

## 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	10/06/2019 12:37
Date Of Accident	04/06/2019 21:15
Exact Location Of Accident	WOODLANDS CUSTOM TOWARDS SINGAPORE
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJN6971R
<b>Insured/Policyholder</b>	
Name Of Registered Owner	POH YEW GHEE
NRIC No	S1636344H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96153390
Alternative Phone No	OFFICE-96153390

### Vehicle Particulars

Manufacturer	MITSUBISHI
Model	LANCER EX-1.5 MIVEC ELEGANCE (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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

### Insurance Company

Name of Insurance Company	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA134116/1
Cover Note Number	

### Driver

Name of Driver	POH YEW GHEE
NRIC No	S1636344H
Date Of Birth	28/12/1964
Occupation	INDOOR
Date Of Driving Pass	18/10/1982
Driving Experience	36 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96153390
Fax Number	
Contact Number	OFFICE-96153390
EEmail Address	NOEMAIL

Address	BLK 336A YISHUN STREET 31 #05-03
Postcode	761336
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	NO COLLISION
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)	3
Passenger 1	NAME: : MR WONG GENDER: : MALE
Passenger 2	NAME: : DANIEL NG GENDER: : MALE

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	YISHUN SOUTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 32 YISHUN ST 81 , <b>POSTCODE:</b> 768456 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-8522999 - <b>FAX NO:</b> 68522239
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO SKETCH PLAN AND POLICE REPORT.

#### 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	SJZ5593S
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	

Contact Number

Address

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

**SKETCH PLAN**

**IMPORTANT NOTICE**

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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.

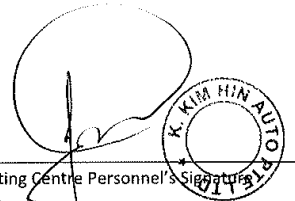
Policyholder's Signature  
Date & Time:

*[Signature]*

16/6/18 @ 12.25 pm

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

Reporting Centre Personnel's Signature  
Name:  
NRIC/FIN No.:



### SKETCH PLAN

No sketch

**DESCRIBE CIRCUMSTANCES OF THE ACCIDENT**

Refer to Alice Report L/20190608/2108

## DECLARATION

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

Policyholder's Signature

Date &amp; Time:

Company Chop (if applicable)

GLARMC SketchPlatform V3

Driver's Signature

(If driver is not the policyholder)

Date &amp; Time:

Reporting Centre Personnel's Signature \_\_\_\_\_

Name:

NRIC/FIN No.





**SINGAPORE  
POLICE FORCE**



L/20190608/2108

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**POLICE REPORT (NP299)**

Report No. L/20190608/2108

Police Station Of Origin  
Yishun South N.P.C  
32 Yishun Street 81 SINGAPORE 768456  
Tel No: 1800-8522999

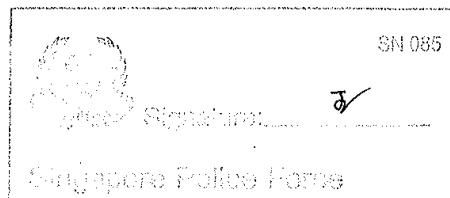
Date/Time Report Made 08/06/2019 23:03		Vide Report No.		Station Diary No. 105	
Name Of Informant POH YEW GHEE		Address APT BLK 336A YISHUN STREET 31 #05-03 SINGAPORE 761336			
ID Type / ID No. NRIC NO / S1636344H		Contact No. Home/Office                      Mobile 96153390			
Nationality SINGAPORE CITIZEN		Email Address			
Occupation Golf Coach		Sex Male	Age 54	Date of Birth 28/12/1964	Race Chinese
Institution/School Name		Language English			
Date/Time Of Incident 07/06/2019 18:00		Location Of Incident APT BLK 336A YISHUN STREET 31 YISHUN RIVERWALK SINGAPORE 761336 Unit #05-03			

**Brief details.**

On 07/06/19 at about 1800hrs, I received a call from my wife namely, Yeow Kin Choo, contact: 84370889. My wife told me that she found one white envelope outside my unit door. The said envelope was addressed to me. Inside the letter, I was told that my vehicle, SJN6971R was involved into an accident with another vehicle, SJZ5593S at Woodlands Custom towards Singapore on 04/06/19 at 2115hrs. I was advised to make the accident report to my own insurance company. There was a name

Signature Of Officer Recording The Report: L / Sgt 2 OOI JIA JUN <i>JJA</i>	Signature Of Informant: <i>JJA</i>
Signature Of Interpreter: Not applicable	Date/Time: 08/06/2019 23:03
Officer In-Charge Of Case: L / Woodlands Police Divisional Investigation Branch / Insp LIM JING XIANG Contact No.: 64660000	Classification Of Case:

Authentication Stamp


*JJA*



**SINGAPORE  
POLICE FORCE**



L/20190608/2108

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. L/20190608/2108

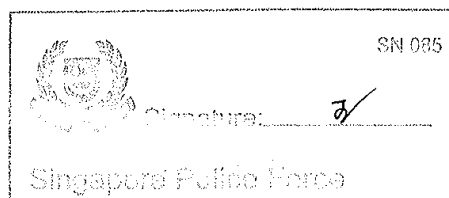
and contact number stated inside the letter if I have any advice or require further clarification.

