#### 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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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.

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	ACCIDENT STATEMENT
Date Of Report	03/06/2019 10:40
Date Of Accident	01/06/2019 13:45
Exact Location Of Accident	BEDOK RESERVOIR VIEW TWDS BEDOK RESERVOIR RD
Country/State of Loss	SINGAPORE
1	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLL6513S
Insured/Policyholder	
Name Of Registered Owner	MR KHOO LIP HONG
NRIC No	S1487030Z
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98393370
Alternative Phone No	OFFICE-98393370
Vehicle Particulars	
Manufacturer	NISSAN
Model	QASHQAI 2.0 CVT ABS D/AIRBAG 2WD 5DR S/R
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	DMPCSN1716931902
Cover Note Number	
Driver	
Name of Driver	SOH BEE KENG
	- · ·

Name of Driver

NRIC No

S1756470F

Date Of Birth

24/08/1966

Occupation

INDOOR

Date Of Driving Pass

21/12/1987

Driving Experience 31 YEARS AND 5 MONTHS

Gender FEMALE

Mobile Number (LOCAL) +65-98393370

Fax Number

Contact Number OFFICE-98393370

EMail Address NOEMAIL

11 BEDOK RESERVOIR VIEW Address

#01-01 478931

Was driver an employee of the Insured's Company NO

If No, Relationship of the Driver with the Insured **SPOUSE** 

Vehicle Registration Number of Driver's Own

Vehicle

Insurance Company of Driver's Own Vehicle

**General Information of the Accident** 

COLLISION - CHANGE/CROSS LANE Type Of Accident

Weather Conditions **CLEAR** Road Surface DRY

Other Information

Postcode

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?

YES

Was any other material or property damaged? I have been approached by unknown person(s)

soliciting/offering accident claims assistance.

NO 1

Number of Passengers (Including Driver)

**Details of Police Action** 

Was the accident reported to the police?

If Yes, Please state which Police Station

Police Station Name TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY

NO

YES

ROAD: 10 UBI AVENUE 3, POSTCODE: 408865, COUNTRY:

Police Station Address **SINGAPORE** 

Police Station Contact TEL NO: 65470000 - FAX NO:

Was notice of intended Prosecution given?

If Yes, against whom?

**Circumstances of Accident** 

REFER TO POLICE REPORT - T/20190601/7019.

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES NO

Was there any audio recorded?

**DETAILS OF OTHER VEHICLE PROPERTY 1** 

Vehicle Registration Number SJB633U

Vehicle Make/Model/Colour

**Details Of Properties** 

PRIVATE CAR Vehicle Category

Name of Driver

NRIC/Passport Number

**Contact Number** 

Address

Postcode

Insurance Company Name

Page 2 of 24

#### Accident Sketch Plan

#### SKETCH PLAN

#### IMPORTANT NOTICE

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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.
- 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:
  - 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 invoive 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:

5

Driver's Signature (If driver is not the policyholder)

Date & Time:

Reporting Centre Personnel's Signature Name:

NRIC/FIN No.

#### **Accident Sketch Plan**

SKETCH PLAN

DECLARATION

Policyholder's Signature Date & Time:

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

Driver's Signature

Date & Time:

(If driver is not the policyholder)

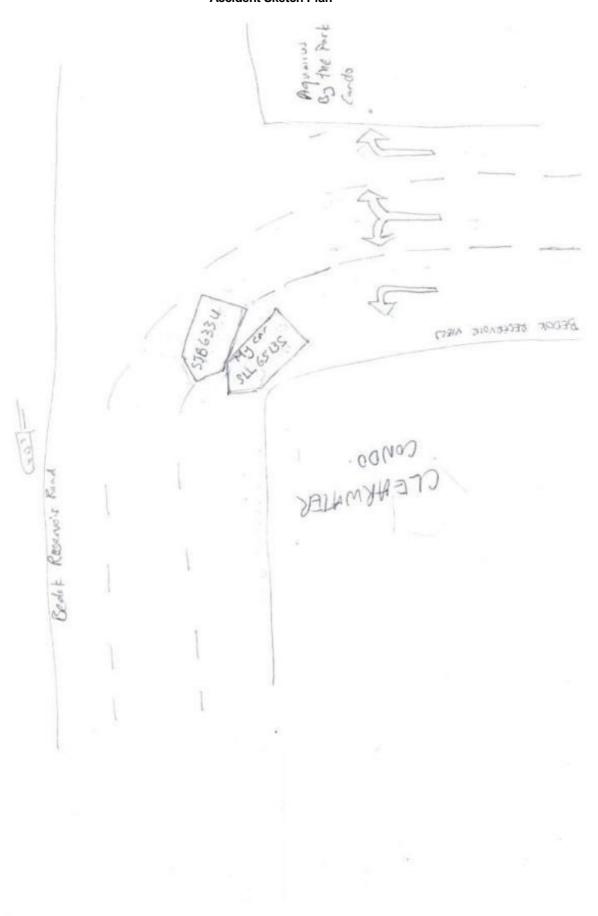
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Refer	to	Police	Report	
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Reporting Centre Personnel's Signature

