

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	23/10/2019 12:09
Date Of Accident	22/10/2019 18:00
Exact Location Of Accident	AYE TOWARDS TUAS BEFORE ALEXANDRA FLYOVER
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SKS728D
Insured/Policyholder	
Name Of Registered Owner	MARISSA PRIMADY CHUA
NRIC No	S8628607F
Email Address	MARISPCHUA@GMAIL.COM
Mobile Phone No	(LOCAL) +65-94504013
Alternative Phone No	OTHERS-94504013

Vehicle Particulars

Manufacturer	VOLKSWAGEN
Model	POLO-1.2 TSI (A)
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	5104364691
Cover Note Number	

Driver

Name of Driver	MARISSA PRIMADY CHUA
NRIC No	S8628607F
Date Of Birth	30/09/1986
Occupation	INDOOR
Date Of Driving Pass	03/10/2008
Driving Experience	11 YEARS AND 0 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-94504013
Fax Number	
Contact Number	OTHERS-94504013
EEmail Address	MARISPCHUA@GMAIL.COM

Address	45 HINDHEDE WALK #01-09
Postcode	587978
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?	YES
Foreign Vehicle Registration Number	JTM2716 (MOTORCYCLE)
Number of vehicles (including own vehicle) involved in the accident	3
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: : EUGENIA GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT TIMAH NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 1 TOH YI DRIVE , POSTCODE: 590001 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4689999 - FAX NO: 64623782
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20191022/2196

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	JTM2716
Vehicle Make/Model/Colour	YAMAHA
Details Of Properties	
Vehicle Category	MOTORCYCLE
Name of Driver	VIMALAN RAAJ A/L KANAGARAJOO

NRIC/Passport Number	970702435189
Contact Number	93902406
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number	YN8434J
Vehicle Make/Model/Colour	ISUZU
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	RAJ
NRIC/Passport Number	
Contact Number	82024948
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

Accident Sketch Plan

SKETCH PLAN

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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: 23/10/19 10:30 AM

Driver's Signature

(If driver is not the policyholder)

Date & Time:

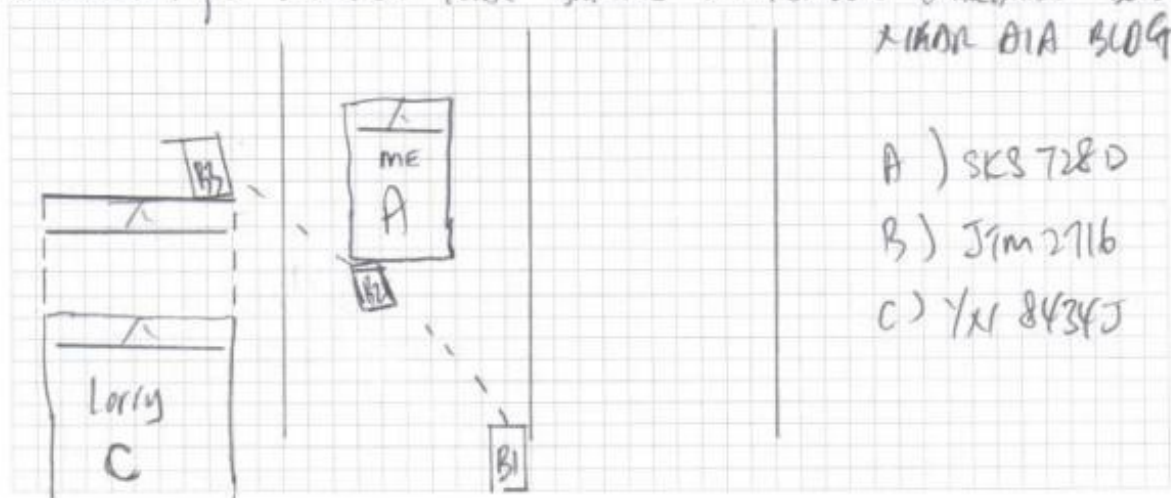
Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PIS REFER TO POLICE REPORT
7/2019/1022/2196

