

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	18/09/2019 15:49
Date Of Accident	12/08/2019 04:00
Exact Location Of Accident	PIE TOWARDS TAMPINES AVE 2 EXIT
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMJ6852L
Insured/Policyholder	
Name Of Registered Owner	LIN LIWEI, EUGENE
NRIC No	S8806857B
Email Address	EUGENE.ELLW@GMAIL.COM
Mobile Phone No	(LOCAL) +65-81987888
Alternative Phone No	OFFICE-81987888

Vehicle Particulars

Manufacturer	KIA
Model	CERATO FORTE
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR

Insurance Company

Name of Insurance Company	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPCSN3023291900
Cover Note Number	

Driver

Name of Driver	LIN LIWEI, EUGENE
NRIC No	S8806857B
Date Of Birth	03/03/1988
Occupation	OUTDOOR
Date Of Driving Pass	23/04/2008
Driving Experience	11 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-81987888
Fax Number	
Contact Number	OFFICE-81987888
EEmail Address	EUGENE.ELLW@GMAIL.COM

Address	BLK 318 TAMPINES STREET 33 #03-74
Postcode	520318
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?	NO
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: : SYLVESTER GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	ROCHER N.P.C
Police Station Address	ROAD: 11 KAMPONG KAPOR ROAD , POSTCODE: 208678 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2949999 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

On the above mention date, time and location, I overshot the slip road into the avenue 2 exit of PIE. As such, I stopped my vehicle along the side and reversed into the chevron. When I was reversing, a taxi from behind me brushed against the rear left bumper of my vehicle. We both wound down our windows, and the taxi driver told me has an in-car camera. As I did not think the impact was very great and I was rushing for time, I said ok and just drove off. The rear left bumper of my vehicle was scratched.

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	SHA9369C
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	TAXI
Name of Driver	
NRIC/Passport Number	

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

Sketch Plan

SKETCH PLAN

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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 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/mall 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: 18/9/19 14:06hr

Driver's Signature

(If driver is not the policyholder)

Date & Time:

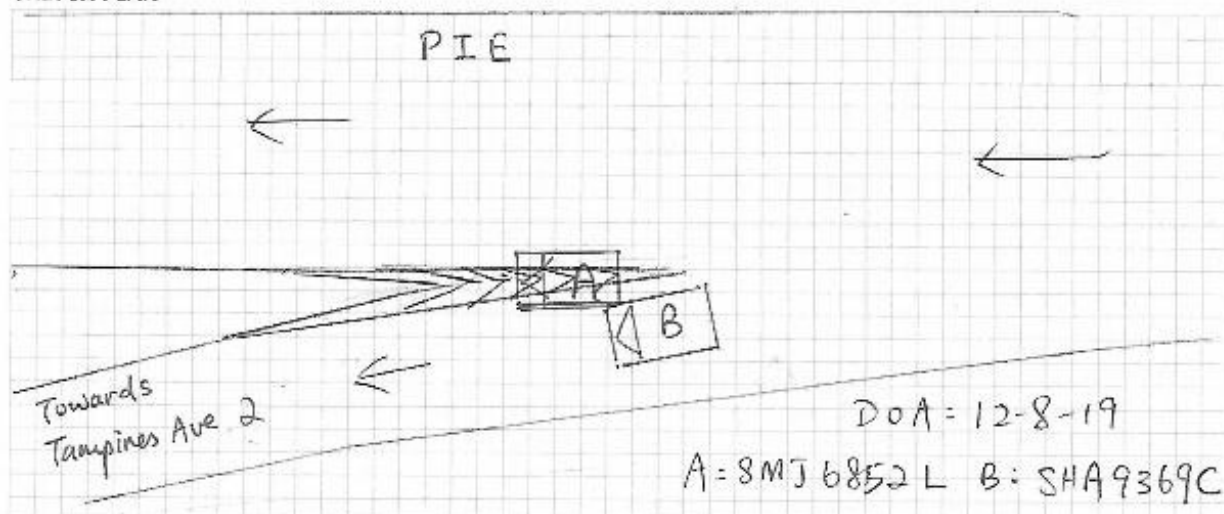
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Sketch Plan #2

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to the attached Police Report No: T/20190830/2061.

