

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	25/06/2019 15:28
Date Of Accident	22/06/2019 17:30
Exact Location Of Accident	NEW UPPER CHANGI ROAD (BEDOK MALL CARPARK ENTRY)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLP738D
Insured/Policyholder	
Name Of Registered Owner	ONG CHEE HIEN
NRIC No	S7307328F
Email Address	ONG_CHEE_HIEN@SPF.GOV.SG
Mobile Phone No	(LOCAL) +65-93249009
Alternative Phone No	OFFICE-93249009

Vehicle Particulars

Manufacturer	RENAULT
Model	MEGANE-1.5 D SEDAN DCI AT EU6 (M)
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	QBE INSURANCE (SINGAPORE) PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	8-VOO22409-MVA
Cover Note Number	

Driver

Name of Driver	ONG CHEE HIEN
NRIC No	S7307328F
Date Of Birth	26/02/1973
Occupation	INDOOR
Date Of Driving Pass	29/02/1996
Driving Experience	23 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93249009
Fax Number	
Contact Number	OFFICE-93249009
Email Address	ONG_CHEE_HIEN@SPF.GOV.SG

Address	55 TAMPINES CENTRAL 7 #01-10
Postcode	528617
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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	RAINING
Road Surface	WET

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)	2
Passenger 1	NAME: SLOW PI CHIN GENDER: FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	10 UBI AVENUE 3
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

ATTACHMENT POLICE REPORT NO: T/20190623/7009

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMD7067L
Vehicle Make/Model/Colour	CITREON
Details Of Properties	CAR B
Vehicle Category	PRIVATE CAR
Name of Driver	TOSHNIWALL RITESH SHRIRAM
NRIC/Passport Number	S7560962J
Contact Number	91850426

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:

25-06-19. 16.10

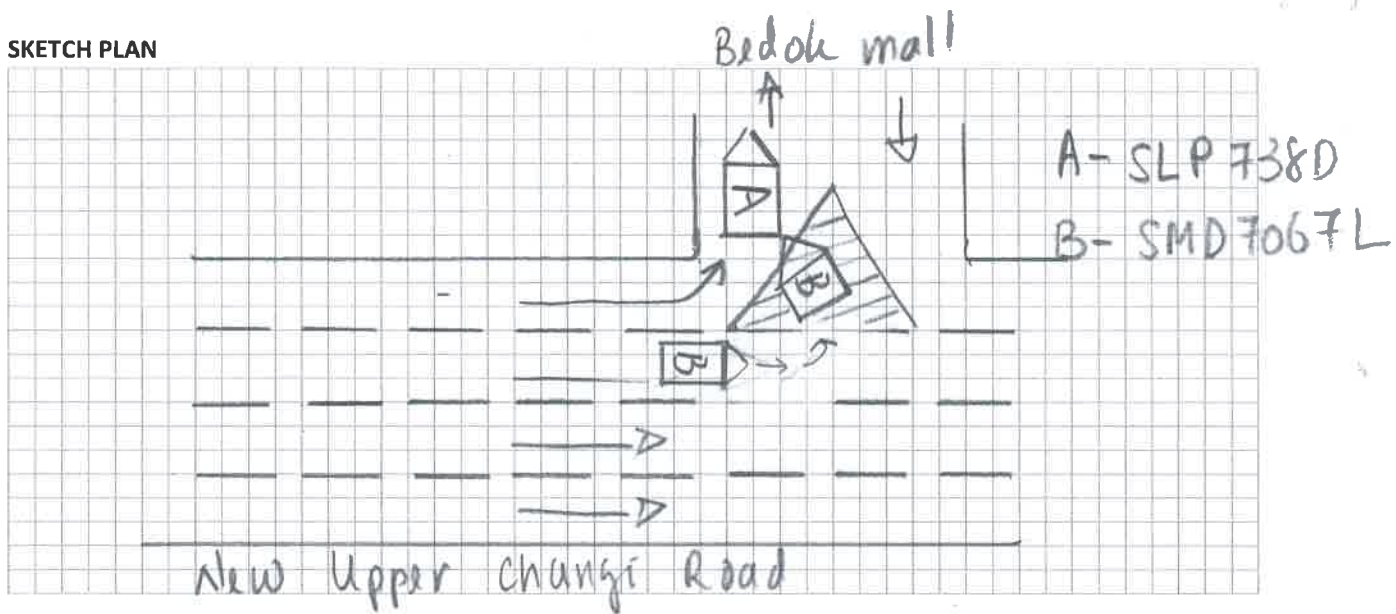
Driver's Signature
(If driver is not the policyholder)
Date & Time:



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

25/06-19

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Attachment police report N^o = T/2019 0623/7009

DECLARATION

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

Policyholder's Signature

Date & Time:

25.06.19 16.09

GIARMC SketchPlanForm

Driver's Signature

(If driver is not the policyholder)

Date & Time:



Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

[Signature]

25/06-19



SINGAPORE POLICE FORCE



T/20190623/7009

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

1 of 4

Report No. T/20190623/7009

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 23/06/2019 15:29	Vide Report No.:	Station Diary No.:
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Informant's Particulars

Name of Informant: ONG CHEE HIEN			Address: 55 TAMPINES CENTRAL 7 #01-10 SINGAPORE 528617		
ID Type / ID No.: NRIC NO / S7307328F			Contact No.: Home/Office: Mobile: 93249009		
Nationality: SINGAPORE CITIZEN			Email: ONG_Chee_Hien@spf.gov.sg		
Sex: Male	Age: 46	Date of Birth: 26/02/1973	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Police officer			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 22/06/2019 17:30	Type of Location: T-Junction
Location: NEW UPPER CHANGI ROAD				
Weather: Cloudy		Road Surface: Wet		Road Speed Limit: 40 Km/h
Traffic Flow: Two Way		Traffic Control: Not Controlled		Traffic Volume: Light
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLP738D	Car	RENAULT	MEGANE GT LINE 1.5DCI AT	Black		0
SMD7067L	Car	CITROEN			Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SLP738D	QBE Insurance (Singapore) Pte Ltd	V0022409	26/05/2019	25/05/2020



SINGAPORE POLICE FORCE



T/20190623/7009

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

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Report No. T/20190623/7009

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	ONG CHEE HIEN	ID No.	S7307328F
Related Vehicle	SLP738D (Car)	Contact No.	93249009
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	NIL
Passenger			
Name	SLOW PI CHIN	ID No.	S7709644B
Related Vehicle	SLP738D (Car)	Contact No.	NIL
Hospital/Clinic	VIVA MEDICAL CLINIC	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	23/06/2019	Date Discharge	23/06/2019
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Driver			
Name	TOSHNIWAL RITESH SHRIRAM	ID No.	S7560962J
Related Vehicle	SMD7067L (Car)	Contact No.	91850426
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	NIL

Brief Details.

On 22.6.2019 @1730 hrs, at the carpark entrance into Bedok Mall, my car was collided at the rear by another car no. SML7067L.

I was travelling along New Upp Changi Rd on lane 4 of 4 lanes Rd when SML7067L who was on lane 3 made a sudden lane switch into lane 4 and wanted to cut into my lane but unsuccessful. Subsequently when I had turned left into the carpark entrance of Bedok Mall, SML7067L made an illegal left turn from lane 3, which is a straight only lane, crossed the chevron marking and collided into my car's right rear.



**SINGAPORE
POLICE FORCE**



T/20190623/7009

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

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Report No. T/20190623/7009

CONTINUATION OF REPORT

My passenger, Siow Pi Chin sustained head and neck pain. Subsequently she went to see doctor and was given 3 days ML.



SINGAPORE POLICE FORCE



T/20190623/7009

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

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Report No. T/20190623/7009

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 / TPHQ /
JUREMAH BINTE AHMAD
Contact No.: 65472076

Authentication Stamp

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
23/06/2019 15:29

Classification Of Case: