

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	15/07/2019 09:32
Date Of Accident	12/07/2019 18:45
Exact Location Of Accident	PIE(CHANGI) B4 THOMSON EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLF9361A
Insured/Policyholder	
Name Of Registered Owner	HILLARY WIJAYA SUTJIONO TJIOE
NRIC No	S9472379E
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96603979
Alternative Phone No	OTHERS-96603979

Vehicle Particulars

Manufacturer	LEXUS
Model	LEXUS
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	5108779241
Cover Note Number	

Driver

Name of Driver	HILLARY WIJAYA SUTJIONO TJIOE
NRIC No	S9472379E
Date Of Birth	06/06/1994
Occupation	INDOOR
Date Of Driving Pass	17/12/2018
Driving Experience	0 YEAR AND 6 MONTH
Gender	FEMALE
Mobile Number	(LOCAL) +65-96603979
Fax Number	
Contact Number	OTHERS-96603979
Email Address	NOEMAIL

Address	7 SIGLAP ROAD #21-58
Postcode	448909
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?	YES
Was any injured conveyed to hospital by ambulance?	YES
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	MARINE PARADE N.P.C
Police Station Address	ROAD: 300 MARINE PARADE ROAD , POSTCODE: 449296 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLS REFER TO THE ATTACHED POLICE REPORT: T/20190712/2183

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	FW3855M
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	MOHAMAD BIN KATTAN
NRIC/Passport Number	S1499433E
Contact Number	97572586
Address	
Postcode	

Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1	
Name	MOHAMAD BIN KATTAN
Approximate Age	
Injuries Sustain	SLIGHT
Injured person in which vehicle?	FW3855M
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

Accident Sketch Plan

SKETCH PLAN

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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:

15/07/19

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

Accident Sketch Plan

SKETCH PLAN

Vehicle A: SLF9361A

Vehicle B: FW3855M

PIE(changi), before Thomson Exit




DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

I was filtering onto lane 2 with my signal light on when vehicle 'B', FW 3855M, sped up and collided onto my vehicle's left portion.

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:

 15/07/19
Reporting Centre Personnel's Signature:
Name:
NRIC/FIN No.:

Individual Statement



**SINGAPORE
POLICE FORCE**



T/20190712/2183

Police Station Of Origin:
Marine Parade N.P.C
300 Marine Parade Road SINGAPORE
449296
Tel No: 1800-4428999

Report No. T/20190712/2183

CONTINUATION OF REPORT

Rider			
Name	MOHAMAD BIN KATTAN	ID No.	S1499433E
Related Vehicle	FW3855M (Motorcycle)	Contact No.	97572586
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	Slight
Driver			
Name	HILLARY WIJAYA SUTJIONO TJIOE	ID No.	S9472379E
Related Vehicle	SLF9361A (Car)	Contact No.	96603979
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3A Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 12/07/2019, at around 1845hrs, I was driving my vehicle (SLF9361A) on the lane 1 along PIE towards Thomson Exit. While driving, I tried to filter into lane 2, and I checked my blind spot for oncoming traffic, and I saw that there was one motorcycle approaching but it was still quite far away. As such I turned on my left signal and filtered into lane 2. However, the motorcycle (FW3855M) went too fast and hit my vehicle on the front left passenger door while I was filtering.

I would like to inform that I did not sustain any injury and my vehicle only sustained a minor scratch and slight dent on the left side of my vehicle. While the rider had sustained abrasion on both his hands and his left leg. The motorcycle's headlight was also detached from the vehicle, there was also slight crack on the left side of the motorcycle and some oil leakage from the motorcycle's fuel tank. The rider was then subsequently conveyed to Tan Tock Seng Hospital by ambulance.

I would like to inform that I have an in-car camera installed in my vehicle and the memory card has been handed over to Traffic Police Officer (SSS T130075 Tony) for investigation purposes. I would to inform that my insurance company has been notified of the accident, and they were also present at the accident location. I would like to inform that the repair cost for my vehicle's damage is estimated to be about SGD\$300/-.

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Police Report



**SINGAPORE
POLICE FORCE**



T20190712/0183

1 of 3

Report No: T20190712/0183

Police Station Of Origin:
Marine Parade N.P.C
300 Marine Parade Road SINGAPORE
448295
Tel No: 1800-4428999

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 12/07/2019 21:28	Vide Report No.: E20190712/0099	Station Diary No.: 79
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Informant's Particulars

Name of Informant: HILLARY WIJAYA SUTJIONO TJOE		Address: 7 SIGLAP ROAD #21-88 SINGAPORE 448906	
ID Type / ID No: NRIC NO / S9472379E		Contact No.: Home/Office: Mobile: 96603979	
Nationality: INDONESIAN		Email:	
Sex: Female	Age: 25	Date of Birth: 08/08/1994	Type of Informant: Driver
Race: Chinese		Language: English	Institution / School Name:
Occupation: GENERAL MANAGER		Driving Licence Information: Class: 3A Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance:	Drink Drive: No	Date/Time of Accident: 12/07/2019 15:45	Type of Location: Straight Road
Location: Along Road 1 PAN ISLAND EXPRESSWAY PIE near Thomson Exit				
Weather: Clear	Road Surface: Dry		Road Speed Limit:	
Traffic Flow: One Way	Traffic Control: Not Controlled		Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Side			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No	Type	Make	Model	Color	Condition	No of Passenger
FW3856M	Motorcycle				Slightly Damaged	0
SLF9361A	Car				Slightly Damaged	0

Details of Person Involved

Any Pedestrian Involved: No	Use of Pedestrian Crossing: NA
No. of Pedestrians Injured: NIL	

Police Report



**SINGAPORE
POLICE FORCE**



T201907182163

Police Station Of Origin:
Marine Parade N.P.C
300 Marine Parade Road SINGAPORE
449296
Tel No: 1800-4428999

Report No: T201907182163

CONTINUATION OF REPORT

Rider			
Name	MOHAMAD BIN KATTAN	ID No.	S1499433E
Related Vehicle	FW3855M (Motorcycle)	Contact No.	97572588
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	Slight
Driver			
Name	HILLARY WIJAYA SUTJIONO TJIOE	ID No.	S9472379E
Related Vehicle	SLF8361A (Car)	Contact No.	98803979
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3A Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details:

On 12/07/2019, at around 1845hrs, I was driving my vehicle (SLF8361A) on the lane 1 along PIE towards Thomson Exit. While driving, I tried to filter into lane 2, and I checked my blind spot for oncoming traffic, and I saw that there was one motorcycle approaching but it was still quite far away. As such I turned on my left signal and filtered into lane 2. However, the motorcycle (FW3855M) went too fast and hit my vehicle on the front left passenger door while I was filtering.

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Police Report



SINGAPORE
POLICE FORCE

Police Station Of Origin:
Marine Parade N.P.C
300 Marine Parade Road SINGAPORE
448286
Tel No: 1800-4428869



T/201907120183

3 of 3

Report No. T/201907120183

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474385 stating the report number as reference.

Signature Of Officer Recording The Report:

G /

Sgt 2 JEREMY GOH ZEN KIAT

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

12/07/2019 21:28

Officer In Charge Of Case:

TP / GIT /

SI MOHAMMAD ABDILLAH BIN PALIL

Contact No: 65476248

Classification Of Case:

Authentication Stamp

NP118



SINGAPORE
POLICE FORCE

SIGNATURE