A120190527/104 BAYFRONT AVENUE ROAD TURNING TOWARDS MARINA BOULEVARD	

Brief details.

My car SLP5542T

The car who hit me is Taxi driver who number plate SHF362D.

What led to the incident - i was driving along the Bay Front ave heading to turn right to marina boulevard , it was green light so i drive out a bit and keep a look out for any blind spot. I have totally no intention to turn yet at the moment. My car was stationary at that moment, only the taxi car SHF362D incoming

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: 28/05/2019 11:20
Officer In-Charge Of Case:	Classification Of Case:

Authentication Stamp



**SINGAPORE
POLICE FORCE**



A/20190528/7013

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. A/20190528/7013

vehicle from opposite direction. The taxi car is driving on the right lane within the three big lane of the road. There is no other car at the opposite traffic except one taxi SHF362D driving from a far distance. His car was far away distance before the traffic light away. i notice there is 3 or 4 big lane. The taxi car was on his extreme right lane. He got more than enough time to react to avoid this collision. i have given my video clip to the police officer.

What happened during the incident?

This taxi car just speed up and hit me and the tip front of my car. It seems to me like he drive nearer to hit me directly.

i have one witness who is my friend FAHRUNG CHATCHAMINI, she witness the scene. Both of us see the car from a distance driving toward us .

After that the taxi driver came out to check the condition of the car and took my picture and walk around. so i took his picture of him too. He seems to make some phone call and i saw another taxi driver come over after a while mins later. He is driving a white menz taxi. Then later on, he walk to the side of the traffic light lie on the floor. Both of them seems good friend. Then he begin calling the ambulance. i have the picture of him too making a phone call standing strong.

Subjects Involved	
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: 28/05/2019 11:20
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	



**SINGAPORE
POLICE FORCE**



A/20190528/7013

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. A/20190528/7013

Victim			
Person Name	LIM CHOO LEONG		
ID Type	NRIC NO	ID No	S7426689D
Gender	Male	Age	44
Race	Chinese	Language	English
Occupation	Property Management	Address Type	
Address	BLK 2 KITCHENER LINK #04-06 SINGAPORE 207229	Mobile No	92955529
Is Informant A Victim?	Yes		
Person Name	FAHRUNG CHATCHAMINI		
ID Type	PASSPORT	ID No	AA8716688
Gender	Female	Age	20
Race	Thai	Language	English
Occupation	Retail/Shop sales manager	Relation To Informant	FRIEND
Person Name	LIM CHOO LEONG (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: 28/05/2019 11:20
Officer In-Charge Of Case:	Classification Of Case:
Authentication Stamp	



SINGAPORE POLICE FORCE
ACKNOWLEDGEMENT SLIP

Ref: Report No:

A/20190527/104

I, _____

SGT2 T180293 Syafiq

(Recipient's Name, Contact No. / NRIC or Passport No. / Rank and No.)

of _____

TPHQ

(Address / Police Station / NPC / NPP)

hereby acknowledge receipt of the below mentioned items of:

1 1x 16 GB MicroSD card

2 _____

3 _____

4 _____

5 _____

6 _____

7 _____

8 _____

9 _____

10 _____

from _____

(Name, NRIC or Passport No. / Rank and No.)

of _____

(Address / Police Station / NPC / NPP)

on _____

27/05/2019

(Date)

at _____

2115hrs

(Time)

Witnessed by / * Handed over by:

(* Delete if applicable)

(Signature)

Lim Choo Leong

(Name, NRIC or Passport No. / Rank and No.)

Received by:

(Signature)

SGT2 T180293 Syafiq

(Name, Contact No. / NRIC or Passport No. / Rank and No.)

Other Remarks: _____

DRIVER'S NRIC + DRIVING LICENCE Pg. 1


REPUBLIC OF SINGAPORE
ENTITY CARD NO. S7426689D




Name
LIM CHOO LEONG
(LIN ZHULONG)
林 朱 龙
Race
CHINESE
Date of birth 03-08-1974 Sex M
Country of birth
SINGAPORE



REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S7426689D
Name:
LIM CHOO LEONG
(LIN ZHULONG)
Birth Date: 03 Aug 1974
Issue Date: 07 Apr 2003



NRIC No. S7426689D



Date of issue
08-12-2011


BLK 2 KITCHENER LINK #04-06
SINGAPORE 207229
NRIC No: S7426689D Date: 04/10/2018

YOU ARE LICENCED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)

	PASS DATE
Class 2B Motorcycles not exceeding 200 cc	27 Apr 1993
Class 2A Motorcycles between 201 cc and 400 cc	20 Jul 1994
Class 3 Motor Cars and Motor Tractors the weight of which unladen does not exceed 2500 kilograms	22 Jul 1994

NP 428A

Licence No: S7426689D



Accident Photo



Accident Photo



Accident Photo





Accident Photo



Accident Photo



Accident Photo



CHASSIS NUMBER

