

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	08/07/2019 14:37
Date Of Accident	07/07/2019 14:45
Exact Location Of Accident	PAN ISLAND EXPRESSWAY(CHANGI)BEFORE EXIT 19 LANE 1
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMH7017K
Insured/Policyholder	
Name Of Registered Owner	PEJ GEN LI
NRIC No	S9012013A
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-94879527
Alternative Phone No	Others-94879527

Vehicle Particulars

Manufacturer	KIA
Model	CERATO
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	THIRD PARTY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1900007347
Cover Note Number	

Driver

Name of Driver	PEJ GEN LI
NRIC No	S9012013A
Date Of Birth	11/04/1990
Occupation	INDOOR
Date Of Driving Pass	04/11/2010
Driving Experience	8 YEARS AND 8 MONTHS

Gender	MALE
Mobile Number	(LOCAL) +65-94879527
Fax Number	
Contact Number	OTHERS-94879527
EMail Address	NOEMAIL
Address	BLK 310 YISHUN RING ROAD #10-1234
Postcode	760310
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	CHAIN COLLISION
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	3
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: : WONG FEI YI Gender: : Male

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO ATTACHMENT

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	SKU4394X
Vehicle Make/Model/Colour	BMW/523I/BLACK

Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	JANNASSA NEO JIA LING
NRIC/Passport Number	S9037140A
Contact Number	83333200
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	SMJ7257Z
Vehicle Make/Model/Colour	MERCEDES BENZ/BROWN
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	ALKHANSA' BINTI AHZAMSHAH
NRIC/Passport Number	S9708098D
Contact Number	83991403
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

DETAILS OF INJURED PERSON 1

Name	PEH GEN LI
Approximate Age	
Injuries Sustain	WHIPLASH
Injured person in which vehicle?	SMH7017K
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

DETAILS OF INJURED PERSON 2

Name	WONG FEI YI
Approximate Age	
Injuries Sustain	WHIPLASH
Injured person in which vehicle?	SMH7017K
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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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:

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



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

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

- Incident happened on 7 July 2019 at around 1447hrs at PIE Expressway before Exit 19 (Towards Changi, Lane 1). The car in front (SMJ 7257Z) slowed down in front and I followed suit, leaving a distance behind the front car. About 2-3 seconds later, I felt an impact from the rear (BMW SKU 4394X) and upon impact my car jerked in front. A second impact followed suit about 1 second later.
- After the accident, I switched on hazard light and exit the car to check the damage, take photographs and exchange particulars.
- Shortly after the traffic police (TP) also came to take photographs and ~~exchange~~ ^{took down} particulars.
- Also downloaded the in-car camera (front and back).
- Also felt discomfort and went to A&E for checkup. Given 5 days MC.
- Police report made.

DECLARATION

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

Policyholder's Signature
Date & Time:

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

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

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



T/20190708/7000

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

1 of 4
Report No: T/20190708/7000

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 08/07/2019 03:27		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: PEH GEN LI		Address: APT BLK 310 YISHUN RING ROAD #10-1234 SINGAPORE 760310			
ID Type / ID No.: NRIC NO / S9012013A		Contact No.:		Mobile: 94879527	
Nationality: SINGAPORE CITIZEN		Email: jasonpeh@outlook.com			
Sex: Male	Age: 29	Date of Birth: 11/04/1990	Type of Informant: Driver		
Race: Chinese		Language: English		Institution / School Name:	
Occupation: Administration manager		Driving Licence Information: Class: 3		Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 07/07/2019 14:50	Type of Location: Expressway (PIE)
Location: PAN-ISLAND EXPRESSWAY (Towards Changi, Bef Exit 19 Steven Rd, Lane 1)				
Weather: Raining	Road Surface: Wet	Road Speed Limit: 90 Km/h		
Traffic Flow: Dual Carriage Way	Traffic Control:	Traffic Volume: Moderate		
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
SKU4394X	Car	BMW	523	Black	Slightly Damaged	2
SMH7017K	Car	KIA	CERATO 1.6(A) SX	Silver	Seriously Damaged	2
SMJ7257Z	Car	MERCEDES BENZ		Brown	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
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Police Report



**SINGAPORE
POLICE FORCE**



T120190708/7000

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

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Report No. T120190708/7000

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No.	Effective	Expiry Date
SMH7017K	AIG ASIA PACIFIC INSURANCE PTE. LTD.	1900007347	30/01/2019	29/01/2021
SMJ7257Z	NTUC Income Insurance Co-Operative Limited			

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA		
Driver				
Name	JANNASSA NEO JIA LING	ID No.	S9037140A	
Related Vehicle	SKU4394X (Car)	Contact No.	83333200	
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL	
Date Treatment	NIL	Date Discharge	NIL	
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL	
Driver				
Name	PEH GEN LI	ID No.	S9012013A	
Related Vehicle	SMH7017K (Car)	Contact No.	94879527	
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL	
Date Treatment	07/07/2019	Date Discharge	07/07/2019	
No. of Days granted Medical Leave	05	Degree of Injury	Slight	
Passenger				
Name	WONG FEI YI	ID No.	S9223310C	
Related Vehicle	SMH7017K (Car)	Contact No.	93881952	
Hospital/Clinic	MOUNT ALVERNIA HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL	
Date Treatment	07/07/2019	Date Discharge	07/07/2019	
No. of Days granted Medical Leave	05	Degree of Injury	Slight	

Police Report



**SINGAPORE
POLICE FORCE**



T/20190708/7000

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

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Report No. T/20190708/7000

CONTINUATION OF REPORT

Driver			
Name	ALKHANSA' BINTI AHZAMSHAH		ID No. S9706098D
Related Vehicle	SMJ7257Z (Car)		Contact No. 83991403
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Vehicle Owner			
Name	AARON RYLAN		ID No. NIL
Related Vehicle	NIL		Contact No. 81394958
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.

-Incident happened on 7 July 2019 at around 1447hrs, at PIE expressway before steven rd exit (lane 1).
 -I was traveling along PIE on lane 1, it was raining prior to that stretch. The first car (Merc. SMJ7257Z) slowed down in front of me and I followed suit. Leaving a distance behind the front car. About 2-3 seconds later, I felt an impact from the rear (BMW, SKJ4394X) and my car jerked forward as a result from the impact. Another impact (2nd time) followed suit about 1 second later, I am involved in a chain collision as the car in the center.
 -After my car has came to a complete stop, I switched on the hazard light and exited the car to check the damage. I proceed to take photographs of the damage and exchange particulars with the parties involved. Shortly after, the highway patrol (Traffic Police) arrived and took our particulars.
 -I had also downloaded the "in-car" camera (front and back) to be facilitated as evidence for the accident.
 -After the accident, my passenger and I felt discomfort around our neck and back areas. We decided to proceed to the A&E for a checkup. The doctor diagnosed whiplash injuries to both the driver and passenger and gave 5 days MC to both.

Police Report



**SINGAPORE
POLICE FORCE**



T/20190708/7000

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

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Report No. T/20190708/7000

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 /
QHAIRIL BIN ZULKEFLEE
Contact No.: 65476187

Authentication Stamp
NP108

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

Date/Time:
08/07/2019 03:27

Classification Of Case:

Identification Card

