

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	21/08/2019 17:21
Date Of Accident	19/08/2019 13:50
Exact Location Of Accident	JUNCTION OF UPP SERANGOON RD AND HOUGANG AVE 2
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLQ9803J
Insured/Policyholder	
Name Of Registered Owner	LAU SHEOW LING
NRIC No	S7007195J
Email Address	DDICKLAU@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-91005005
Alternative Phone No	OTHERS-88002268

Vehicle Particulars

Manufacturer	BMW
Model	X1 SDRIVE18I AT D/AB 2WD 5DR GAS/D SR
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	5093992445-01
Cover Note Number	

Driver

Name of Driver	ZHAO DONGMEI
NRIC No	G0590566X
Date Of Birth	28/02/1970
Occupation	INDOOR
Date Of Driving Pass	29/06/2009
Driving Experience	10 YEARS AND 1 MONTH
Gender	FEMALE
Mobile Number	(LOCAL) +65-91005005
Fax Number	
Contact Number	OTHERS-88002268
Email Address	DDICKLAU@HOTMAIL.COM

Address	BLK 13 PASIR RIS LINK #08-29
Postcode	518181
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	SPOUSE
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?	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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	PASIR RIS NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 1 PASIR RIS DRIVE 4 , POSTCODE: 519457 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5852999 - FAX NO: 65855261
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH PLAN

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	FBA4550L
Vehicle Make/Model/Colour	HONDA
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	LIM JOO KIAT
NRIC/Passport Number	S8218757Z
Contact Number	84444833
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

SKETCH PLAN

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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/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



A) 8LQ 9803J
B) FBH 4550L

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

ON 19/08/2019 at about 1350hrs. I was driving along Honggang Ave 2. I was on the second lane and as I was filtering onto the second lane the left side of my vehicle. collided onto the right side of a motorcycle.

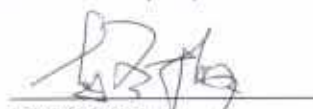
The rider then fell on his right side and sustained lacerations on his left elbow and feet. No ambulance or police attended to us. The rider informed that ~~he~~ he does not require medical attention.

There are dents on the left side 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.:

CONFIDENTIAL

Annex E

NOTICE OF COMPLIANCE

This is to confirm that Zhao Dongmei, HP: 88002268
NRIC/FIN G0590566X, has reported to the Police a non-injury traffic accident
which occurred at junction of Upper Serangoon Road and Hougang Ave 2
on 19/08/2019 at 1350hrs am/pm involving the following vehicles:

Blue BMW X1 SKQ9803J (Complainant's Vehicle)
Red motorcycle FBH4550L

On 19/08/2019 at about 1350hrs, I was driving along Hougang Ave 2. I was on the second lane and as I was filtering onto the second lane, the left side of my vehicle collided onto the right side of a motorcycle.

The rider then fell on his right side and sustained lacerations on his left elbow and feet. No ambulance or Police attended to us. The rider informed that he does not require medical attention.

There are dents on the left side of my vehicle.

- 2 If this accident was reported to the Police within 24 hours of its occurrence,
Then he/she has complied with Sec 84(2) of the Road Traffic Act, Cap 276.

Rank/Name of Issuing Officer: SGT Phyllis D

Date: 20/08/2019

Time: 1230hrs

S/D Ref: _____

Police Post/Unit: Pasir Ris NPC

Original - to be issued to informant
Duplicate - to be submitted to Traffic Police

Pasir Ris NPC
No. 1 Pasir Ris Drive 4
#01-01 Singapore 519457
Tel: 1800-5852999

CONFIDENTIAL

Claim Handling

Accident MT/1058838

Policy No.	5093982445-01	Vehicle No.	SLQ98031	GST Registration No.	
Certificate No.					
Policyholder Name	LAU SHYOW LING	Driver Type	Drive CLASSIC	Policyholder NRIC	S70071951
Product Code	PRIVATE CAR INSURANCE	Contact No.(Office)		Loading	0
Contact No.(Mobile)	91205005	Special Remarks		Contact No.(Home)	
Email Address		TCA	< No Yes	eCode	na *
KPI	< No Yes	NCD Settlement(%)	10	eCode Reason	
NCD Protection	No			Private Hire	No

Accident Details

Report Date	21/08/2019 17:34	Accident Report Within 24 hrs	Yes	Accident Type	Collision - Change / Cross lane
Date of Accident	19/08/2019	Time of Accident hh:mm	12:10	Country of Accident	Singapore
Reporting Centre		Orange Force		ICH No.	
Accident Location	JUNCTION OF UPP SERANGOON RD AND HOUGANG AVE 2				

Excess

Own Damage Excess	800.00	Additional Excess	0	Whodpwn Excess	100.00
Uninsured Driver Excess	500.00	Outside Singapore OD Excess	600.00		
Third Party Excess	0.00	Outside Singapore TP Excess	0.00		

