

## 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	20/02/2020 15:39
Date Of Accident	20/02/2020 11:40
Exact Location Of Accident	SLE TOWARDS CTE (EXIT 7 LENTOR AVE)
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SGU6403M
<b>Insured/Policyholder</b>	
Name Of Registered Owner	SHIEH LE SHIANG
Co Reg No	SXXXX435B
Email Address	NOEMAIL
Mobile Phone No	
Alternative Phone No	OFFICE-90691185

### Vehicle Particulars

Manufacturer	MERCEDES-BENZ
Model	E200NGT-PC
Exact Purpose for which vehicle was being used at time of accident	PVT USE
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	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY FIRE AND/OR THEFT
Fleet Policy	NO
Policy Number	5083005104-03
Cover Note Number	20/07/2019- 19/07/2020

### Driver

Name of Driver	WON CHOON FEI
NRIC No	SXXXX342G
Date Of Birth	25/06/1962
Occupation	INDOOR
Date Of Driving Pass	27/02/1993
Driving Experience	26 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98268811
Fax Number	
Contact Number	
EMail Address	WONCF9048@YAHOO.COM.SG

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

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SMH5239A  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category PRIVATE CAR  
Name of Driver MR LIN  
NRIC/Passport Number  
Contact Number 91908522  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

#### DETAILS OF OTHER VEHICLE PROPERTY 3

Vehicle Registration Number SMQ1064R  
Vehicle Make/Model/Colour  
Details Of Properties  
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 SLU6690R  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category PRIVATE CAR  
Name of Driver CHRIS  
NRIC/Passport Number SXXXX432B  
Contact Number 96452767  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

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

#### DETAILS OF OTHER VEHICLE PROPERTY 2

Vehicle Registration Number SMH5239A  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category PRIVATE CAR  
Name of Driver MR LIN  
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Contact Number 91908522  
Address  
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Insurance Company Name  
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Vehicle Make/Model/Colour  
Details Of Properties  
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)

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Vehicle Registration Number SLU6690R  
Vehicle Make/Model/Colour  
Details Of Properties  
Vehicle Category PRIVATE CAR  
Name of Driver CHRIS  
NRIC/Passport Number SXXXX432B  
Contact Number 96452767  
Address  
Postcode  
Insurance Company Name  
Nature Of Damage  
No. Of Passenger (Including Driver)

# SKETCH PLAN

A = SGU 6403 M

B = SMM 6906 A  
Fei Xin Bo  
S2685843 G  
hp: 9007 5850

C = SMH 5239 A  
Mr Lin  
hp: 91908522

D = SMQ 1064 R

E = SLU 6690 R  
Chris  
S8473432 B  
hp: 96452767

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police Report:

Note : Please note that your insurer may have 14days Time Frame for you to submit an Own Damage Claim under your own comprehensive policy. Please check with your policy for more information.

## DECLARATION

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

Policyholder's Signature  
Date & Time:

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

Reporting Centre Personnel's Signature  
Name: *Yee*  
NRIC/FIN No.: *C45*

GIARMC SketchPlan form V3 ( ) Claim Own Policy ( ) Claim Third Party ( ) Reporting Only  
( ) Claim OD/TP at other workshop ( )

# SKETCH PLAN

VEHICLE NO.: SGU 6403 M  
INSURER : NMC  
DATE & TIME: 20/02/2020  
@ 11:40 am

## IMPORTANT NOTICE

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

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

Reporting Centre Personnel's Signature  
Name: Evelyn  
NRIC/FIN No.: C45



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

Report No. T/20200220/7021

**REPORT OF A TRAFFIC ACCIDENT**

Date/Time Report Made: 20/02/2020 18:13			Vide Report No.:		Station Diary No.:	
<b>Informant's Particulars</b>						
Name of Informant: WON CHOON FEI			Address: 19 WOODLANDS DRIVE 72 #06-51 SINGAPORE 738098			
ID Type / ID No.: NRIC NO / S2619342G			Contact No.: Home/Office:		Mobile: 98268811	
Nationality: SINGAPORE CITIZEN			Email: WONCF9048@YAHOO.COM.SG			
Sex: Male	Age: 57	Date of Birth: 25/06/1962	Type of Informant: Driver			
Race: Chinese			Language: English		Institution / School Name:	
Occupation: Tour guide			Driving Licence Information: Class: 3		Date of Expiry:	

<b>General Information of the Accident</b>				
Type of Accident:	Non-Injury Government Property	Drink Drive: No	Date/Time of Accident: 20/02/2020 11:40	Type of Location: Gradient
Location:  SELETAR EXPRESSWAY				
Weather: Clear		Road Surface: Dry		Road Speed Limit: 90 Km/h
Traffic Flow: One Way		Traffic Control:		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
SGU6403M	Car	MERCEDES BENZ	E200	Silver	Seriously Damaged	1
SLU6690R	Car	MAZDA	3	Grey	Slightly Damaged	0
SMH5239A	Car	HONDA	FREED	Black	Seriously Damaged	1
SMM6906A	Car	MAZDA	6	Blue	Seriously Damaged	0
SMQ1064R (Not Accurate)	Car	TOYOTA		Silver	Seriously Damaged	0



**SINGAPORE  
POLICE FORCE**



T/20200220/7021

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

Report No. T/20200220/7021

**CONTINUATION OF REPORT**

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SGU6403M	NTUC Income Insurance Co-Operative Limited	508300510403	20/07/2019	19/07/2020

Details of Person Involved				
Any Pedestrian Involved: No				
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA		
Driver				
Name	WON CHOON FEI		ID No.	S2619342G
Related Vehicle	SGU6403M (Car)		Contact No.	98268811
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
Passenger				
Name	WON CHIAN LIM		ID No.	S8970707B
Related Vehicle	SGU6403M (Car)		Contact No.	93765885
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
Passenger				
Name	Unknown Passenger		ID No.	NIL
Related Vehicle	SMH5239A (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





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

Report No. T/20200220/7021

**CONTINUATION OF REPORT**

Brief Details.

I was driving down SLE towards CTE on the first lane of the expressway. The car in front about 15 meter away from me braked suddenly. I immediately slowed down my vehicle and stop about 8 meters from the car. I was position slightly towards the right of the lane to avoid on-coming traffic from behind. The car that was behind me hit my left rear and my car was push further towards the rail/divider on my right hand side. The right front end of my car hit the rail on impact and the right body of the car scratched against the rail for about 6-10 meters. When it all stopped, I could not open the door from the driver seat and had to climb out from the left of the car. There were 5 cars in the collision. My son and I went to check if the other drivers were safe. Upon confirmation, my son set up the hazard warning about 30 meters from the scene of the event. We also called the police to report the incident. The AETOS officers wearing LTA vest came with the EMAS recovery truck in about 30 minutes and instructed that we leave the scene. We tried to move the vehicle away from the scene but had no choice to pull over just before the Ang Mo Kio avenue 5 exit because the bumper and boot was causing too much difficulty to drive. An NTUC Income insurance representative came and inspected our car on sight. It was there then I realised that the right body of my car had severe scratches and right front car lamp was damaged by the impact. Initially, the ATEOS officer told us that there seem to be no damage to the government property. However, upon inspection and review of the vehicle cam-recorder, I am sure that I hit the rail/divider causing the damage to the body of my car. The car is damaged on the left rear bumper, the boot, the interior box, the right front bumper, the right body.





**SINGAPORE  
POLICE FORCE**



T/20200220/7021

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

Report No. T/20200220/7021

**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 /  
ONG YONG HOCK  
Contact No.: 65476436

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:  
20/02/2020 18:13

Classification Of Case: