

MSME20034865 / SME Motor Pte Ltd - Kaki Bukit  
 ENTRY DATE & TIME: 20/03/2020 15:14  
 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	20/03/2020 15:14
Date Of Accident	19/03/2020 18:30
Exact Location Of Accident	ALONG CLEMENCEAU AVE TWDS NEWTON RD
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SLT8311C
<b>Insured/Policyholder</b>	
Name Of Registered Owner	THAM WING HONG
NRIC No	SXXXX676G
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-98550355
Alternative Phone No	OFFICE-98550355

### Vehicle Particulars

Manufacturer	NISSAN
Model	QASHQAI
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	INDIA INTERNATIONAL INSURANCE PTE LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	D19MPC0005037
Cover Note Number	

### Driver

Name of Driver	THAM WING HONG
NRIC No	SXXXX676G
Date Of Birth	24/09/1979
Occupation	INDOOR
Date Of Driving Pass	10/08/2004
Driving Experience	15 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-98550355
Fax Number	
Contact Number	OFFICE-98550355
E-Mail Address	NOEMAIL

Address 23 BRISTOL ROAD  
 Postcode 219848  
 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 - CHANGE/CROSS LANE  
 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? NO  
 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) 4  
 Passenger 1 NAME: : YAP CHIANG LING  
 GENDER: : FEMALE  
 Passenger 2 NAME: : DEVON THAM  
 GENDER: : FEMALE  
 Passenger 3 NAME: : BRYAN THAM  
 GENDER: : MALE

#### Details of Police Action

Was the accident reported to the police? NO  
 If Yes, Please state which Police Station  
 Was notice of intended Prosecution given? NO  
 If Yes, against whom?

#### Circumstances of Accident

ON 19/03/2020 AT ABOUT 1830HRS, I WAS DRIVING ALONG NEWTON CIRCUS FROM CLEMENCEAU AVE AND IN SECOND LANE FROM THE LEFT. SUDDENLY, A RED COLOUR VOLVO FILTER INTO MY LANE FROM THE LEFT SIDE (THE LANE ONLY ALLOW LEFT TURN INTO SCOTT ROAD) WITHOUT CHECKING AND GIVE WAY TO ONCOMING TRAFFIC FROM RIGHT HAND SIDE THEN GRAZED ONTO THE FRONT LEFT PORTION OF MY CAR. AFTER THE COLLISION, BOTH VEHICLES MOVED AND STOPPED AT ROAD SIDE TO INSPECT VEHICLE DAMAGES AND DECIDED TO GO THROUGH BY INSURANCE CLAIM. HENCE, I HERE TO LODGE THIS REPORT TO CLAIM AGAINST VEHICLE B'S INSURANCE FOR MY ACCIDENT DAMAGES. MY CAR DID INSTALLED CAR CAMERA RECORDER AND I WILLING TO PROVIDE THE ACCIDENT VIDEO FOOTAGE FOR MY INSURANCE CLAIM. PS: TP DRIVER DID MENTIONED TO ME THAT SHE WANT TO GO BUKIT TIMAH ROAD. THEREFORE, HE INTEND TO CHANGE LANE.

#### Attachment(s)

Are accident photos available for attachment? YES  
 Was there any video captured by Car Camera? YES  
 Was there any audio recorded? NO

#### DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number SLZ3705B

Vehicle Make/Model/Colour	
Details Of Properties	VEHICLE B
Vehicle Category	PRIVATE CAR
Name of Driver	MABEL GOH BEE LIM
NRIC/Passport Number	
Contact Number	81280406
Address	
Postcode	
Insurance Company Name	
Nature Of Damage	
No. Of Passenger (Including Driver)	

## Sketch Plan Pg. 1

SKETCH PLANIMPORTANT NOTICE

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5. Any false reporting may be referred to the Police for investigation.
6. 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.
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.

  
20.03.20  
@ 1441 hrs.