Benefits

GST Registered Information

GST Registered	No	GST Registration Date		GST Status Verified	Yes
GST Registration No.					
Modification History					

Policyholder Mailing Address

Address 1	15 PASIR RIS LINK	Address 2	#10-14 SERSTAND	Address 3	SINGAPORE 518182
Address 4		Address Type	Singapore address	Post Code	518182
Unit No.	10-14	Related Policy Number	5093982445-01		

Ol Driver Info

Driver Name	Uninsured Driver	Driver Type	Uninsured Driver	Driver DOB	25/12/1981
Uninsured driver Name	CHAO DONGMEI	Driver NRIC	S0520586X	Driving Experience	10
Register Date of Driver License	29/06/2009	Driver Age	37	Contact No.(Home)	
Contact No.(Mobile)	88002268	Contact No.(Office)		Address 1	SINGAPORE 518181
Address 1	15 PASIR RIS LINK	Address 2	406-29 SERSTAND	Post Code	518181
Address 8		Address Type	Foreign address		
Unit No.	08-29	Driver Vehicle No.	SLQ98031	Driver Insurer Company	NTUC
Does he own a Singapore Registered car?	Yes < No				

Declaration

Breathalyzer or Blood Test Reading?	0 mg	Any Injury?	Yes < No
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Modification History

Claim DO: [View](#)

Claim Type *

Contact No.(Mobile)

Email Address

Claim Description

Preferred Workshop: Insured Liability: Party at Fault:

Settlement No. Preferred Workshop, Name unknown OA report

Date Registered:

Report Taken By

Print AX letter

OD-MX	Insured Name	LAU SHYOW LING	Insured NRIC	S70071951
81611818	Contact No. (Home)	83851849	Contact No. (Office)	
	Ol Vehicle Number	SLQ98031	TP Vehicle Number	PH43501
SLQ98031 / FBH4501 ON 19 Aug 2019			Name of Preferred Workshop	
21/08/2019 17:52		Claim Close Date	Date Received: 21/08/2019 00:00	
ROSLI WANAB				

Save Submit

Attachment

Accident No.	MT/1058838	Claim No.	001
Last Doc. Received	< Yes No	Upload Date	21/08/2019 17:52

Path *

Choose File: No file chosen

Choose File: No file chosen

Choose File: No file chosen

Choose File: No file chosen

Choose File: No file chosen

Choose File: No file chosen

Message Read

Attachment List

Attachment	Uploaded By/Date	Category	Urgency	Description	Msg Sent (CO)	A
	NAC_BUKIT_MERAH_8006761 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 21 Aug 2019 17:52	Photos	Normal	Photos 2019-8-21		
	NAC_BUKIT_MERAH_8006761 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 21 Aug 2019 17:52	Photos	Normal	Photos 2019-8-21		
	NAC_BUKIT_MERAH_8006761 NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH) on 21 Aug 2019 17:52	Photos	Normal	Photos 2019-8-21		

Send Message

	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 21 Aug 2019 17:52	Photos	Normal	Photos 2019-8-21
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 21 Aug 2019 17:52	Photos	Normal	Photos 2019-8-21
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 21 Aug 2019 17:52	Photos	Normal	Photos 2019-8-21
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 21 Aug 2019 17:52	Photos	Normal	Photos 2019-8-21
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 21 Aug 2019 17:52	Photos	Normal	Photos 2019-8-21
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 21 Aug 2019 17:52	Photos	Normal	Photos 2019-8-21
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 21 Aug 2019 17:52	Photos	Normal	Photos 2019-8-21
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 21 Aug 2019 17:52	Photos	Normal	Photos 2019-8-21
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 21 Aug 2019 17:52	NAC/ Driving License	Normal	NAC/ Driving License 2019-8-21
	NAC_BUKIT_MERAH_800676(NATIONAL ASSESSMENT CENTRE SERVICE S (BUKIT MERAH)) on 21 Aug 2019 17:52	SAS	Normal	SAS 2019-8-21

Video List

Uploaded By/Date	Folder Date	File Name	Source	Action
		Display in New Window	Scan and uploading	

ACCIDENT STATEMENT

ACCIDENT DATE: 19/08/2019 (DD/MM/YYYY), TIME: 13:50 (HH:MM)

LOCATION: JUNCTION OF UPPER SERANGOON ROAD AND HOUGANG AVE 2

1. DETAILS OF VEHICLE

- a) VEHICLE NUMBER: SLQ 9803J
 b) INSURANCE COMPANY: INCOME
 c) POLICY NUMBER: 5093992495-01
 d) POLICY TYPE: COMPREHENSIVE THIRD PARTY / THIRD PARTY FIRE & THEFT
 e) MAKE & MODEL: BMW X1
 f) TYPE: (SALOON / COUPE / MPV / VAN / LORRY / MOTORCYCLE / OTHERS)
 g) VEHICLE CATEGORY: (PRIVATE / COMMERCIAL / MOTORCYCLE)
 h) PURPOSE OF USING AT ACCIDENT TIME: PRIVATE
 i) ARE YOU CLAIMING UNDER YOUR OWN INSURANCE (YES/NO)
 IF NO, PLEASE STATE (THIRD PARTY CLAIM / REPORTING ONLY)

