

MSME20015172 / SME Motor Pte Ltd - Kaki Bukit
 ENTRY DATE & TIME: 03/02/2020 16:20
 SUBMITTED BY: Chia Pei Ying

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 16:20
Date Of Accident	01/02/2020 13:25
Exact Location Of Accident	SENNETT RD JUNCTION UPP EAST COAST RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SME449G
Insured/Policyholder	
Name Of Registered Owner	TAY WEI YUAN LIONEL
NRIC No	SXXXX058J
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-87774949
Alternative Phone No	OFFICE-87774949
Vehicle Particulars	
Manufacturer	MERCEDES-BENZ
Model	C180
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	AIG ASIA PACIFIC INSURANCE PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	1800091826-01
Cover Note Number	
Driver	
Name of Driver	LEOW HWEE LI MERISSA
NRIC No	SXXXX374Z
Date Of Birth	11/05/1975
Occupation	INDOOR
Date Of Driving Pass	24/07/1998
Driving Experience	21 YEARS AND 6 MONTHS
Gender	FEMALE
Mobile Number	(LOCAL) +65-98711971
Fax Number	
Contact Number	
Email Address	NOEMAIL

Address 17A SENNETT ROAD
 Postcode 466797
 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 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) 6
 Passenger 1 NAME: : TAY JER JANG NATHAN
 GENDER: : MALE
 Passenger 2 NAME: : TAY JER JIA NICHOLAS
 GENDER: : MALE
 Passenger 3 NAME: : TSAI LAI FA
 GENDER: : MALE
 Passenger 4 NAME: : LEOW CHYE HIONG
 GENDER: : MALE
 Passenger 5 NAME: : TAN SOOK HENG
 GENDER: : MALE

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 POLICE REPORT: T/20200203/7008.

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 SMF2935D
Vehicle Make/Model/Colour
Details Of Properties VEHICLE B
Vehicle Category PRIVATE CAR
Name of Driver MOHAMED ALI BIN MOHAMED SALLEH
NRIC/Passport Number
Contact Number 93698388
Address
Postcode
Insurance Company Name
Nature Of Damage
No. Of Passenger (Including Driver)

DETAILS OF INJURED PERSON 1

Name TSAI LAI FA
Approximate Age
Injuries Sustain
Injured person in which vehicle? SME4449G
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?
Address
Postcode

DETAILS OF INJURED PERSON 2

Name LEOW HWEE LI MERISSA
Approximate Age
Injuries Sustain
Injured person in which vehicle? SME4449G
Were seat belts worn?
Was this injured conveyed to hospital by ambulance?
Address
Postcode



**SINGAPORE
POLICE FORCE**



T/20200203/7008

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

Report No. T/20200203/7008

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 03/02/2020 12:02		Vide Report No.:		Station Diary No.:	
Informant's Particulars					
Name of Informant: LEOW HWEE LI MERISSA			Address: 17A SENNETT ROAD SINGAPORE 466797		
ID Type / ID No.: NRIC NO / S7513374Z			Contact No.: Home/Office:		Mobile: 98711971
Nationality: SINGAPORE CITIZEN			Email: merissa_leow@hotmail.sg		
Sex: Female	Age: 44	Date of Birth: 11/05/1975	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: Marketing Manager			Driving Licence Information: Class:		Date of Expiry:

General Information of the Accident

Type of Accident:	Injury Others	Drink Drive: No	Date/Time of Accident: 01/02/2020 13:25	Type of Location: T-Junction
Location: SENNETT ROAD				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working	Traffic Volume: Light	
Type of Collision: Between Moving Vehicles - Head To Side				Anyone conveyed by ambulance: No

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SME4949G	Car					0
SMF2935D	Car	BMW		White		0

Details of Person Involved

Any Pedestrian Involved: No	
No. of Pedestrians Injured: NIL	Use of Pedestrian Crossing: NA

Sketch Plan #4 Pg. 1



**SINGAPORE
POLICE FORCE**



T/20200203/7008

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

Report No. T/20200203/7008

CONTINUATION OF REPORT

Passenger			
Name	TSAI LAI FA	ID No.	NIL
Related Vehicle	SME4949G (Car)	Contact No.	NIL
Hospital/Clinic	CHONG MEDICAL CLINIC	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	03/02/2020	Date Discharge	03/02/2020
No. of Days granted Medical Leave	05	Degree of Injury	Serious
Driver			
Name	LEOW HWEE LI MERISSA	ID No.	S7513374Z
Related Vehicle	SME4949G (Car)	Contact No.	98711971
Hospital/Clinic	CHONG MEDICAL CLINIC	Class of Driving Licence & Expiry Date	Class: NIL Date of Expiry: NIL
Date Treatment	03/02/2020	Date Discharge	NIL
No. of Days granted Medical Leave	05	Degree of Injury	Serious

Brief Details.

On the above date, time and location, I was driving along Sennett Road turning right to Upper East Coast Road. As the traffic light turns green, the vehicle in front of me drove off and I proceed. When I was at the main junction, one vehicle bearing vehicle register SMF2935D beat red right and hit onto my right rear portion. I stopped me vehicle at the side of the road and exchange details with him and left.

During the accident I sustain injuries on my face and my leg and during the accident and my mother in law also injured on her leg as she is unable to bent. We rested on sunday (02.02.2020) however the following day (03.03.2020) felt the pain got worst and went consult doctor. I was given 5 days mcs and my mother in law was given 5days mcs and A&E refer for further checks.

I'm lodging this report for police and insurance action.

Sketch Plan #5 Pg. 1



**SINGAPORE
POLICE FORCE**



T/20200203/7008

3 of 3

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

Report No. T/20200203/7008

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 / TPIB /
MOHAMAD ZULFAZDLI BIN ABDULLAH
Contact No.: 65476204

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:
03/02/2020 12:02

Classification Of Case: