SINGAPORE ACCIDENT STATEMENT

IMPORTANT NOTICE

Date Of Driving Pass

Driving Experience

Mobile Number

Fax Number
Contact Number

EMail Address

Gender

- 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 <u>truthful and accurate</u> as possible. Any wilful misrepresentation or witholding 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

aforesaid.	
	ACCIDENT STATEMENT
Date Of Report	08/01/2020 12:22
Date Of Accident	03/08/2019 12:30
Exact Location Of Accident	1 SIGLAP RD @ MANDARIN GARDENS
Country/State of Loss	SINGAPORE
	DETAILS OF OWN VEHICLE
Vehicle Registration Number	SLZ769L
Insured/Policyholder	
Name Of Registered Owner	LEE LIN JENISE
NRIC No	SXXXX239F
Email Address	NEEZ91@HOTMAIL.COM
Mobile Phone No	(LOCAL) +65-93661231
Alternative Phone No	OTHERS-93661231
Vehicle Particulars	
Manufacturer	TOYOTA
Model	HARRIER
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	REPORTING ONLY
Vehicle Category	PRIVATE CAR
Insurance Company	
Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A 80468450 QMY
Cover Note Number	
Driver	
Name of Driver	LEE LIN JENISE
NRIC No	SXXXX239F
Date Of Birth	14/02/1972
Occupation	INDOOR
Data Of Driving Page	02/04/1006

02/04/1996

MALE

23 YEARS AND 4 MONTHS

(LOCAL) +65-93661231

NEEZ91@HOTMAIL.COM

OTHERS-93661231

Address 1 SIGLAP ROAD

#06-05

Postcode 448906

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 COLLIDED INTO PEDESTRIAN

Weather Conditions CLEAR
Road Surface DRY

Other Information

ambulance?

Was any foreign vehicle involved in this accident? NO

Number of vehicles (including own vehicle)

involved in the accident

1

Was any body injured in the Accident? YES

Was any injured conveyed to hospital by

NO

YES

Was any other material or property damaged?

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 JOO CHIAT NEIGHBOURHOOD POLICE POST

Police Station Address ROAD: 267 ONAN ROAD, POSTCODE: 424773, COUNTRY: SINGAPORE

Police Station Contact **TEL NO**: 1800-3459999 - **FAX NO**: 64474181

Was notice of intended Prosecution given?

If Yes, against whom?

NO

Circumstances of Accident

PLS REFER TO THE POLICE REPORT: G/20190804/2130

Attachment(s)

Are accident photos available for attachment? YES Was there any video captured by Car Camera? YES

Remarks/ Reasons: FRONT ONLY

Was there any audio recorded? NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number

Vehicle Make/Model/Colour

Details Of Properties PEDESTRIAN

Vehicle Category NA/UNKNOWN

Name of Driver BLANCHE ONG

NRIC/Passport Number

Contact Number 97516892

Address

Postcode

Insurance Company Name

DETAILS OF INJURED PERSON 1

Name BLANCHE ONG

Approximate Age

Injuries Sustain CHEST PAIN(PEDESTRIAN)

Injured person in which vehicle?

Were seat belts worn?

Was this injured conveyed to hospital by

ambulance?

NO

Address Postcode

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

- 1. Please report correctly the details of the accident to speed up the claims process.
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- 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.
- 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.
- 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.
- 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:
 - 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:
 - 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: 7/1/2020

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

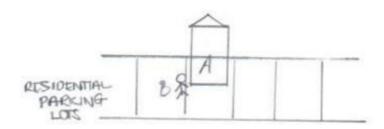
Name: NRIC/FIN No.:

ym 08/01/20

SKETCH PLAN

I SIGLAP RE @ MANDARIN GARDENS

A - SLZ 769L B- PEDESTRIAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

REFER	70 A	DLICE	REPORT: 620190804/2130

DECLARATION

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

Policyholder's Signature Date & Time: 7/1/2020

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

Date & Time:

Report Centre Personnel's Signature Name

NRIC/FIN No.:





Report No. G/20190804/2130

POLICE REPORT (NP299)

Police Station Of Origin Joo Chiat NPP 267 Onan Road SINGAPORE 424773 Tel No: 1800-3459999

Date/Time Report Made	Vide Report No. G/20190308/2129			Station Diary No. 23	
04/08/2019 21:33					
Name Of Informant	Address				
JENISE LEE LIN	1 SIGLAP ROAD #06-05 SINGAPORE 448906				
ID Type / ID No. NRIC NO / S7206239F	Contact No. Home/Office Mobile 93661231		Mobile		
Nationality SINGAPORE CITIZEN	Email Address				
Occupation	Sex	Age	Date of Birth	Race	
Housewife	Female	47	14/02/1972	Chinese	
Institution/School Name	Language English				
Date/Time Of Incident 03/08/2019 12:30	Location Of Incident 1 SIGLAP ROAD MANDARIN GARDENS SINGAPORE 448906				
	Ground level open space carpark lot number 629				

Brief details.

On 03/08/2019 at about 1230hrs I was driving my vehicle bearing the plate number SLZ769L (Toyota Harrier) inside my condo (Mandarin Garden) open space carpark. I was about to park my vehicle when I realized that there was a group of 4 people standing at the building. I came to a stop to allow the group to cross over to the carpark. After which I maneuvered my vehicle into the parking lot. As I was reversing and I noticed the group was behind my vehicle via my rear view mirror. While I continued to reverse back slowly, suddenly I heard a loud bang and came to a complete stop.

