

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	29/08/2019 15:25
Date Of Accident	28/08/2019 12:00
Exact Location Of Accident	AMK AVE 5 TWDS AMK AVE 3 AT THE SLIP RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKF8237U
Insured/Policyholder	
Name Of Registered Owner	ESTHER SHARLEEN TAN YING JIE
NRIC No	S9411796H
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96248763
Alternative Phone No	OFFICE-96248763

Vehicle Particulars

Manufacturer	HONDA
Model	JAZZ
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	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	5102376228-01
Cover Note Number	-

Driver

Name of Driver	ESTHER SHARLEEN TAN YING JIE
NRIC No	S9411796H
Date Of Birth	05/04/1994
Occupation	OUTDOOR
Date Of Driving Pass	11/09/2014
Driving Experience	4 YEARS AND 11 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-96248763
Fax Number	
Contact Number	OFFICE-96248763
Email Address	NOEMAIL

Address	BLK 474 SEMBAWANG DR #13-333
Postcode	750474
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)	1

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	MACPHERSON NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 54 PIPIT ROAD #01-82/84 , POSTCODE: 370054 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-7449999 - FAX NO: 65476366
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT T/20190829/2107

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	FILE TOO LARGE FAIL TO UPLOAD
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	GY9573P
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	YONG HEE WEN
NRIC/Passport Number	S0593487G
Contact Number	81329794
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1	
Name	ESTHER SHARLEEN TAN YING JIE
Approximate Age	
Injuries Sustain	BODY
Injured person in which vehicle?	SKF8237U
Were seat belts worn?	YES
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Accident Sketch Plan


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:

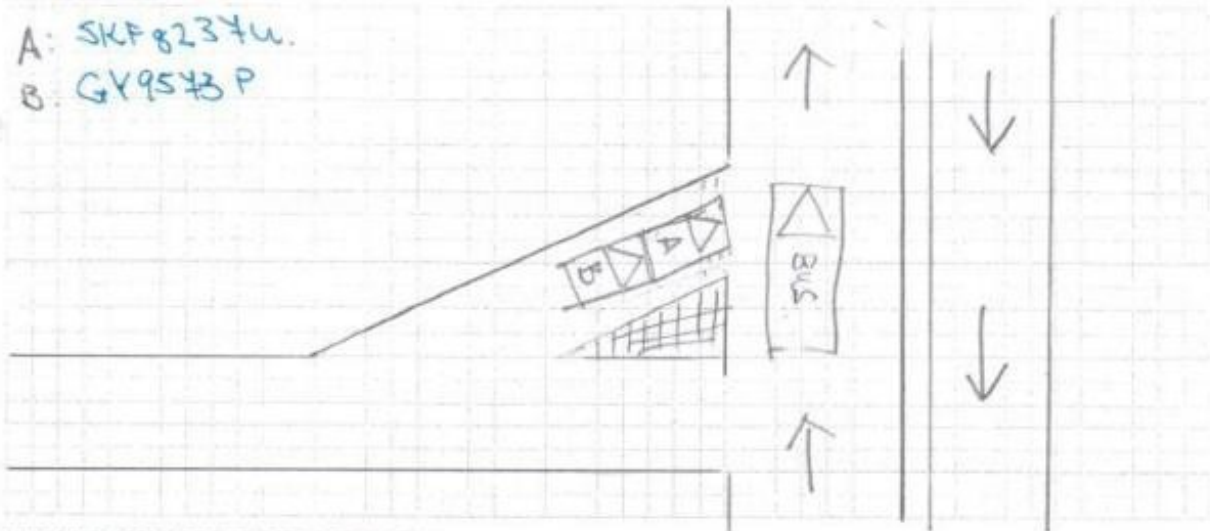
Driver's Signature
(If driver is not the policyholder)
Date & Time:


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

Accident Sketch Plan

SKETCH PLAN

A: SKF8237U.
B: GY9573P



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 28/8/19 at afternoon around 12pm, I was driving my car SKF 8237U, at filter lane exiting from Ang Mo Kio Ave 5, going toward Ang mo Kio Ave 3. I came to a stop to give way to incoming vehicle along the main road. I saw a bus coming so I waited for ~~it~~ the bus clear so I can exit, however suddenly a vehicle no GY9573P bang me from the back of my vehicle that causes huge impact. I was throw forward at that point of time on my driver seat. My seat belt was on but the great impact cause my right side of my cheek and forehead to hit on my Steering wheel. I was traumatize by the ~~acc~~ accident at that point of time, while I was still in shock I regain conscious and quickly take photo of the ~~the~~ accident and exchange particular with the driver. My car do have an in car camera with footage recorded. I realise my cheek was painful hence I when to the nearest hospital (Sengkang general hospital) to do check up, the x-ray report show I do have swelling hence I was warded. I also have backache after the incident. ~~too~~ I was given 5 days hospital MC from 28/8/19-1/9/19 I was ask to go back for check up within a week for my cheek and my back injury.