2. INSURED / POLICY HOLDER

- a) NAME: LIM SIEW LING (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: S70071951 CONTACT: 81005005
 c) ADDRESS: 13 PASIR RIS LINK #08-29
SINGAPORE 50801

* CONTINUE TO 3.d IF DRIVER ALSO POLICY HOLDER

DRIVER

- a) NAME: ZHAO DONGMEI (MALE / FEMALE)
 b) NRIC/FIN/PASSPORT: G0590501X CONTACT: 88002708
 c) ADDRESS: 13 PASIR RIS LINK #08-29
SINGAPORE 50801

* d) DATE OF BIRTH: 20/12/1981 (DD/MM/YYYY)

e) OCCUPATION: (INDOOR / OUTDOOR)

f) DATE OF DRIVING PASS

4. WAS DRIVER AN EMPLOYEE OF THE INSURED'S COMPANY? (YES / NO)
 IF NO, RELATIONSHIP OF THE DRIVER WITH INSURED:

5. a) WEATHER CONDITION: (CLEAR / RAINING / OTHERS)

b) ROAD SURFACE: (DRY / WET / OTHERS)

6. WAS ANYBODY INJURED (YES / NO)

7. a) REPORTED TO POLICE (YES / NO)

IF YES, PLEASE STATE WHICH POLICE STATION: PASIR RIS

8. THIRD PARTY VEHICLE

- a) VEHICLE NUMBER: FBH4550L MODEL: HONDA
 b) DRIVER'S NAME: LIM JOO KIM T.
 c) NRIC/FIN/PASSPORT: S82187572 CONTACT: 84449033

9. THIRD PARTY VEHICLE

- d) VEHICLE NUMBER: _____ MODEL: _____
 e) DRIVER'S NAME: _____
 f) NRIC/FIN/PASSPORT: _____ CONTACT: _____

No of passenger
(including driver)
(1)

No of passenger
(including driver)
()

No of passenger
(including driver)
()

email = ddicklau@hotmail.com

VIDEO

REPUBLIC OF SINGAPORE

FIN G0590566X



Name
ZHAO DONGMEI

For LKK/NAC Use Only

Date of Birth: 20-12-1981
Sex: F
Nationality: CHINESE

1590566

REPUBLIC OF SINGAPORE DRIVING LICENCE

Licence Number: G0590566X

Name: ZHAO DONGMEI



Birth Date: 20 Dec 1981
Issue Date: 08 Aug 2019
Valid Till: 07/08/2024

For LKK/NAC Use Only

DRIVER



002964907G

REPUBLIC OF SINGAPORE

IDENTITY CARD NO. S7007195I



LAU SHEOW LING

刘绍林

Race: CHINESE

Date of Birth: 28-02-1970

Country/Place of Birth: SINGAPORE

Sex: M

For LKK/NAC Use Only

OWNER

FA2088936

VISIT PASS

Immigration Regulations

FIN G0590566X

PLUS

For LKK/NAC Use Only

MULTIPLE JOURNEY VISA ISSUED

Date of Issue: 10-05-2018
Date of Expiry: 10-05-2023



YOU ARE TO SURRENDER THIS CARD WHEN IT IS CANCELLED OR HAS EXPIRED, OR WHEN A NEW CARD IS ISSUED TO YOU

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

EFFECTIVE DATE

Class 3A Motor cars without clutch pedals (Auto) with unladen weight $\leq 3000\text{kg}$ with ≤ 7 passengers, exclusive of driver; and other motor vehicles without clutch pedals with unladen weight $\leq 2500\text{kg}$ 29 Jun 2009

For LKK/NAC Use Only

DRIVER

NP 428A



Licence No: G0590566X

5979989



NRIC No. S7007195I

For LKK/NAC Use Only



Date of Issue: 17-07-2018

Address

APT. BLK 13 PASIR RIS LINK
#08-29
SINGAPORE 516181

OWNER

Hello, NAC_BUKIT_MERAH_800676

[Change Language](#)[Change Password](#)[Log Out](#)[My Desktop](#)[Notice of Loss](#)

Policy Query

Policy No. Date of Accident: 19/08/2019 17:54
Vehicle No.(For Motor) SLQ9803J Certificate Number:

Select	Policy No.	Certificate Number	Policyholder Name	Policyholder NRIC	Product	Cover Type	Vehicle No.	Insured Object	Commence Date	Expiry Date
<input checked="" type="radio"/>	5093992445-01		LAU SHEOW LING	S70071951	GPC	drive CLASSIC	SLQ9803J	SLQ9803J	22/12/2018	21/12/2019