

## 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	20/07/2019 15:53
Date Of Accident	19/07/2019 23:15
Exact Location Of Accident	ALONG ROAD 1 PIE > JURONG
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKU1150C
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SIM EE PING SUBRINA (SHEN YIPING)
NRIC No	S7734948J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96330203
Alternative Phone No	OFFICE-96330203

### Vehicle Particulars

Manufacturer	BMW
Model	525I-2.5 (A)
Exact Purpose for which vehicle was being used at time of accident	PTE 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	AXA INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	GA158466/1
Cover Note Number	

### Driver

Name of Driver	TNG SHI YING
NRIC No	S9340208A
Date Of Birth	24/10/1993
Occupation	INDOOR
Date Of Driving Pass	19/12/2016
Driving Experience	2 YEARS AND 7 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98417750
Fax Number	
Contact Number	
EMail Address	NOEMAIL

Address 442A BUKIT BATOK WEST AVENUE 8 #09-875  
 Postcode 651442  
 Was driver an employee of the Insured's Company NO  
 If No, Relationship of the Driver with the Insured OTHER - DAUGHTER IN LAW  
 Vehicle Registration Number of Driver's Own Vehicle -  
 Vehicle -  
 Insurance Company of Driver's Own Vehicle -  
 -  
 -

**General Information of the Accident**

Type Of Accident CHAIN 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 5  
 Was any body injured in the Accident? NO  
 Was any injured conveyed to hospital by ambulance?  
 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: : LESLIE GOH  
 GENDER: : MALE

**Details of Police Action**

Was the accident reported to the police? YES  
 If Yes, Please state which Police Station  
 Police Station Name BUKIT BATOK NEIGHBOURHOOD POLICE CENTRE  
 Police Station Address ROAD: 21 BUKIT BATOK EAST AVE 4 , POSTCODE: 659840 , COUNTRY: SINGAPORE  
 Police Station Contact TEL NO: 1800-6659999 - FAX NO: 66655793  
 Was notice of intended Prosecution given? NO  
 If Yes, against whom?

**Circumstances of Accident**

REFER TO 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 SHC7049D  
 Vehicle Make/Model/Colour  
 Details Of Properties  
 Vehicle Category TAXI  
 Name of Driver LAI WENG KAY  
 NRIC/Passport Number S1306740F  
 Contact Number 91199693  
 Address

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

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SLL6251Y  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category PRIVATE CAR  
Name of Driver MOHAMED FARHAN BIN MOHAMED NORDIN  
NRIC/Passport Number S8703881E  
Contact Number 91704750  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SML3846P  
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)

#### DETAILS OF OTHER VEHICLE PROPERTY 4

Vehicle Registration Number SLL475H  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category PRIVATE CAR  
Name of Driver LEE JUNJIE  
NRIC/Passport Number S9526281C  
Contact Number 84844328  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

## Sketch Plan

### SKETCH PLAN

#### IMPORTANT NOTICE

1. Please report **correctly** the details of the accident to speed up the claims process.
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5. **Any false reporting may be referred to the Police for investigation.**
6. The 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 lodging 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:

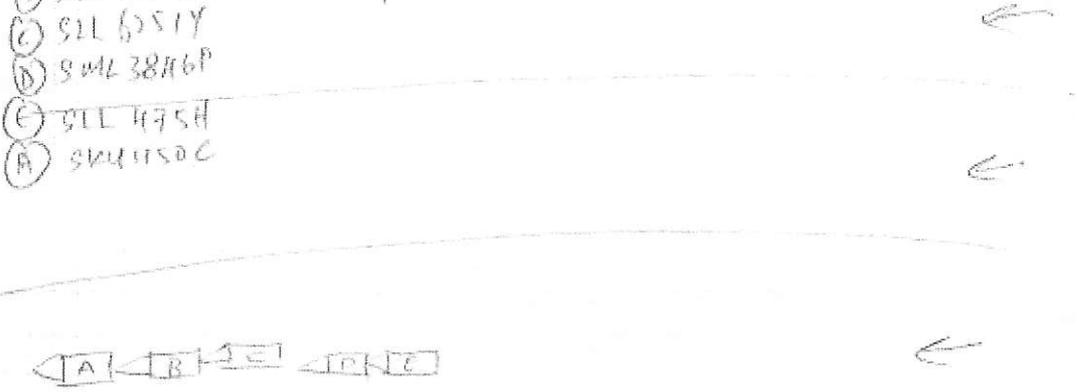
Reporting Centre Personnel's Signature  
Name  
NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN

- (B) 9HC 7094D
- (C) 9LL 6251Y
- (D) 9ML 38A6P
- (E) 9LL 495H
- (A) 9KL 1150C

PIE > Turning



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report.

