

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	19/03/2020 13:09
Date Of Accident	18/03/2020 09:25
Exact Location Of Accident	SIMEI ST 3
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SJX1902X
Insured/Policyholder	
Name Of Registered Owner	LEI FU TRADING CO
Co Reg No	3XXXX100X
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96775731
Alternative Phone No	OFFICE-96775731

Vehicle Particulars

Manufacturer	DAIHATSU
Model	MATERIA 1.5L AUTO ABS AIRBAG 2WD
Exact Purpose for which vehicle was being used at time of accident	WORKING
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	A300269254MTR
Cover Note Number	

Driver

Name of Driver	TAN KIM CHYE
NRIC No	SXXXX424C
Date Of Birth	21/11/1951
Occupation	OUTDOOR
Date Of Driving Pass	17/04/1973
Driving Experience	46 YEARS AND 11 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96775731
Fax Number	
Contact Number	OFFICE-96775731
Email Address	NOEMAIL

Address	BLK 897A TAMPINES STREET 81 #10-706
Postcode	521897
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	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?	YES
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	TAMPINES NEIGHBOURHOOD POLICE CENTRE
Police Station Address	ROAD: 6 TAMPINES AVE 4 , POSTCODE: 529682 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-5871999 - FAX NO: 65871699
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20200318/2074.

Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	YES
Remarks/ Reasons:	VIDEO FOOTAGE WITH TRAFFIC POLICE
Was there any audio recorded?	NO

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SLD2907H
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)

1

DETAILS OF INJURED PERSON 1

Name TAN KIM CHYE
Approximate Age
Injuries Sustain BODY
Injured person in which vehicle? SJX1902X
Were seat belts worn? YES
Was this injured conveyed to hospital by ambulance? YES
Address
Postcode

Accident Sketch Plan

SKETCH PLAN

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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.



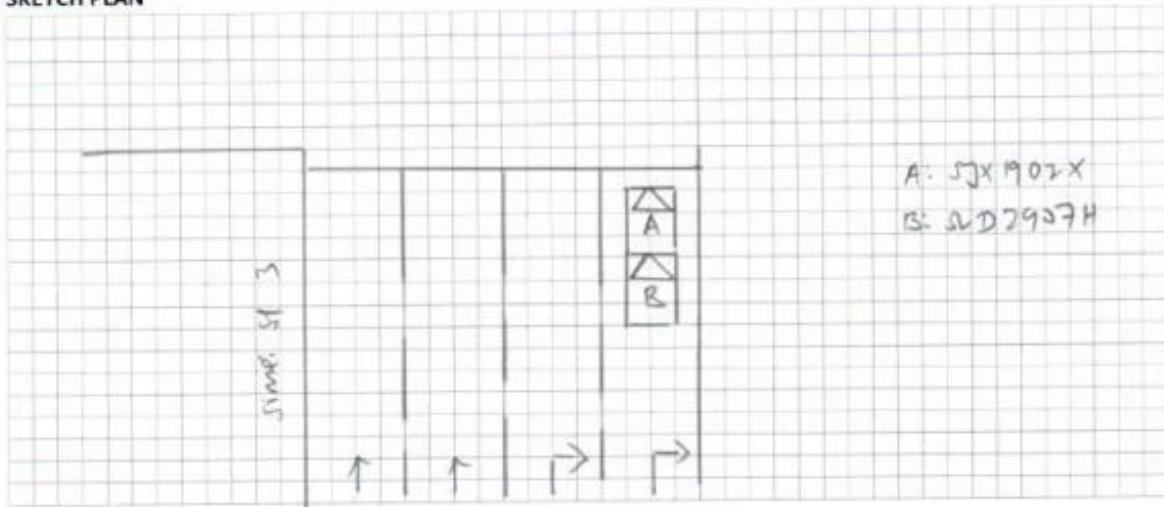
Policyholder's Signature
Date & Time:

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

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

Accident Sketch Plan

SKETCH PLAN



DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to police report - 7/202038/2024.