Name: NRIC/FIN No.:

# **Accident Sketch Plan**



#### **Police Report**



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

1 of 3 Report No. T/20190601/7019

DEBORT	OF A	TRAFFIC	ACCIDENT	ľ

	ate/Time Report Made: 1/06/2019 20:40		Vide Report No.:	Station Diary No.:	
Informan	t's Particu	ulars		THE RESIDENCE OF THE PARTY OF T	
Name of Informant: SOH BEE KENG			Address: 11 BEDOK RESERVOIR VIEW #01-01 SINGAPORE 478931		
ID Type / ID No.: NRIC NO / S1756470F			Contact No.: Home/Office: Mobile: 98393370		
Nationality: SINGAPORE CITIZEN		EN	Email: eileensbk@hotmail.com		
Sex: Age: Date of Birth: Female 52 24/08/1966		A STATE OF THE PARTY OF THE PAR	Type of Informant: Driver		
Race: Chinese			Language: Institution / School Nat English		
Occupation: Real estate agent			Driving Licence Information: Class: Date of Expiry:		

Type of Accident:	Non-Injury Drink Date/Time of Accident:			Type of Location T-Junction
Weather:	ERVOIR VIEW	Road Surface:		Road Speed Limit:
Clear		77.40		
Traffic Flow: Dual Carriage	Way	Traffic Control: Traffic Light - Wo	rking	Traffic Volume: Light

Details of Vehicle Involved						
Vehicle No.	Туре	Make	Model	Color	Condition	No of Passenger
SJB633U	Car	TOYOTA	CAMRY	Black		0
SLL6513S	Car					0

Details of Person Involved	
Any Pedestrian Involved: No	CHANGE WAS A STATE OF THE STATE
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

#### **Police Report**



Police Station Of Origin: Traffic Police

10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000

2 of 3 Report No. T/20190601/7019

#### CONTINUATION OF REPORT

Driver		10 Lani		- ALEKS		
Name	SOH BEE KENG			ID No		S1756470F
Related Vehicle	SLL6513S (Car)			Conta	ct No.	98393370
Hospital/Clinic	NIL			Class Drivin Licen Expin	g	Class: NIL Date of Expiry: NIL
Date Treatment	NIL Date Dis			harge	NIL	
No. of Days granted Medical Leave NIL			Degree o	finjury	NIL	

#### Brief Details.

I am the driver of SLL6513S. I was making a left turn from Bedok Reservoir View into Bedok Reservoir Road. As my vehicle approached the T-Junction from the leftmost lane, I stopped my vehicle to yield to the pedestrians crossing, as the lights were in their favour. While stationary, SJB633U made a left turn from the middle lane of Bedok Reservoir View into Bedok Reservoir Road, cutting into my lane and collided with the frontal right side of my vehicle. SJB633U did not yield to pedestrians crossing as well. Subsequent attempts to signal to the driver of SJB633U was ignored, and the driver sped off after the collision. The driver was a female driver appearing to be middle aged and of Chinese race. I have a video of the incident of the incident.

#### **Police Report**





Police Station Of Origin: Traffic Police 10 Ubi Avenue 3 SINGAPORE 408865 Tel No: 65470000 3 of 3 Report No. T/20190601/7019

CONTINUATION OF REPORT

Sketch Plan

NP168

Informant is not able to provide sketch plan

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: 01/06/2019 20:40
Officer In Charge Of Case: TP / TPIB / IRMAN BIN MOHAMAD SAID Contact No.: 65476145	Classification Of Case:
Authentication Stamp	