DECLARATION

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

Policyholder's Signature

Date & Time: 18/9/19 14:0hr

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/20190830/2061

1 of 3

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

Report No. T/20190830/2061

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 30/08/2019 12:18		Vide Report No.:		Station Diary No.: 55	
Informant's Particulars					
Name of Informant: LIN LIWEI, EUGENE			Address: APT BLK 359 YUNG AN ROAD #11-83 SINGAPORE 610359		
ID Type / ID No.: NRIC NO / S8806857B			Contact No.: Home/Office: Mobile: 81987888		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 31	Date of Birth: 03/03/1988	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: construction worker			Driving Licence Information: Class: 2B,2A,3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury	Drink Drive: No	Date/Time of Accident: 12/08/2019 04:00	Type of Location: Slip road
Location: Along Road 1 PAN ISLAND EXPRESSWAY PIE towards avenue 2 exit				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: One Way		Traffic Control: Not Controlled		Traffic Volume: No Traffic
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
SMJ6852L	Car	KIA	CERATO FORTE Koup 1.6 AT SX ABS D/AB SR	White	Slightly Damaged	1

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMJ6852L	CHINA TAIPING INSURANCE (SINGAPORE) PTE. LTD.	DMPCSN30232919 00	28/03/2019	12/05/2020

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190830/2061

2 of 3

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

Report No. T/20190830/2061

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LIN LIWEI, EUGENE	ID No.	S8806857B
Related Vehicle	NIL	Contact No.	81987888
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On the above mention date, time and location, I overshot the slip road into the avenue 2 exit of PIE. As such, I stopped my vehicle along the side and reversed into the chevron. When I was reversing, a taxi from behind me brushed against the rear left bumper of my vehicle. We both wound down our windows, and the taxi driver told me has an in-car camera. As I did not think the impact was very great and I was rushing for time, I said ok and just drove off. The rear left bumper of my vehicle was scratched.

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20190830/2061

Police Station Of Origin:
Rochor N.P.C
11 Kampong Kapur Road SINGAPORE
208678
Tel No: 1800-2949999

3 of 3

Report No. T/20190830/2061

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:

A /

Sgt 2 DOWSON TAN SOO HAO

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

30/08/2019 12:18

Officer In Charge Of Case:

TP / GIA /

Staff Sgt WONG SIEU LUI

Contact No.: 65476151

Classification Of Case:

Authentication Stamp
NP168



SINGAPORE
POLICE FORCE

SIGNATURE

Identification Card

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. **S8806857B**



Name

LIN LIWEI, EUGENE

林立伟

Race

CHINESE

Date of birth

03-03-1988

Sex

M

Country/Place of birth

SINGAPORE



S8806857B

REPUBLIC OF SINGAPORE

DRIVING LICENCE

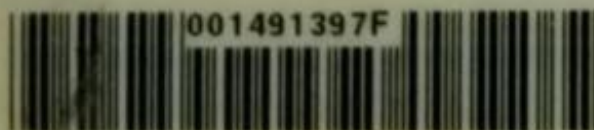
Licence Number: **S8806857B**

Name:

LIN LIWEI, EUGENE

Birth Date: **03 Mar 1988**

Issue Date: **09 Apr 2007**



001491397F

Identification Card

5891080



NRIC No. S8806857B



Date of issue
14-03-2018

APT BLK 318 TAMPINES STREET 33 #03-74
SINGAPORE 520318

NRIC No: S8806857B Date: 11/09/2019

ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING

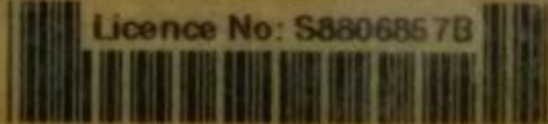
PASS

Class 2B	Motorcycles =< 200 CC	09 Apr 2007
Class 2A	Motorcycles between 201 CC and 400 CC	10 Jun 2008
Class 3	Motor cars =< 3000 kg with =< 7 passengers, exclusive of the driver; and motor tractors/vehicles =< 2500 kg	23 Apr 2008