My friend also called Mrs Yau, contact: 94389916 on behalf for me. Mrs Yau told my friend that on behalf of her client, she sent the said letter to me. I wish to state that on 04/06/19 at unknown timing, I did recall I was at Woodlands Custom, travelling back Singapore however I am unsure if my car did hit onto anyone else vehicle. I also checked with my two passengers and they told me they did not see my vehicle hit onto any vehicle on 04/06/19.

On 07/06/19, I did went to take a look at my vehicle and noticed there were few scratches found near to the left rear tire however I am unsure when my vehicle had the scratches after I came back from Malaysia on 04/06/19. I wish to state that I did drove my vehicle everyday. There is no in car camera installed inside my car.

Signature Of Officer Recording The Report: L / Sgt 2 OOI JIA JUN <i>[Signature]</i>	Signature Of Informant: <i>[Signature]</i>
Signature Of Interpreter: Not applicable	Date/Time: 08/06/2019 23:03
Officer In-Charge Of Case: L / Woodlands Police Divisional Investigation Branch / Insp LIM JING XIANG Contact No.: 64660000	Classification Of Case:

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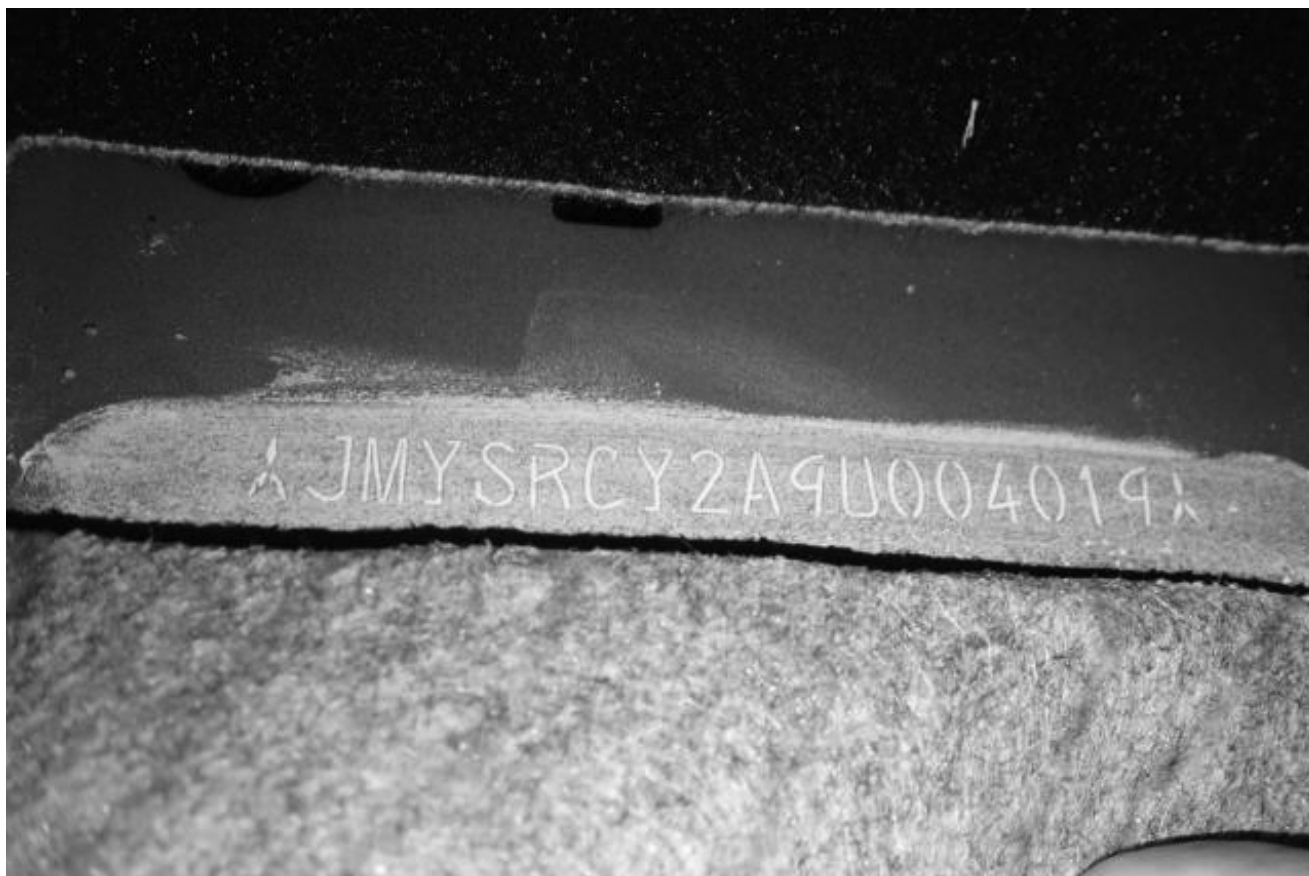


Accident Photo





Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