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/20190829/2107

Police Station Of Origin:
MacPherson NPP
54 Pipit Road #01-82/84 SINGAPORE
370054
Tel No: 1800-7449999

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Report No. T/20190829/2107

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/08/2019 14:51	Vide Report No.:	Station Diary No.: 21
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Informant's Particulars

Name of Informant: ESTHER SHARLEEN TAN YING JIE			Address: APT BLK 474 SEMBAWANG DRIVE #13-333 SINGAPORE 750474	
ID Type / ID No.: NRIC NO / S9411796H			Contact No.: Home/Office: Mobile: 96248763	
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Female	Age: 25	Date of Birth: 05/04/1994	Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation: SALES MANAGER			Driving Licence Information: Class: 3A Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 28/08/2019 12:00	Type of Location: FILTER LANE
Location: Along Road 1 ANG MO KIO AVENUE 5				
AMG MO KIO AVENUE 5 TOWARDS ANG MO KIO AVENUE 3 AT THE FILTER LANE				
Weather: Clear	Road Surface: Dry		Road Speed Limit:	
Traffic Flow: One Way	Traffic Control: Pedestrian Crossing		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
GY9573P	Van				Slightly Damaged	2
SKF8237U	Car	HONDA	JAZZ 1.5L AT SR HID	Blue	Slightly Damaged	0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKF8237U	NTUC Income Insurance Co-Operative Limited	5102376228-01	20/07/2019	19/07/2020

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20190829/2107

Police Station Of Origin:
MacPherson NPP
54 Pipit Road #01-82/84 SINGAPORE
370054
Tel No: 1800-7449999

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Report No. T/20190829/2107

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	YONG HEE WEN	ID No.	S0593487G
Related Vehicle	GY9573P (Van)	Contact No.	81329794
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	ESTHER SHARLEEN TAN YING JIE	ID No.	S9411796H
Related Vehicle	SKF8237U (Car)	Contact No.	96248763
Hospital/Clinic	SENGKANG GENERAL HOSPITAL PTE. LTD.	Class of Driving Licence & Expiry Date	Class: 3A Date of Expiry: NIL
Date Treatment	28/08/2019	Date Discharge	29/08/2019
No. of Days granted Medical Leave	05	Degree of Injury	Slight

Brief Details.

On 28/9/2019 at about 1200hrs, I was driving my car bearing the registration plate number, SKF8237U along ang mo kio avenue 5. I then exited at the filter lane towards ang mo kio avenue 3. While at the filter lane, I came to a stop at the giveaway line to giveaway to the oncoming vehicle along the main road from the right. I saw a bus coming from the main road as such I waited for it to pass before I continued forward. Suddenly, one van bearing the registration plate number, GY9573P bang onto my car from the back. The impact of the hit pushed my car forward and I was also thrown forward and I hit my right cheek and forehead on the steering wheel, I was still in shock when the accident took place however I managed to come out of my car and make a check on my car and also exchanged particulars with the driver of the van. My car was towed at scene as the rear was fully dented and I went to see the doctor later on as I felt pain at my cheek area. I was warded for one night and was given 5 days MC after I was discharged. The doctor also told me that I have to go back for follow-up session regarding my lower back and cheek within one week. I would like to note that I have both the front and rear in car camera footage.

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20190829/2107

Police Station Of Origin:
MacPherson NPP
54 Pipit Road #01-82/84 SINGAPORE
370054
Tel No: 1800-7449999

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Report No. T/20190829/2107

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:

G /

Sgt 2 ONG WEI XING

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

SI ANG YI TING, STEPHANIE

Contact No.: 65476414

Signature Of Informant:

Date/Time:

29/08/2019 14:51

Classification Of Case:

Authentication Stamp
NP168



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