Policyholder's Signature  
Date & Time:

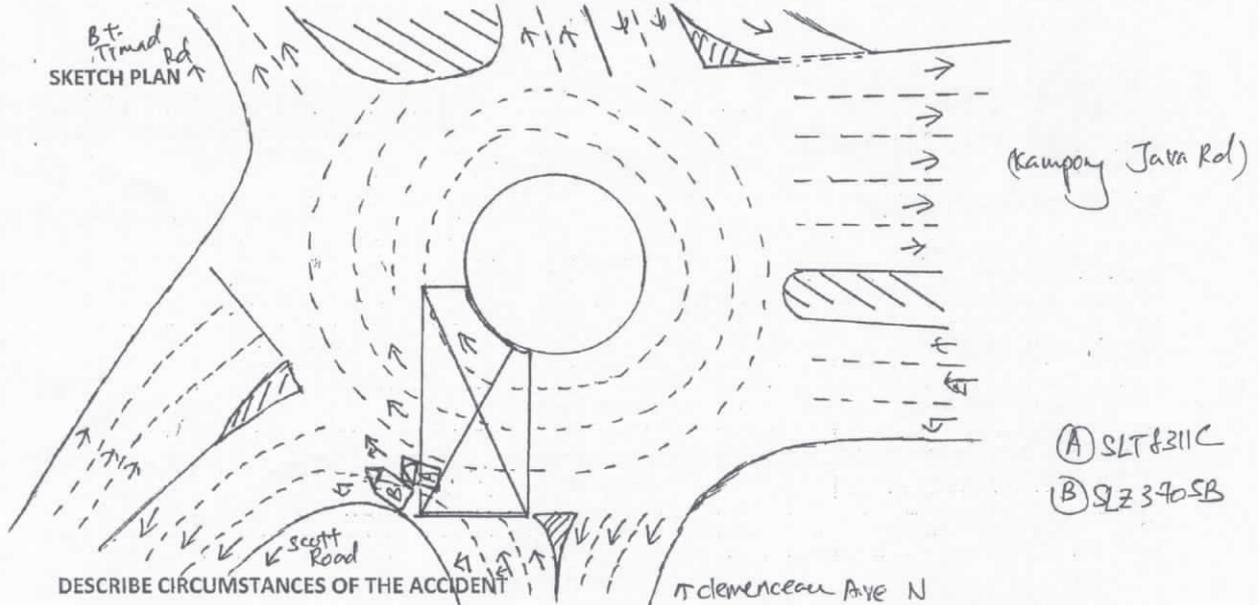
  
20.03.20  
@ 1441 hrs.

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

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

FREUSE

Sketch Plan #2 Pg. 1



- (A) SLT8211C
- (B) SZ390SB

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 19-03-2020 @ about 1830hrs, I was driving along Newton Circus from Clemenceau Avenue N in 2nd lane from the left. Suddenly a red color Volvo filter into my lane from the left side (the lane only allow left turn into Scott Road). without check & giveaway her oncoming traffic from right hand side and then grazed onto front left portion of my car. After the collision, both vehicles move & stopped at road side to inspect vehicle damages and decide go through by insurance claim. Hence I have to lodge this report to claim against Vehicle B's Insurance for my accident damages. My car did installed car camera recorder & I willing to provide the accident video footage for my insurance claim.

PS: TIP driver did mentioned to me that her want to go Bt. Timud Road, therefore. he intend to change lane.

DECLARATION

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

*[Signature]*  
 20.03.20  
 @ 14 41 hrs.

Policyholder's Signature  
Date & Time:

*[Signature]*  
 20.03.20  
 @ 14 41 hrs.

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

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



Sketch Plan #4 Pg. 1



**SINGAPORE  
POLICE FORCE**



G/20200320/2052

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POLICE REPORT (NP322)

CONTINUATION OF REPORT

Report No. G/20200320/2052

S/N	Item	Type	Brand/ Account/ Property/ Security/ Type	Make/ Model/ Bank/ Address/ Counter	Serial No. MEI/ Acc No	Quantity	Value	Description
1	Licence	Lost	Qualified Driving Licence			1		01 QDL bearing name Tham Wing Hong of NRIC number S7929676G

Signature Of Officer Recording The Report:  
 G / Sr Staff Sgt MOHAMMED FADELI BIN MOHAMED SYUIB  
 Signature Of Interpreter:  
 Not applicable  
 Officer In-Charge Of Case:  
 G / Bedok South N.P.C /  
 Sgt 3 SOON CHEE HAW JEREMY  
 Contact No.: 62448999

Signature Of Informant:  
 Date/Time:  
 20/03/2020 14:16  
 Classification Of Case:

Authentication Stamp

SINGAPORE POLICE FORCE  
SIGNATURE

FUPO hotline number: 68429645