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.

POLICE REPORT



SINGAPORE  
POLICE FORCE



T/20190720/2008

Police Station Of Origin:  
Bukit Batok N.P.C  
21 Bukit Batok East Avenue 4 SINGAPORE  
659840  
Tel No: 1800-6659999

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Report No. T/20190720/2008

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 20/07/2019 01:21	Video Report No.: D/20190719/0132	Station Diary No.: 20
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Informant's Particulars			
Name of Informant: TNG SHI YING		Address: APT BLK 825 WOODLANDS STREET 81 #08-30 SINGAPORE 730825	
ID Type / ID No.: NRIC NO / S9340208A		Contact No.:	Mobile: 98417750
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Female	Age: 25	Date of Birth: 24/10/1993	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: Coordinator		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: 19/07/2019 23:15	Type of Location: Straight Road
Location: Along Road 1 PAN ISLAND EXPRESSWAY  PIE towards Tuas, 30.2km				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Moderate	
Type of Collision: Chain Collision			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SHC7049D	Taxi			Yellow		0
SKU1150C	Car	BMW		White	Seriously Damaged	1
SLL475H	Car					0
SLL6251Y	Car	MAZDA		White		0
SML3846P	Car					0

POLICE REPORT



SINGAPORE  
POLICE FORCE



T/20190720/2008

Police Station Of Origin:  
Bukit Batok N.P.C  
21 Bukit Batok East Avenue 4 SINGAPORE  
659840  
Tel No: 1800-6889999

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Report No. T/20190720/2008

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LAI WENG KAY	ID No	S1306740F
Related Vehicle	SHC7049D (Taxi)	Contact No.	91199693
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	TNG SHI YING	ID No	S9340208A
Related Vehicle	SKU1150C (Car)	Contact No.	98417750
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
Driver			
Name	LEE JUNJIE	ID No	S9526281C
Related Vehicle	SLL475H (Car)	Contact No	84844328
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

POLICE REPORT



SINGAPORE  
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T/20190720/2008

Police Station Of Origin:  
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Report No. T/20190720/2008

CONTINUATION OF REPORT

Driver			
Name	MOHAMED FARHAN BIN MOHAMED NORDIN	ID No.	S8703881E
Related Vehicle	SLL6251Y (Car)	Contact No.	91704750
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 19/07/2019 at 2316hrs, I was driving my vehicle, SKU1150C, along PIE towards Tuas. Then at 30.2km mark, I kept to the extreme left lane as I wanted to exit the expressway at the next exit. The cars in front of me started to slow down. At one point the vehicle in front of me stopped and I also stopped my vehicle. Within few seconds a taxi (SHC7049D) had collided onto the rear portion of my vehicle. At this point the vehicle in front of me had moved off. I alighted from the vehicle and spotted that it was chain collision. Another vehicle, SLL6251Y, which was the third vehicle had hit onto the rear portion of the taxi. The fourth vehicle, SML3846P did not collide into the third vehicle. The fifth vehicle, SLL475H had collided onto the fourth vehicle.

Traffic Police and Ambulance were at scene. Few of them were conveyed by ambulance.

POLICE REPORT



SINGAPORE  
POLICE FORCE



T/20190720/2008

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Police Station Of Origin:  
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659840  
Tel No: 1800-6659999

Report No: T/20190720/2008

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 65474885 stating the report number as reference.

Signature Of Officer Recording The Report: J / Sr Staff Sgt MOHAMED NASRUDIN BIN SHAHUL HAMEED	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 20/07/2019 01:21
Officer In Charge Of Case: TP / GIT / SI ONG CHEE HIEN Contact No.: 65476437	Classification Of Case:
Authentication Stamp 