

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	14/10/2019 11:57
Date Of Accident	11/10/2019 19:45
Exact Location Of Accident	PIE TWDS CHANGI
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLJ3502D
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Insured/Policyholder

Name Of Registered Owner	TAN HONG YE, CLEMENT
NRIC No	S8505410D
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-97316955
Alternative Phone No	OFFICE-97316955

Vehicle Particulars

Manufacturer	HONDA
Model	CITY 1.5 SV CVT
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	LIBERTY INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	SD18V13378/VPC2/R01
Cover Note Number	

Driver

Name of Driver	TAN HONG YE, CLEMENT
NRIC No	S8505410D
Date Of Birth	11/02/1985
Occupation	INDOOR
Date Of Driving Pass	29/02/2008
Driving Experience	11 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-97316955
Fax Number	
Contact Number	OFFICE-97316955
EEmail Address	NOEMAIL

Address	63 TAMPINES CENTRAL 7 #02-24
Postcode	528596
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	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	3
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
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: : TAN QIAN HUI GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	TRAFFIC POLICE DIVISION HQ - SINGAPORE CITY
Police Station Address	ROAD: 10 UBI AVENUE 3 , POSTCODE: 408865 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 65470000 - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20191012/7004.

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	SGW6612R
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	DUA BEE YEN
NRIC/Passport Number	S7809891J
Contact Number	96956286

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

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SMG2042A
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver CHUN SEHYUN
NRIC/Passport Number S8368942J
Contact Number 86224304
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name TAN HONG YE, CLEMENT
Approximate Age
Injuries Sustain BODY
Injured person in which vehicle? SLJ3502D
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

DETAILS OF INJURED PERSON 2

Name TAN QIAN HUI
Approximate Age
Injuries Sustain BODY
Injured person in which vehicle? SLJ3502D
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? YES
Address
Postcode

Accident Sketch Plan

SKETCH PLAN

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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.:

Accident Sketch Plan

SKETCH PLAN

	A - SLJ 35020
	B - SGW 6612R
	C - SM G 2042A

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Ref. 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/20191012/7004

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20191012/7004

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 12/10/2019 08:21	Vide Report No.: G/20191011/0194	Station Diary No.:
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Informant's Particulars				
Name of Informant: TAN HONG YE, CLEMENT		Address: 63 TAMPINES CENTRAL 7 #02-24 SINGAPORE 528596		
ID Type / ID No.: NRIC NO / S8505410D		Contact No.: Home/Office: Mobile: 97316955		
Nationality: SINGAPORE CITIZEN		Email: clement85@gmail.com		
Sex: Male	Age: 34	Date of Birth: 11/02/1985	Type of Informant: Driver	
Race: Chinese		Language: English	Institution / School Name:	
Occupation: Information technology project manager		Driving Licence Information: Class: 2B,2A,3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 11/10/2019 19:45	Type of Location: PIE Changi (9.9km)
Location: PIE (Changi) 9.9Km				
Weather: Clear		Road Surface: Dry	Road Speed Limit: 90 Km/h	
Traffic Flow: One Way		Traffic Control: Not Controlled	Traffic Volume: Heavy	
Type of Collision: Between Moving Vehicles - Head To Rear			Anyone conveyed by ambulance: Yes	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGW6612R	Car	AUDI		Grey	Slightly Damaged	1
SLJ3502D	Car					0
SMG2042A	Car	VOLKSWAGO N	Passat CC	Silver	Slightly Damaged	2

Police Report



**SINGAPORE
POLICE FORCE**



T/20191012/7004

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20191012/7004

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	DUA BEE YEN	ID No.	S7809891J
Related Vehicle	SGW6612R (Car)	Contact No.	96956286
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	TAN HONG YE, CLEMENT	ID No.	S8505410D
Related Vehicle	SLJ3502D (Car)	Contact No.	97316955
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B,2A,3 Date of Expiry: NIL
Date Treatment	12/10/2019	Date Discharge	12/10/2019
No. of Days granted Medical Leave	04	Degree of Injury	Slight
Passenger			
Name	TAN QIAN HUI	ID No.	T1633145C
Related Vehicle	SLJ3502D (Car)	Contact No.	97316955
Hospital/Clinic	KK WOMEN'S AND CHILDREN'S HOSPITAL	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	11/10/2019	Date Discharge	11/10/2019
No. of Days granted Medical Leave	03	Degree of Injury	Slight

Police Report



**SINGAPORE
POLICE FORCE**



T/20191012/7004

Police Station Of Origin:
Traffic Police
10 Ubi Avenue 3 SINGAPORE 408865
Tel No: 65470000

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Report No. T/20191012/7004

CONTINUATION OF REPORT

Driver			
Name	CHUN SEHYUN	ID No.	S8368942J
Related Vehicle	SMG2042A (Car)	Contact No.	86224304
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

Hi IO,

Accident happen on 11 Oct 2019, around 7:45pm on the express way PIE(Changi) 9.9km.

Heavy and slow traffic. Clear weather. Driving on 1st lane, with my 3yrs old daughter on a child carseat at the back left passenger rear facing. Both myself and daughter with seat belt on.

There was three car involved in the chain car accident. SGW6612R, SLJ3502D (Myself) and SMG2042A.

I was driving behind SMG2042A, and he break and I follows to break to almost a stop. Lesser than 50km/h. Later a few seconds later, SGW6612R hit my rear and my car SLJ3502D pushes forward to hit the rear of SGM2042A.

My daughter Isabelle Tan Qian Hui was admitted to KK Hospital by ambulance from the place of accident. She was given 3days MC, advise to monitor.

After settle my daughter, 02:04am 12 Oct 2019, I went go to A &E at Changi General Hospital. I was given 4days MC, advise to monitor.

Thank you.

Police Report



**SINGAPORE
POLICE FORCE**



T/20191012/7004

Police Station Of Origin:
Traffic Police
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Tel No: 65470000

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Report No. T/20191012/7004

CONTINUATION OF REPORT

Sketch Plan

Informant is not able to provide sketch plan

Signature Of Officer Recording The Report:
Not applicable

Signature Of Interpreter:
Not applicable

Officer In Charge Of Case:
TP / TPIB /
THABAGESH JEYATHESH
Contact No.: 65476232

Authentication Stamp

NP168

Signature Of Informant:
The identity of the person making this report has
been authenticated by SingPass. No signature is
required.

Date/Time:
12/10/2019 08:21

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

