

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	11/11/2019 09:32
Date Of Accident	10/11/2019 13:20
Exact Location Of Accident	PIE HEADING TOWARDS TUAS BEFORE CLEMENTI RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SDL3212A
Insured/Policyholder	
Name Of Registered Owner	LIONG MEE LING
NRIC No	S0187777A
Email Address	LIUMEELING@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-93854201
Alternative Phone No	OFFICE-93854201

Vehicle Particulars

Manufacturer	AUDI
Model	Q3 1.4 TFSI
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	5086414230-02
Cover Note Number	

Driver

Name of Driver	LIU SHIN SHIN
NRIC No	S0392288Z
Date Of Birth	13/12/1949
Occupation	INDOOR
Date Of Driving Pass	10/03/1969
Driving Experience	50 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-93854201
Fax Number	
Contact Number	OFFICE-93854201
Email Address	LIUSHINSHIN@GMAIL.COM

Address	11 WATTEN CLOSE
Postcode	287734
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	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)	1

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 CENTRE
Police Station Address	ROAD: 1 DUKE ROAD , POSTCODE: 268914 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-4629999 - FAX NO: 64628933
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO THE SKETCH PLAN & POLICE REPORT NO. T/20191110/2068

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	THE SD CARD OF CAMERA HAS BEEN TAKEN BY THE POLICE
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SJU4658Y
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	
Insurance Company Name	

Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SHA6791K
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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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: WALLY KHAN SEALY, George
NRIC/FIN No.: G9487143X



Sketch Plan #2

SKETCH PLAN

A - SDL 3212A
B - SJU 4658Y
C - STA 6791K

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

please refer to the ~~at~~ police report NO. T/20191110/2068

DECLARATION

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

Ata McGee

Policyholder's Signature
Date & Time:

Amir

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

Reporting Centre Personnel's Signature
Name: Wahid Khan Khan, George
NRIC/FIN No.: G29571438

Police Report



**SINGAPORE
POLICE FORCE**



T/20191110/2068

1 of 3

Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 266914
Tel No: 1800-4629999

Report No. T/20191110/2068

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/11/2019 18:08		Vide Report No.: J/20191110/0105		Station Diary No.: 34	
Informant's Particulars					
Name of Informant: LIU SHIH SHIN			Address: 11 WATTEN CLOSE SINGAPORE 287734		
ID Type / ID No.: NRIC NO / S0392288Z			Contact No.: Home/Office: Mobile: 98315165		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 69	Date of Birth: 13/12/1949	Type of Informant: Driver		
Race: Chinese			Language:		Institution / School Name:
Occupation: Retiree			Driving Licence Information: Class: Date of Expiry:		

General Information of the Accident

Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 10/11/2019 13:20	Type of Location: Straight Road
Location: Along Road 1 PAN ISLAND EXPRESSWAY				
PIE heading toward Tuas before Clementi Rd/ Dunearn Rd exit				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Dual Carriage 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
SDL3212A	Car				Slightly Damaged	0
SHA6791K	Car				Seriously Damaged	0
SJU4658Y	Car				Seriously Damaged	1

Police Report



**SINGAPORE
POLICE FORCE**



T/201911102068

Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 268914
Tel No: 1800-4629999

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Report No. T/201911102068

CONTINUATION OF REPORT

Brief Details.

On 10/11/2019 at about 1320hrs, I was travelling on the extreme right lane in my vehicle (SOL3212A, V1) at PIE heading toward Tuas before Clementi Rd/ Dunearn Rd exit. The traffic was heavy as such I was travelling at about 70km/h.

There were 3 cars in front of me at the point of time and there was an area that was on my right side was been blocked off by the construction at work using cones however it was not fully covered as such the first vehicle (SMD1608M) of the 3 vehicles in front of me suddenly slowed down abruptly and made a right turn into the area thinking it was the exit to clementi rd. It then causes the rear 2 vehicles and myself to came to stop to avoid collision with the first vehicle.

Suddenly, I felt an impact coming from the back of my vehicle, I immediately came down and discovered that a chain collision had occurred involving myself as the first vehicle, a silver Mitsubishi as the second car (SJU4858Y, V2) and a blue comfort taxi (SHA6791) as the last vehicle.

I then went to made a check with all the drivers involved in the accident and V2's driver informed me that he had already stopped in time before colliding in me however his vehicle was been pushed forward by V3 as such caused the chain collision.

Subsequently, ambulance called down to scene as passenger of V2 was feeling unwell which she was then conveyed by the ambulance and traffic police was called down to scene as well vide to J/20191110/0105.

I would like to inform that these are the following damages the vehicles involved in the accident had suffered:

V1's rear bumper was dented and scratched.

V2's front part of the vehicle was badly damaged and was not movable after the accident.