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:
NRIC/FIN No.:

Police Report



**SINGAPORE
POLICE FORCE**



T/20200318/2074

1 of 3

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

Report No. T/20200318/2074

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 18/03/2020 15:07	Vide Report No.:	Station Diary No.: 77
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Informant's Particulars

Name of Informant: TAN KIM CHYE			Address: APT BLK 897A TAMPINES STREET 81 #10-706 SINGAPORE 521897	
ID Type / ID No.: NRIC NO / S0055424C			Contact No.: Home/Office:	Mobile: 96775731
Nationality: SINGAPORE CITIZEN			Email:	
Sex: Male	Age: 68	Date of Birth: 21/11/1951	Type of Informant: Driver	
Race: Chinese			Language:	Institution / School Name:
Occupation: CAR DEALER			Driving Licence Information: Class: 3 Date of Expiry:	

General Information of the Accident

General Information of the Accident				
Type of Accident:	Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 18/03/2020 09:25	Type of Location: T-Junction
Location: Along Road 1 SIMEI STREET 3				
Along SIMEI STREET 3 turning right to Tampines Direction				
Weather: Clear		Road Surface: Dry		Road Speed Limit:
Traffic Flow: Two Way		Traffic Control: Traffic Light - Working		Traffic Volume: No Traffic
Type of Collision: Between Moving Vehicles - Head To Rear				Anyone conveyed by ambulance: Yes

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SJX1902X	Car				Seriously Damaged	0
SLD2907H	Car				Slightly Damaged	0

Details of Person Involved

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

Police Report

19 Mar 2020 11:39AM Lei Fu Trading Co 67478977

page 1



**SINGAPORE
POLICE FORCE**



T/20200318/2074

2 of 3

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

Report No. T/20200318/2074

CONTINUATION OF REPORT

Driver			
Name	TAN KIM CHYE	ID No.	S0055424C
Related Vehicle	SJX1902X (Car)	Contact No.	96775731
Hospital/Clinic	CHANGI GENERAL HOSPITAL	Class of Driving Licence & Expiry Date	Class: 3 Date of Expiry: NIL
Date Treatment	18/03/2020	Date Discharge	18/03/2020
No. of Days granted Medical Leave	03	Degree of Injury	Slight
Driver			
Name	LIM YONG SHIN SAM	ID No.	S7730077E
Related Vehicle	SLD2907H (Car)	Contact No.	93791983
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 the above mentioned date,time and said location, I was driving my DAIHATSU car, SJX1902X, silver in colour along Simei St 3(T-Junction) turning right to Tampines direction with no passenger on board. Initially I was stationary at the right lane waiting for the traffic light to turn green. While waiting for about 5 seconds, suddenly I felt an impact from my rear and due to the impact I swerve forward. I then proceed out and saw this vehicle car SLD2907H silver in colour front portion collided onto my rear portion. I then exchange particular with opposite party and agree to conduct respective reporting. I had also inform my wife about the accident and she rush to scene to find me. When she reach at about 10 min, I then inform her that I felt a pain on my back and also back neck area. My wife then call for ambulance and also traffic police. Shortly after about 15 min later, ambulance came and I was conveyed to Changi General Hospital. I was discharge on the same day and was given 3 days MC. My wife stay back and handle with traffic police and was inform by traffic police to lodge a police report vide G/20200318/0103. Due to the accident my car damages is the whole rear portion and require to be tow away. I have in car camera at the front however I am not sure whether is it functioning or not. The traffic police had took the SD card.

Police Report



**SINGAPORE
POLICE FORCE**



T/20200318/2074

3 of 3

Police Station Of Origin:
Tampines N.P.C
6 Tampines Avenue 4 SINGAPORE 529682
Tel No: 1800-5871999

Report No. T/20200318/2074

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:

G /

Staff Sgt TAN YI KUN

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Sgt 3 INTAN WULANDARI BUDDY SANTOSO

Contact No.: 65476256

Authentication Stamp

NP168

Signature Of Informant

Date/Time:

18/03/2020 15:07

Classification Of Case:

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