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/20191022/2196

1 of 4

Police Station Of Origin:
Bukit Timah NPP
1 Toh Yi Drive #01-139 SINGAPORE 591501
Tel No: 1800-4689999

Report No. T/20191022/2196

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 22/10/2019 22:17		Vide Report No.: G/20191022/0145		Station Diary No.: 67	
Informant's Particulars					
Name of Informant: MARISSA PRIMADY CHUA			Address: 45 HINDHEDE WALK #01-09 SINGAPORE 587978		
ID Type / ID No.: NRIC NO / S8628607F			Contact No.: Home/Office: Mobile: 94504013		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Female	Age: 33	Date of Birth: 30/09/1986	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Accountant			Driving Licence Information: Class: 2B,3 Date of Expiry:		

General Information of the Accident

Type of Accident:	Injury Foreign Vehicle	Drink Drive: No	Date/Time of Accident: 22/10/2019 18:00	Type of Location: Straight Road
Location: Along Road 1 AYER RAJAH EXPRESSWAY Before the bridge of Alexandra Road. Near to AIA building.				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
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
JTM2716	Motorcycle	YAMAHA		Blue	Slightly Damaged	0
SKS728D	Car	VOLKSWAGO N	POLO GP 1.2 TSI A/T ABS D/AIRBAG 2WD 5DR	Grey	Slightly Damaged	0
YN8434J	Lorry	ISUZU	FVR34SUQ DC	White	No Damage	0

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20191022/2196

Police Station Of Origin:
Bukit Timah NPP
1 Toh Yi Drive #01-139 SINGAPORE 591501
Tel No: 1800-4689999

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Report No. T/20191022/2196

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SKS728D	NTUC Income Insurance Co-Operative Limited	5104364691	10/10/2018	24/03/2020

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL			Use of Pedestrian Crossing: NA	
Rider				
Name	VIMALAN RAAJ A/L KANAGARAJOO		ID No.	970702435189
Related Vehicle	JTM2716 (Motorcycle)		Contact No.	93902406
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	Slight
Driver				
Name	MARISSA PRIMADY CHUA		ID No.	S8628607F
Related Vehicle	SKS728D (Car)		Contact No.	94504013
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date	Class: 2B,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 22/10/2019 at about 1800hrs, I was driving my car and I was travelling along AYE towards Tuas at the 2nd lane of 3 lanes. As I was reaching to the bridge of Alexandra Road near to AIA building, suddenly I heard loud bang sound from the rear of my car. When I looked at my rear mirror and I saw vehicles had stopped so I moved my car to the side of the road. After which, I stepped out from my car and I saw a rider with his motorcycle lying on the 3rd lane in front of the lorry. I then walked back to the rear to see what had happened to the rider and lorry. The lorry driver had called the ambulance and police to the scene. As my observation to the rider, he was visibly injured on his leg. There was damaged to my car rear portion and left taillight case crack as well due to the earlier incident which the rider had collided onto my car.

When the ambulance and traffic police arrived. The rider was conveyed by the ambulance to the hospital and traffic police at the scene to handle the incident. I was issued with traffic accident case card by the traffic police and advised me to make a traffic accident report to any police station.

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20191022/2196

Police Station Of Origin:

3 of 4

Bukit Timah NPP

Report No. T/20191022/2196

1 Toh Yi Drive #01-139 SINGAPORE 591501

Tel No: 1800-4689999

CONTINUATION OF REPORT

I wish to state that I have camera footage of the incident which I took down from one of the car driver (contact number 91384591 unknown name and vehicle no) who was behind me.

I wish to state that I have taken down the other parties particulars. The lorry driver named: Raj Hp: 92024948.

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20191022/2196

Police Station Of Origin:
Bukit Timah NPP
1 Toh Yi Drive #01-139 SINGAPORE 591501
Tel No: 1800-4689999

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Report No. T/20191022/2196

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:

D /

Sgt 3 ZAMBREE BIN SA'AT

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / AEIT /

SSI 2 JUREMAH BINTE AHMAD

Contact No.: 65476219

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

22/10/2019 22:17

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



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