

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	18/07/2019 16:28
Date Of Accident	18/07/2019 13:00
Exact Location Of Accident	JALAN BUROH /JURONG PIER RD JUNCTION/ ROUNDABOUT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMF9600Z
Insured/Policyholder	
Name Of Registered Owner	LIN JINGMING
NRIC No	S8916242D
Email Address	TOHKK_90@GMAIL.COM
Mobile Phone No	(LOCAL) +65-91823567
Alternative Phone No	OFFICE-91823567

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	SCIROCCO-1.4 (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	THIRD PARTY
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	5106239762
Cover Note Number	

Driver

Name of Driver	LIN JINGMING
NRIC No	S8916242D
Date Of Birth	13/05/1989
Occupation	INDOOR
Date Of Driving Pass	08/02/2010
Driving Experience	9 YEARS AND 5 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-91823567
Fax Number	
Contact Number	OFFICE-91823567
Email Address	TOHKK_90@GMAIL.COM

Address	BLK 666B JURONG WEST SR 65 #11-205
Postcode	642666
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 - HEAD TO REAR
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?	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: : MOTHER GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	JURONG NPP
Police Station Address	ROAD: 158 YUNG LOH ROAD #01-58 , POSTCODE: 610158 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO SKETCH PLANS

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	GBG9482Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	

Postcode

Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

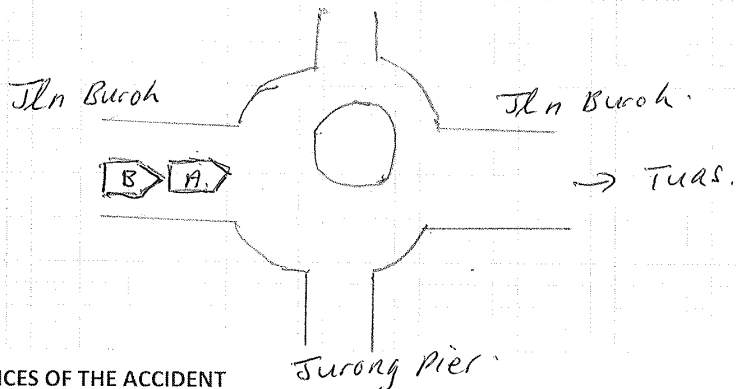
Name	LIN JINGMING
Approximate Age	
Injuries Sustain	NECK AND BACK
Injured person in which vehicle?	SMF9600Z
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

DETAILS OF INJURED PERSON 2

Name	WONG SIEW GOON
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SMF9600Z
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	YES
Address	
Postcode	

SKETCH PLAN

Jalan Buruh / Surong Pier Rd
Roundabout junction.



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

My vehicle was stationary at the traffic light junction/roundabout at Talan Buroh/Turong Pier toward ~~Turong~~^{Tuas} when the traffic light was red.

Suddenly Veh. No GBC 9482Y collided on to the rear of my vehicle.

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.:



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:

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

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



**SINGAPORE
POLICE FORCE**



T/20190718/2170

1 of 4

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

Report No. T/20190718/2170

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/07/2019 20:01		Vide Report No.:		Station Diary No.: 171	
Informant's Particulars					
Name of Informant: LIN JINGMING			Address: APT BLK 666B JURONG WEST STREET 65 #11-205 SINGAPORE 642666		
ID Type / ID No.: NRIC NO / S8916242D			Contact No.: Home/Office: Mobile: 91823567		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 30	Date of Birth: 13/05/1989	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: PURCHASER			Driving Licence Information: Class: 3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 18/07/2019 13:05	Type of Location: Straight Road
Location: Along Road 1 JALAN BUROH Jalan Buroh/Jurong Pier Road				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 70 Km/h	
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		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
GBG9482Y	Lorry				Slightly Damaged	0
SMF9600Z	Car	VOLKSWAGO N	SCIROCCO 1.4L AT TSI 1372Q5 SR HID	White	Slightly Damaged	1



**SINGAPORE
POLICE FORCE**



T/20190718/2170

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

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Report No. T/20190718/2170

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMF9600Z	NTUC Income Insurance Co-Operative Limited	5106239762	10/12/2018	09/12/2019

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Driver				
Name	Lim See Heng		ID No.	S1232922I
Related Vehicle	GBG9482Y (Lorry)		Contact No.	98523838
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

Driver				
Name	LIN JINGMING	ID No.	S8916242D	
Related Vehicle	SMF9600Z (Car)	Contact No.	91823567	
Hospital/Clinic	ONE CARE MEDICALPTE LTD	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL	
Date Treatment	18/07/2019	Date Discharge	NIL	
No. of Days granted Medical Leave	03	Degree of Injury	Slight	

Passenger				
Name	Wong Siew Goon	ID No.	S1369641A	
Related Vehicle	SMF9600Z (Car)	Contact No.	91184891	
Hospital/Clinic	ONE CARE MEDICAL PTE LTD	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL	
Date Treatment	18/07/2019	Date Discharge	NIL	
No. of Days granted Medical Leave	03	Degree of Injury	Slight	



**SINGAPORE
POLICE FORCE**



T/20190718/2170

3 of 4

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

Report No. T/20190718/2170

CONTINUATION OF REPORT

Brief Details.

On 18/07/2019 at about 1303hrs, I was driving along Jalan Buroh/Jurong Pier Road. I came to a stop at the traffic light before the roundabout as the traffic light was red. All of a sudden, there was a lorry on my left that started to move. Thus I also started to move. I then realized that the light was still red. Thus I stopped but the other lorry beat the red light. When my car stopped at the stop line, there was another lorry from my rear who collided onto my rear. I have an in car camera. When I took a look at the car camera, I realized that the said lorry driver was not paying attention to the road and did not noticed that my car had stopped. My passenger and I had 3 days MC for body ache, neck pain and giddiness. Traffic Police was not at scene. Ambulance was not at scene too.

REPUBLIC OF SINGAPORE DRIVING LICENCE


Licence Number: **S8916242D**

Name: **LIN JINGMING**

Birth Date: **13 May 1989**

Issue Date: **08 Feb 2010**

001828822G



REPUBLIC OF SINGAPORE
IDENTITY CARD NO. **S8916242D**



Name

LIN JINGMING

林 靖 銘

Race

CHINESE

Date of birth

13-05-1989

Sex

M

Country of birth

SINGAPORE

S8916242D

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS(ES)


Class 3 Motor Cars=< 3000kg with =<7 passengers, exclusive of the driver; and other motor vehicles =< 2500kg

PASS DATE **08 Feb 2010**


Licence No: **S8916242D**

NP 428A

3537564



NRIC No. **S8916242D**



Date of issue
17-05-2004

Address
**APT BLK 666B JURONG WEST STREET 65
#11-205
SINGAPORE 642666**

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