V3's front part of the vehicle was badly damaged and was not movable after the accident.

My front camera memory card was handed over to the traffic police for investigation.

I would like to inform that none of the drivers involved in the accident were injured and there was no passenger in V1 and V3.

Police Report



SINGAPORE
POLICE FORCE



T/20191110/2068

3 of 3

Report No. T/20191110/2068

Police Station Of Origin:
Bukit Timah N.P.C
1 Duke's Road SINGAPORE 268914
Tel No: 1800-4629999

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:
E /
Sgt 2 CHENG JARREL

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
10/11/2019 18:08

Officer In Charge Of Case:
TP / GIT /
Sgt 3 MOHAMED RIZWAN BIN IBRAHIM
Contact No.: 93265045



SINGAPORE
POLICE FORCE

Classification Of Case:

SN 170

Authentication Stamp
NP168

SIGNATURE

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



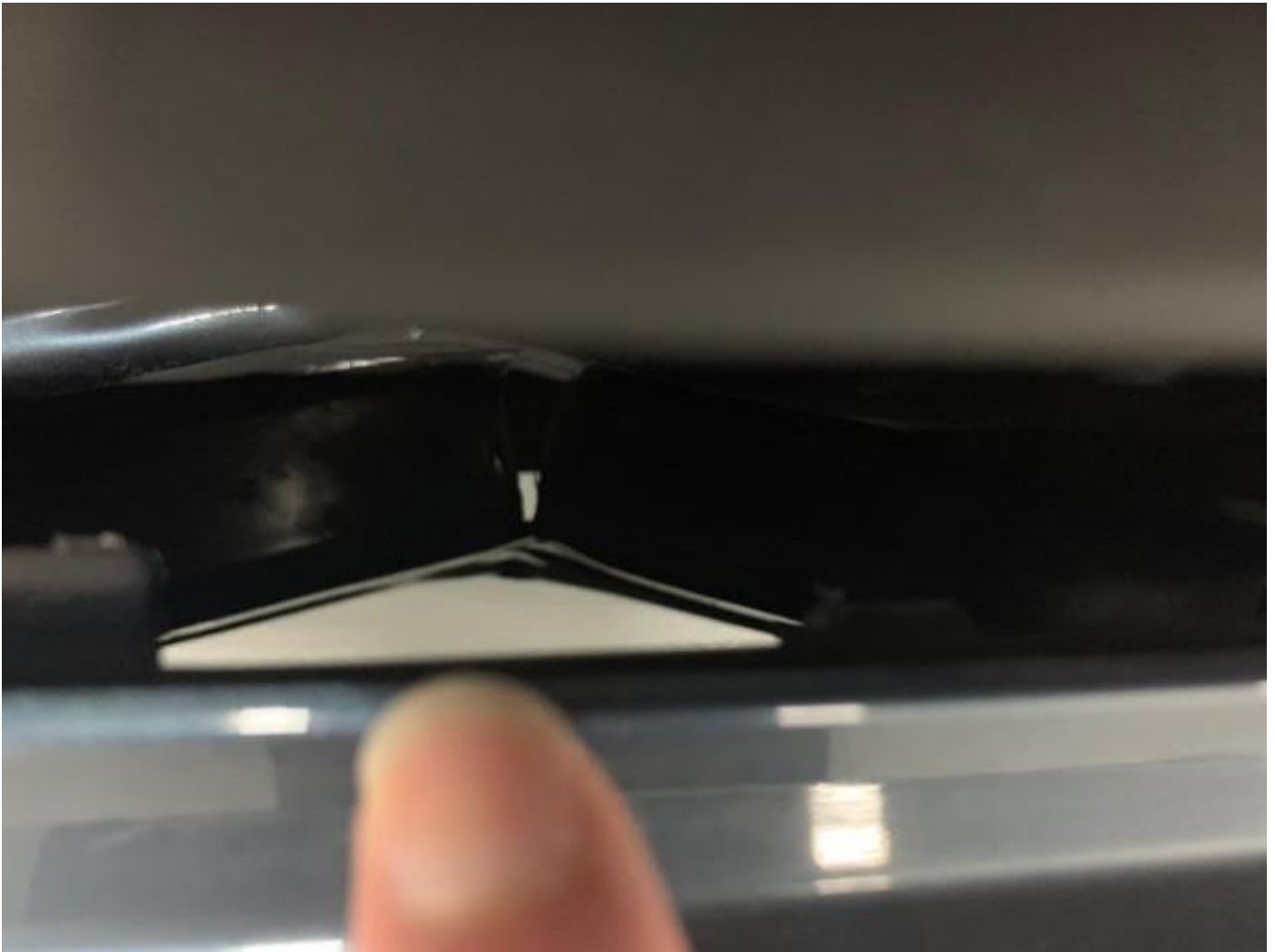
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