

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	03/02/2020 19:28
Date Of Accident	31/01/2020 17:30
Exact Location Of Accident	PIE (TUAS) THOMSON FLYOVER (LAMP POST 833F)
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLR6871B
Insured/Policyholder	
Name Of Registered Owner	GOLDBELL CAR RENTAL PTE LTD
Co Reg No	2XXXXX651D
Email Address	HWWONG@ECOLAB.COM
Mobile Phone No	(LOCAL) +65-98622109
Alternative Phone No	OFFICE-98622109

Vehicle Particulars

Manufacturer	MAZDA
Model	3
Exact Purpose for which vehicle was being used at time of accident	ON THE WAY HOME
Are you claiming under your own insurance policy for repair to your vehicle?	YES
If No, Please state action to be taken	
Vehicle Category	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	YES
Policy Number	999994316
Cover Note Number	

Driver

Name of Driver	WONG HAN WEI (HUANG HANWEI)
NRIC No	SXXXX533H
Date Of Birth	15/07/1979
Occupation	OUTDOOR
Date Of Driving Pass	30/05/2002
Driving Experience	17 YEARS AND 8 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98622109
Fax Number	
Contact Number	OTHERS-98622109
Email Address	HWWONG@ECOLAB.COM

Address	BLK 451B BUKIT BATOK WEST AVENUE 6 #14-683
Postcode	652451
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OTHER - HIRER
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?	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?	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: : PASSENGER GENDER: : MALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	JURONG WEST NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 700 CORPORATION ROAD , POSTCODE: 649818 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2689999 - FAX NO: 62672438
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

PLEASE REFER TO SKETCH AND POLICE REPORT T/20200131/2157

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	SLE2638D
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	PRIVATE CAR
Name of Driver	MOHAMED HAZIMIN BIN ABDUL HAMID
NRIC/Passport Number	SXXXX677B
Contact Number	

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

1

DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SMN949K
Vehicle Make/Model/Colour
Details Of Properties
Vehicle Category PRIVATE CAR
Name of Driver YEO AH SENG
NRIC/Passport Number SXXXX074D
Contact Number
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

1

DETAILS OF INJURED PERSON 1

Name UNKNOWN PASSENGER
Approximate Age
Injuries Sustain SLIGHT INJURY
Injured person in which vehicle? SLR6871B
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? NO
Address
Postcode

SKETCH PLAN

1. Please report correctly the details of the accident to speed up the claims process.

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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 Traffic Police Department for investigation.

6. This report will be forwarded by the insurers to 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.

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.

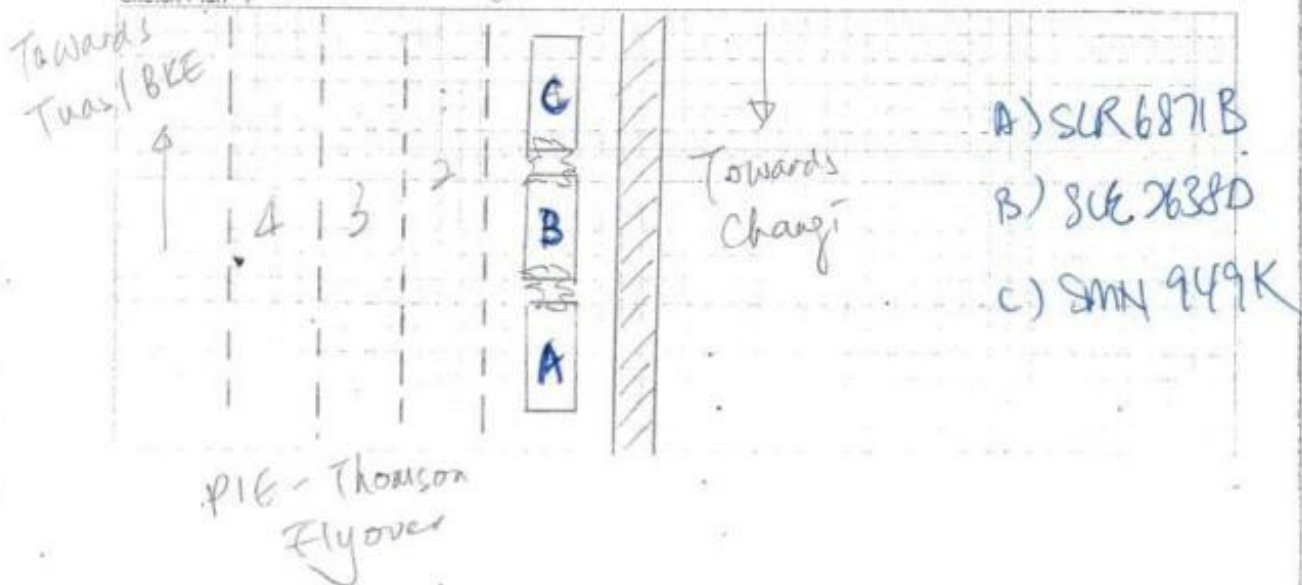
(collectively the "Purposes")

(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.