S8806857B

S / No. 9000087447

Licence No: S8806857B



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

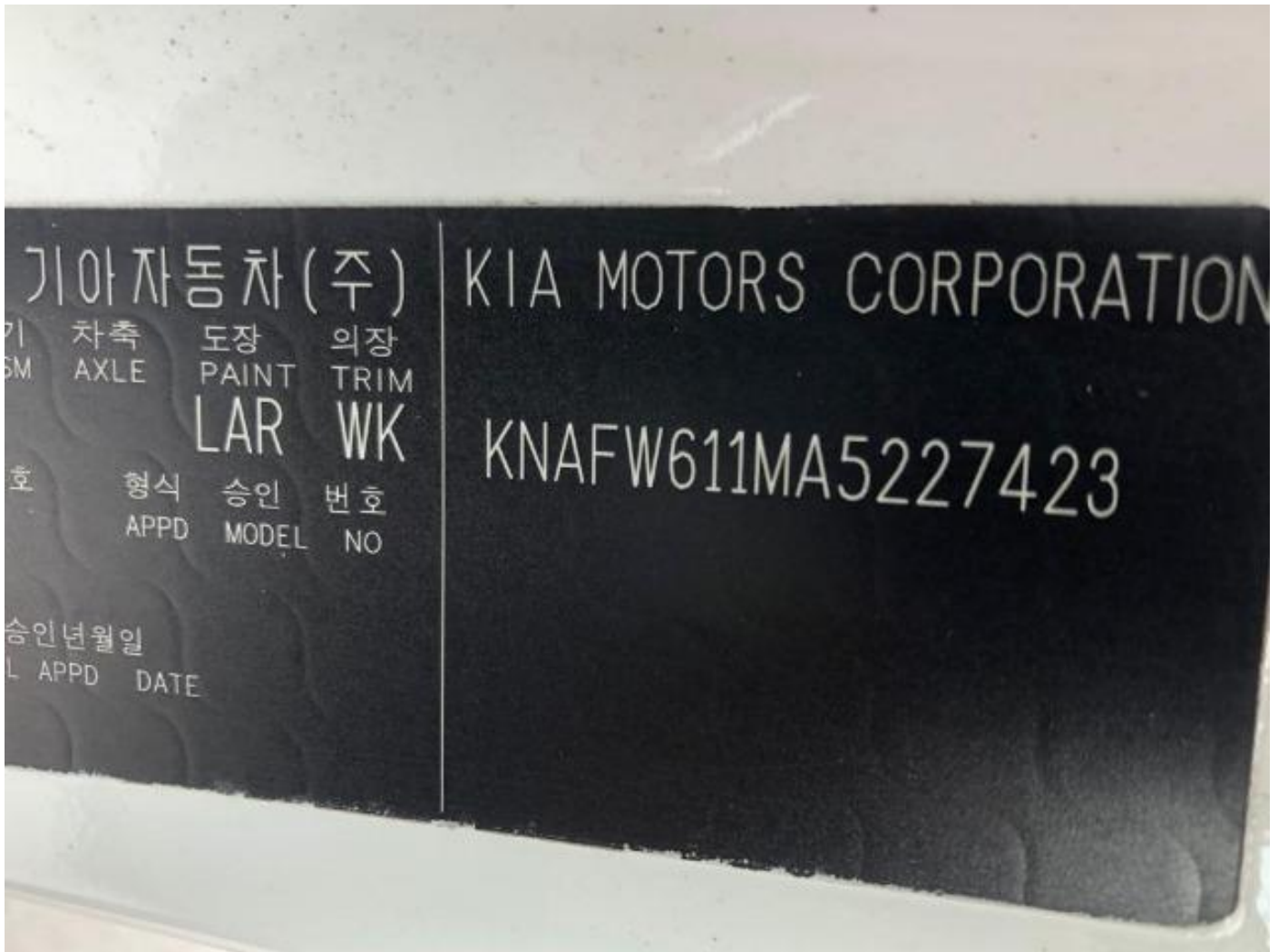


Accident Photo



Accident Photo





Accident Photo

