

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	19/12/2019 14:40
Date Of Accident	18/12/2019 11:30
Exact Location Of Accident	PIE TOWARDS JURONG
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMD222B
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Insured/Policyholder

Name Of Registered Owner	NG BUAN HEE CEDRIC (HUANG WANXI CEDRIC)
NRIC No	SXXXX115D
Email Address	NBHC@YAHOO.COM
Mobile Phone No	(LOCAL) +65-90099001
Alternative Phone No	OTHERS-90099001

Vehicle Particulars

Manufacturer	HONDA
Model	JAZZ 1.5 CVT

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
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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	SD18V09886/VPC/R00
Cover Note Number	

Driver

Name of Driver	NG BUAN HEE CEDRIC (HUANG WANXI CEDRIC)
NRIC No	SXXXX115D
Date Of Birth	19/08/1974
Occupation	OUTDOOR
Date Of Driving Pass	21/08/1992
Driving Experience	27 YEARS AND 3 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-90099001
Fax Number	
Contact Number	OTHERS-90099001
EEmail Address	NBHC@YAHOO.COM

Address	APT BLK 488 ADMIRALTY LINK #13-127 SINGAPORE
Postcode	750488
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	FBK222U - -
Insurance Company of Driver's Own Vehicle	NTUC INCOME INSURANCE CO-OPERATIVE LTD - -

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	TRAFFIC POLICE DIVISION HQ
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 SKETCH PLAN AND POLICE REPORT NO. T/20191218/7032.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SDM1577X <i>SDP 1577X</i>
Vehicle Make/Model/Colour	<i>mitubishi Atrage</i>
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	LAW CHOON PIOW
NRIC/Passport Number	SXXXX294A
Contact Number	91256933
Address	
Postcode	
Insurance Company Name	

Nature Of Damage

No. Of Passenger (Including Driver)

1

DETAILS OF INJURED PERSON 1

Name

NG BUAN HEE CEDRIC (HUANG WANXI CEDRIC)

Approximate Age

Injuries Sustain

Injured person in which vehicle?

SMD222B

Were seat belts worn?

Was this injured conveyed to hospital by ambulance?

Address

APT BLK 488 ADMIRALTY LINK #13-127
SINGAPORE

Postcode

750488



**SINGAPORE
POLICE FORCE**



T/20191218/7032

1 of 3

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

Report No. T/20191218/7032

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/12/2019 22:11		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: NG BUAN HEE CEDRIC			Address: APT BLK 488 ADMIRALTY LINK #13-127 SINGAPORE 750488		
ID Type / ID No.: NRIC NO / S7427115D			Contact No.:		Mobile: 90099001
Nationality: SINGAPORE CITIZEN			Email: CedricNBH@GMail.com		
Sex: Male	Age: 45	Date of Birth: 19/08/1974	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Insurance investigator			Driving Licence Information: Class: 2B,2A,3,4		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 18/12/2019 11:30	Type of Location: Straight Road
Location: PAN ISLAND EXPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 80 Km/h
Traffic Flow: One Way		Traffic Control: Not Controlled		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
SMD1577X	Car	MITSUBISHI	Attrage	White	Slightly Damaged	0
SMD222B	Car					0

Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMD1577X		Unknown		



**SINGAPORE
POLICE FORCE**



T/20191218/7032

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

Report No. T/20191218/7032

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	LAW CHOON PIOW	ID No.	S7028294A
Related Vehicle	SMD1577X (Car)	Contact No.	91256933
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	NG BUAN HEE CEDRIC	ID No.	S7427115D
Related Vehicle	SMD222B (Car)	Contact No.	90099001
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,3,4 Date of Expiry: NIL
Date Treatment	18/12/2019	Date Discharge	18/12/2019
No. of Days granted Medical Leave	03	Degree of Injury	Slight

Brief Details.

On the above mentioned date/time, I was travelling along PIE towards the direction of Jurong on lane 2. Lane 1 was closed to traffic as there was ongoing road works. Just before Bukit Timah exit, the traffic slowed down to almost a standstill. I reduced my speed accordingly keeping a safe distance from the vehicle in front. Suddenly, A white Mitsubishi Attrage bearing registration number SMD1577X could not stop in time and hit my vehicle at the rear portion.

Both drivers then stopped and exchanged particulars and proceeded on our way.

A few hours later, I started feeling pain at my lower neck and went to consult a doctor. I was then prescribed some medication and given 3 days MC.

Video Footage of the accident is available if necessary.

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: 19/12/19

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


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



**SINGAPORE
POLICE FORCE**



T/20191218/7032

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

Report No. T/20191218/7032

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 / TPHQ /
SHARIFAH NOR FARIZAN BINTE SYED MOHD
SAID
Contact No.: 65476172

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:
18/12/2019 22:11

Classification Of Case: