

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	10/12/2019 13:58
Date Of Accident	09/12/2019 16:00
Exact Location Of Accident	BEDOK NORTH RD BETWEEN BLK 109 & BLK 11 NEAR TRAFF
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGJ2467M
Insured/Policyholder	
Name Of Registered Owner	CHAN SHI LIN EILEEN
NRIC No	S8814315I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-90706022
Alternative Phone No	OFFICE-90706022

Vehicle Particulars

Manufacturer	TOYOTA
Model	ALTIS
Exact Purpose for which vehicle was being used at time of accident	
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	SOMPO INSURANCE SINGAPORE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D19MTPV01010190
Cover Note Number	

Driver

Name of Driver	CHAN SHI LIN EILEEN
NRIC No	S8814315I
Date Of Birth	19/04/1988
Occupation	INDOOR
Date Of Driving Pass	11/04/2008
Driving Experience	11 YEARS AND 7 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-90706022
Fax Number	
Contact Number	OFFICE-90706022
Email Address	NOEMAIL

Address	51 HOW SUN WALK
Postcode	538466
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	RAINING
Road Surface	WET

Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	5
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)	2
Passenger 1	NAME: : OON JIAN SHENG GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BEDOK SOUTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 20 CHAI CHEE DRIVE , POSTCODE: 469045 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2448999 - FAX NO: 62446558
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT: T/20191210/2038.

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	SLF2913D
Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
Vehicle Category	PRIVATE CAR
Name of Driver	LOH YU LING DANIEL
NRIC/Passport Number	S0020852C
Contact Number	98168681
Address	

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

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SHB1226D
Vehicle Make/Model/Colour
Details Of Properties VEHICLE C
Vehicle Category TAXI
Name of Driver NG SWEE PING
NRIC/Passport Number S0232549G
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number UNKNOWN
Vehicle Make/Model/Colour
Details Of Properties VEHICLE D
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 4

Vehicle Registration Number UNKNOWN
Vehicle Make/Model/Colour
Details Of Properties VEHICLE E
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 INJURED PERSON 1

Name CHAN SHI LIN EILEEN
Approximate Age
Injuries Sustain
Injured person in which vehicle? SGJ2467M
Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

DETAILS OF INJURED PERSON 2

Name

OON JIAN SHENG

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SGJ2467M

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

Postcode

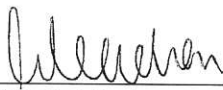
SKETCH PLAN

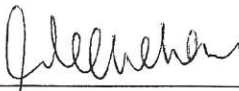
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6. The report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will for a fee be made available upon application 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: 10/12/19


Driver's Signature
(If driver is not the policyholder)
Date & Time: 10/12/19

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

Sketch Plan #2 Pg. 1

SKETCH PLAN

Vehicle A: SGJ 2467M
Vehicle B: SLF 2913D.
Vehicle C: SHB 1226D.
Vehicle D: Unknown
Vehicle E: Unknown.

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to the Police Report.

DECLARATION

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

Wieder

Policyholder's Signature

Date & Time: 10/12/19

CHARLES BRONKHORST AND OTHERS VS.

Walter

Driver's Signature
(If driver is not the policyholder)

Date & Time: 10/12/19

Reporting Centre Personnel's Signature

Name:

NRIC/FIN No.:



**SINGAPORE
POLICE FORCE**



T/20191210/2038

Police Station Of Origin:
Bedok South N.P.C
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

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Report No. T/20191210/2038

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 10/12/2019 11:41			Vide Report No.:		Station Diary No.: 24	
Informant's Particulars						
Name of informant: CHAN SHI LIN, EILEEN			Address: 51 HOW SUN WALK SINGAPORE 538466			
ID Type / ID No.: NRIC NO / S88143151			Contact No.:		Mobile: 90706022	
Nationality: SINGAPORE CITIZEN			Email:			
Sex: Female	Age: 31	Date of Birth: 19/04/1988	Type of Informant: Driver			
Race: Chinese			Language: English		Institution / School Name:	
Occupation: MARKETING EXECUTIVE			Driving Licence Information: Class: 3		Date of Expiry:	

General Information of the Accident				
Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 09/12/2019 16:00	Type of Location: Straight Road
Location: Along Road 1 BEDOK NORTH ROAD Along Bedok North Road between Blk 109 and Blk 111 near traffic light				
Weather: Drizzling		Road Surface: Wet		Road Speed Limit:
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: chain collision				Anyone conveyed by ambulance: No

Details of Vehicle Involved						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SGJ2467M	Car	TOYOTA	COROLLA ALTIS 1.6 AUTO	Silver	Seriously Damaged	1
SHB1226D	Taxi	TOYOTA	PRIUS TAXI (SMRT)	Maroon	Slightly Damaged	0
SLF2913D	Car	SUBARU	FORESTER 2.0XT CVT AWD SR	Silver	Slightly Damaged	0



**SINGAPORE
POLICE FORCE**



T/20191210/2038

Police Station Of Origin:
Bedok South N.P.C
20 Chai.Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

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Report No. T/20191210/2038

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SGJ2467M	TENET SOMPO INSURANCE PTE. LTD.	D19MTPV01010190	10/07/2019	09/07/2020

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	CHAN SHI LIN, EILEEN	ID No.	S8814315i
Related Vehicle	SGJ2467M (Car)	Contact No.	90706022
Hospital/Clinic	ACCESS MEDICAL CLINIC	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	09/12/2019	Date Discharge	09/12/2019
No. of Days granted Medical Leave	01	Degree of Injury	Slight
Driver			
Name	NG SWEE PING	ID No.	S0232549G
Related Vehicle	SHB1226D (Taxi)	Contact No.	NIL
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
Driver			
Name	LOH YU LING DANIEL	ID No.	S0020852C
Related Vehicle	SLF2913D (Car)	Contact No.	98168681
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



SINGAPORE
POLICE FORCE



T/20191210/2038

Police Station Of Origin:
Bedok South N.P.C
20 Chai Chee Drive SINGAPORE 469045
Tel No: 1800-2448999

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Report No. T/20191210/2038

CONTINUATION OF REPORT

Brief Details.

On 10/12/2019 at about 1600hrs, I was driving along Bedok North Road going towards Bedok Div HQ and was approaching the traffic light junction outside Blk 109 Bedok North Road. As I was approaching the traffic light which is still "Green", I slowed down as the taxi in front of me slowed down due to heavy traffic. Suddenly, there was a hard impact from the rear. A car from behind me had hit me causing my car to move forward and hit the taxi in front of me as well. We got down from our vehicles and exchanged our particulars. No one was injured during the collision. However, my fender and front bonnet were a bit dislodged and my rear bumper was dented and dislodged. As for the taxi in front of me, had slight scratches on the rear bumper whereas the car behind me only had his front right forklight attachment dropped.

After I reached home, I went to the nearby clinic as I have a back and neck pain. I was given 1 day MC.