01/02/2020 1:20 hr
 Policyholder's Signature & Time Driver's Signature (if driver is not the policyholder) / Date & Time

03/02/2020
 Witnessed by Reporting Centre Personnel

Sketch Plan 4



Accident Sketch Plan


Describe Circumstance of the Accident *

On (31/01/2020) at around 1730hrs, I was driving my car bearing SLR 6871B with a passenger along PLE (THAS) Thomson Flyover near Jln Dato on lane 1. Suddenly the car in front of me bearing SLE 2638D jammed brake. Upon seeing, I applied my brake. However, I was unable to brake in time and my car collided with the rear of SLE 2638D. I went out to make a check and discovered that SLE 2638D had collided with the rear of JMN 949K. It was a chain collision involving 03 cars including myself. My car sustained crack on the front bumper and the bonnet dented. SLE 2638D sustained dents on the rear bumper. JMN 949K sustained a dent on the rear bumper. My passenger sustained injury on her lips. Nobody else was injured.


Police report 7/2020 0131/2157

Declaration

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


Policyholder's Signature



 01/02/2020 1220hr
Driver's Signature (if driver is not the policyholder) / Date & Time

 03/02/2020
Witnessed by Reporting Centre Personnel

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20200131/2157

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

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Report No. T/20200131/2157

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 31/01/2020 21:20		Vide Report No.:	Station Diary No.: 163
Informant's Particulars			
Name of Informant: WONG HAN WEI		Address: APT BLK 451B BUKIT BATOK WEST AVENUE 6 #14-683 SINGAPORE 652451	
ID Type / ID No.: NRIC NO / S7920533H		Contact No.: Home/Office: Mobile: 98622109	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 40	Date of Birth: 15/07/1979	Type of Informant: Driver
Race: Chinese		Language:	Institution / School Name:
Occupation: ENGINEER		Driving Licence Information: Class: 2B,2A,2,3 Date of Expiry:	

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 31/01/2020 17:30	Type of Location: Straight Road
Location: Along Road 1 PAN ISLAND EXPRESSWAY Along PIE(Tuas) near Jln Datoh				
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: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SLE2638D	Car				Slightly Damaged	0
SLR6871B	Car				Slightly Damaged	1
SMN949K	Car				Slightly Damaged	0

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20200131/2157

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Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

Report No. T/20200131/2157

CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	MOHAMED HAZIMIN BIN ABDUL HAMID	ID No.	S7430677B
Related Vehicle	SLE2638D (Car)	Contact No.	NIL
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	NIL
Driver			
Name	WONG HAN WEI	ID No.	S7920533H
Related Vehicle	SLR6871B (Car)	Contact No.	98622109
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL
Passenger			
Name	UNKNOWN PASSENGER	ID No.	NIL
Related Vehicle	SLR6871B (Car)	Contact No.	NIL
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

POLICE REPORT



**SINGAPORE
POLICE FORCE**



T/20200131/2157

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

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Report No. T/20200131/2157

CONTINUATION OF REPORT

Driver			
Name	YEO AH SENG		ID No. S0309074D
Related Vehicle	SMN949K (Car)		Contact No. NIL
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	NIL

Brief Details.

On 31/01/2020 at around 1730hrs, I was driving my car bearing SLR6871B with 01 passenger along PIE(Tuas) near Jin Datoh on lane 1. Suddenly, there was another car bearing SLE2638D jammed brake. Upon seeing, I applied my break. However, I was unable to brake in time and my car collided with the rear of SLE2638D. I went out to make a check and discovered that SLE2638D had collided with the rear of SMN949K. It was a chain collision involving 03 cars including myself. My car sustained crack on the front bumper and the bonnet was dented. SLE2638D sustained dents on the rear bumper. SMN949K sustained a dent on the rear bumper. My passenger sustained injury on her lips. Nobody else was injured. I am also lodging this report for insurance claims purposes.

POLICE REPORT



SINGAPORE
POLICE FORCE



T/20200131/2157

Police Station Of Origin:
Jurong West N.P.C
700 Corporation Road SINGAPORE 649818
Tel No: 1800-2689999

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Report No. T/20200131/2157

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:
J/
SC2 MUHAMMAD HAIQAL BIN ABU BAKAR

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
31/01/2020 21:20

Officer In Charge Of Case:
TP / AEIT /
SI ANG YI TING, STEPHANIE
Contact No.: 65476414

Classification Of Case:

SN 126

Authentication Stamp
NP158

Signature:

Singapore Police Force

Accident Photo



Accident Photo



Accident Photo



Accident Photo



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