Signature Of Officer Recording The Report:	Signature Of Informant: \
G / Sgt 2 MAK YIK MENG, EUGENE	Junely
Signature Of Interpreter: Not applicable	Date/Time: 04/08/2019 21:33
Officer In-Charge Of Case: G / Bedok Police Divisional Investigation Branch / Staff Sgt MOHAMAD RAFEEQ BIN HAJI MOHAMAD RASHID Contact No.: 62447200	Classification Of Case:
Authentication Stamp	



G/20190804/2130

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POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. G/20190804/2130

I quickly alighted from my vehicle to make a check and noticed a female (Blanche Ong, h/p: 97516892) standing at my left rear vehicle. I went up to her to make sure that she was fine. I informed her to let me parked my vehicle first before we continued further. After I parked my vehicle, I walked her to my lobby. She informed me that she was feeling some discomfort in her chest area and there was no visible injuries on her. After which I suggested to bring her to the nearest GP to make a check. But she declined as she informed that she had an appointment to attend to at Newton by 1330hrs. She also mentioned that GP was useless as such I suggested to bring her to CGH instead. She did not accept the offer as she has appointment to attend to. We exchanged particulars with each other and she left. After she left I dropped her a WhatsApp message however she did not respond to it.

I tried to calm myself down after the incident. At about 1630hrs I proceed to Joo Chiat NPP and spoke to officer Glen Chang about the matter. The officer advised me that a report was not necessary because if the other party lodged a police report, I will be notified as well. I then left the police post.

On 04/08/2019 at about 1353hrs I received a call from Inspector Leong from Bedok Police division and was told to meet him there for statement in regards to yesterday incident as Blanche had contacted the police on the evening of 03/08/2019. After the statement I spoke to my insurance agent and was advised to lodge a police report. This police report is for record purpose.

Signature Of Officer Recording The Report:

G / Sgt 2 MAK YIK MENG, EUGENE

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Signature Of Interpreter: Not applicable

Officer In-Charge Of Case: G / Bedok Police Divisional Investigation Branch / Staff Sgt MOHAMAD RAFEEQ BIN HAJI MOHAMAD RASHID

Contact No.: 62447200

Authentication Stamp

Signature Of Informant:

Date/Time: 04/08/2019 21:33

Classification Of Case:







Accident Photo





Accident Photo



Accident Photo







Report No. G/20190804/2130

POLICE REPORT (NP299)

Police Station Of Origin Joo Chiat NPP 267 Onan Road SINGAPORE 424773 Tel No. 1800-3459999

Date/Time Report Made 04/08/2019 21:33	Vide Report No G/20190308/2129			Station Diary No 23	
Name Of Informant	Address				
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ID Type / ID No. NRIC NO / S7208239F	Contact No. Home/Office		Mobile 93661231		
Nationality SINGAPORE CITIZEN	Email Andress				
Occupation	Sex	Age	Date of Birth	Race	
Housewife	Female	47	14/02/1972	Chinese	
Institution/School Name	Language English				
Date/Time Of Incident 03/06/2019 12:30	Location Of Incident 1 SIGLAP ROAD MANDARIN GARDENS SINGAPORE 448906 Ground level open space carpark lot number 629				

Brief details.

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Signature Of Officer Recording The Report	Signature Of Informant: 1	
G / Sgl 2 MAK YIK MENG, EUGENE Lager	gandy	
Signature Of Interpreter Not applicable	Date(Time: 34/08/2019 21:33	
Officer In-Charge Of Case: G / Bedox Police Divisional Investigation Branch / Staff Sgt MOHAMAD RAFEEQ BIN HAJI MOHAMAD RASHID Contact No.: 62447200	Classification Of Cese;	
Authentication Stamp		

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POLICE REPORT (NP299)

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CONTINUATION OF REPORT

Report No. G/20190804/2130

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Signature Of Officer Recording The Report:

G / Sgt 2 MAK YIK MENG, EUGENE

lyan

Signature Of Interpreter, Not applicable

Officer In-Charge Of Case G / Bedok Police Divisional Investigation Branch / Staff Sgt MOHAMAD RAFEEQ BIN HAJI MOHAMAD RASHID

Contact No : 62447200 Authentication Stamp Signature Of Informant

Date/Time; 04/08/2019 21:33

Classification Of Case:

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RECIPIENT'S COPY

STERN WARNING

Investigations against you, Jenise Lee Lin, NRIC: \$7206239F, into the following offence(s):

ALLEGED OFFENCE(S)						
S/No	Offence	Legislation	Date & time committed	Place		
1	Negligent Causing Hurt	Section 337(b), Penal Code (Chapter 224)	3 August 2019 at 12,30pm	1 Siglep Floed Singapore 448906		

have been completed.

2. After careful consideration of the facts of the case, and with the concurrence of the Attorney-General's Chambers, you are warned to refrain from any oriminal conduct. If you commit any offence in future, the same leniency analy not be shown towards you.

17 SEP 2019

DATE

INSP MOHD HIDAYAT OC GENERAL INVESTIGATION SQUAD 8 BEDOK DIVISION