

## 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	29/07/2020 13:52
Date Of Accident	27/07/2020 19:30
Exact Location Of Accident	PIE TOWARDS CHANGI NEAR CLEMENTI AVE EXIT 6
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMS1059X
<b>Insured/Policyholder</b>	
Name Of Registered Owner	HO JU HUI JONATHAN
NRIC No	SXXXX394I
Email Address	ITSJONHO@GMAIL.COM
Mobile Phone No	(LOCAL) +65-88262372
Alternative Phone No	OTHERS-88262372

### Vehicle Particulars

Manufacturer	LOTUS
Model	ELISE SC 1.8 MT

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 REPORTING ONLY

Vehicle Category PRIVATE CAR

### Insurance Company

Name of Insurance Company	EQ INSURANCE COMPANY LTD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	DMPPHQ20-000972
Cover Note Number	

### Driver

Name of Driver	HO JU HUI JONATHAN
NRIC No	SXXXX394I
Date Of Birth	13/07/1993
Occupation	OUTDOOR
Date Of Driving Pass	26/12/2019
Driving Experience	0 YEAR AND 7 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-88262372
Fax Number	
Contact Number	OTHERS-88262372
EMail Address	ITSJONHO@GMAIL.COM

Address	BLK 6 PARI DEDAP WALK #14-03
Postcode	486060
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	COLLIDED INTO PROPERTY
Weather Conditions	CLOUDY
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	1
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)	1

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BEDOK NORTH NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 30 BEDOK NORTH ROAD , <b>POSTCODE:</b> 469676 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-2449999 - <b>FAX NO:</b> 62447258
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

UNABLE TAKE PICTURE OF CAR MILEAGE DUE TO ENGINE CAN'T START. REFER TO THE ATTACH STATEMENT RECORDED BY KAREN - PROGRESSIVE CAR CARE PTE LTD TEL 6741 5336

#### 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	
Vehicle Make/Model/Colour	
Details Of Properties	RAILING
Vehicle Category	NA/UNKNOWN
Name of Driver	
NRIC/Passport Number	
Contact Number	
Address	
Postcode	

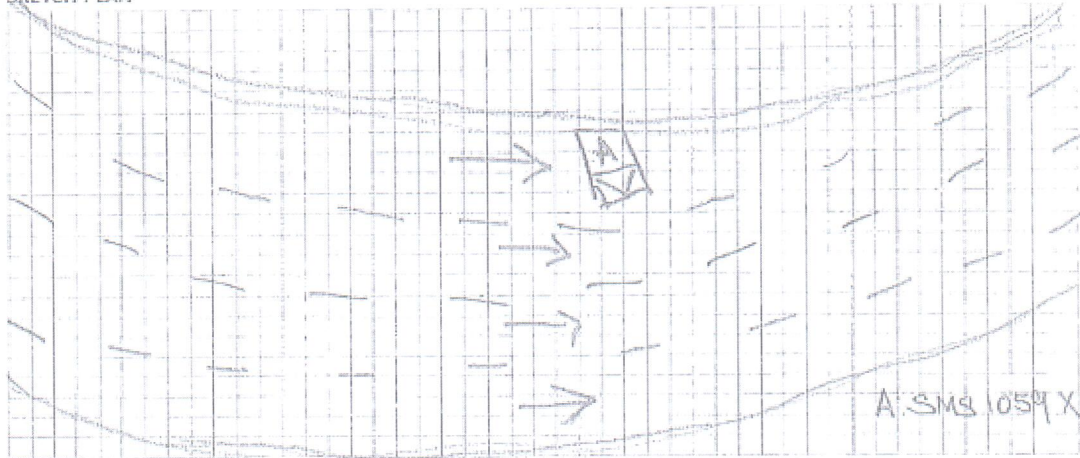
Insurance Company Name

Nature Of Damage

No. Of Passenger (Including Driver)

## Sketch Plan

### SKETCH PLAN



### DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

On 27/7/2020 at about 7.30pm, i was travelling along PIE towards Changi Airport near to Clementi Avenue Exit 6 on my vehicle bearing the vehicle registration number SMS1059X. i was travelling on lane 1 the road was wet and slippery. I came across a slight bend on the road and as i changed gear, my rear tire lost traction and the car continue to turn light. i counter steered my vehicle and the rear of the vehicle turn the other side and the car started to skid. I lost control of my car and the front right of the vehicle contacted the railing first and subsequently the vehicle rear hit on the railing and stopped. My vehicle was damaged and could not be moved after i had hit the railing. Traffic police came down to the scene and issued me with case card.

### 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/PIH No.:

GLA/SPDK (Rev 12/2019) and form\_024

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## Sketch Plan #2

100 p-h-20

### SKETCH PLAN

#### IMPORTANT NOTICE

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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 lodging 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:

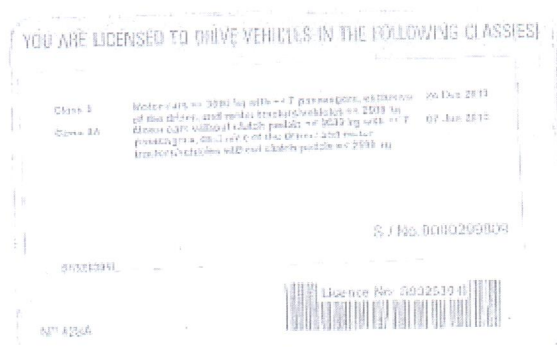
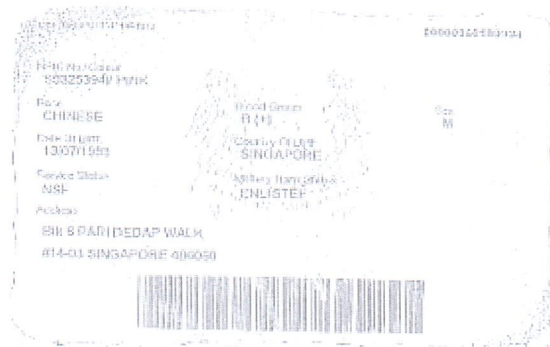
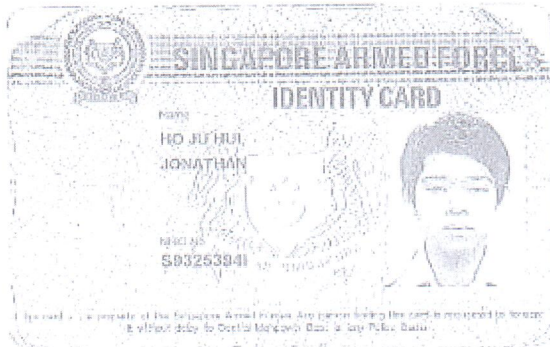
- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "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.:

## Driving License & NRIC



# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20200728/2058

Police Station Of Origin:  
Bedok North N.P.C  
30 Bedok North Road SINGAPORE 469676  
Tel No: 1800-2449999

1 of 3  
Report No. T/20200728/2058

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/07/2020 13:28		Vide Report No.: D/20200727/0113		Station Diary No.: 30	
<b>Informant's Particulars</b>					
Name of Informant: HO JU HUI, JONATHAN			Address: 6 PARI DEDAP WALK #14-03 SINGAPORE 486060		
ID Type / ID No.: NRIC NO / S9325394I			Contact No.: Home/Office: Mobile: 88262372		
Nationality: SINGAPORE CITIZEN			Email: ITSJONHO@GMAIL.COM		
Sex: Male	Age: 27	Date of Birth: 13/07/1993	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: SINGAPORE AIRFORCE REGULAR OFFICER			Driving Licence Information: Class: 3,3A Date of Expiry:		

<b>General Information of the Accident</b>				
Type of Accident:	Non-Injury Attended by Police	Drink Drive: No	Date/Time of Accident: 27/07/2020 19:30	Type of Location: Straight Road
Location: Along Road 1 PAN ISLAND EXPRESSWAY				
Travelling towards Changi Airport near Clementi Avenue Exit 6				
Weather: Cloudy		Road Surface: Wet		Road Speed Limit: 70 Km/h
Traffic Flow: One Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate
Type of Collision: Moving Vehicle Against - Road Divider/Kerb/Railings				Anyone conveyed by ambulance: No

<b>Details of Vehicle Involved</b>						
Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SMS1059X	Car	LOTUS	ELISE SC 1.8 MT	Yellow	Seriously Damaged	0

<b>Details of Vehicle Insurance</b>				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMS1059X	EQ INSURANCE COMPANY LTD.	DMPPHQ20-000972	11/02/2020	31/01/2021



# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20200728/2058

2 of 3

Police Station Of Origin:  
Bedok North N.P.C  
30 Bedok North Road SINGAPORE 469676  
Tel No: 1800-2449999

Report No. T/20200728/2058

## CONTINUATION OF REPORT

<b>Details of Person Involved</b>			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
<b>Driver</b>			
Name	HO JU HUI, JONATHAN	ID No.	S9325394I
Related Vehicle	NIL	Contact No.	88262372
Hospital/Clinic	NIL	Class of Driving Licence & Expiry Date	Class: 3,3A Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

### Brief Details.

On 27/07/2020 at about 7.30pm, I was travelling along PIE towards Changi Airport near to Clementi Avenue Exit 6 on my vehicle bearing the vehicle registration number SMS1059X. I was travelling on lane 1 the road was wet and slippery. I came across a slight bend on the road and as I changed gear, my rear tire lost traction and the car continue to turn right. I counter steered my vehicle and the rear of the vehicle turn the other side and the car started to skid. I lost control of my car and the front right of the vehicle contacted the railing first and subsequently the vehicle rear hit on the railing and stopped. My vehicle was damaged and could not be moved after I had hit the railing. Traffic police came down to the scene and issued me with a case card.



POLICE REPORT



SINGAPORE  
POLICE FORCE



T/20200728/2058

Police Station Of Origin:  
Bedok North N.P.C  
30 Bedok North Road SINGAPORE 469676  
Tel No: 1800-2449999

3 of 3

Report No. T/20200728/2058

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 /  
Sgt 3 AW JING YING CHLOE *aw*

Signature Of Informant:

Signature Of Interpreter:  
Not applicable

Date/Time:  
28/07/2020 13:28

Officer In Charge Of Case:  
TP / GIT /  
Sr Staff Sgt MOHAMED HUSNUL TAUFIQ BIN  
MD YUSOF  
Contact No.: 65476358

Classification Of Case:

Authentication Stamp  
NP168 *aw*

Accident Photo





Accident Photo





Accident Photo





Accident Photo





Accident Photo

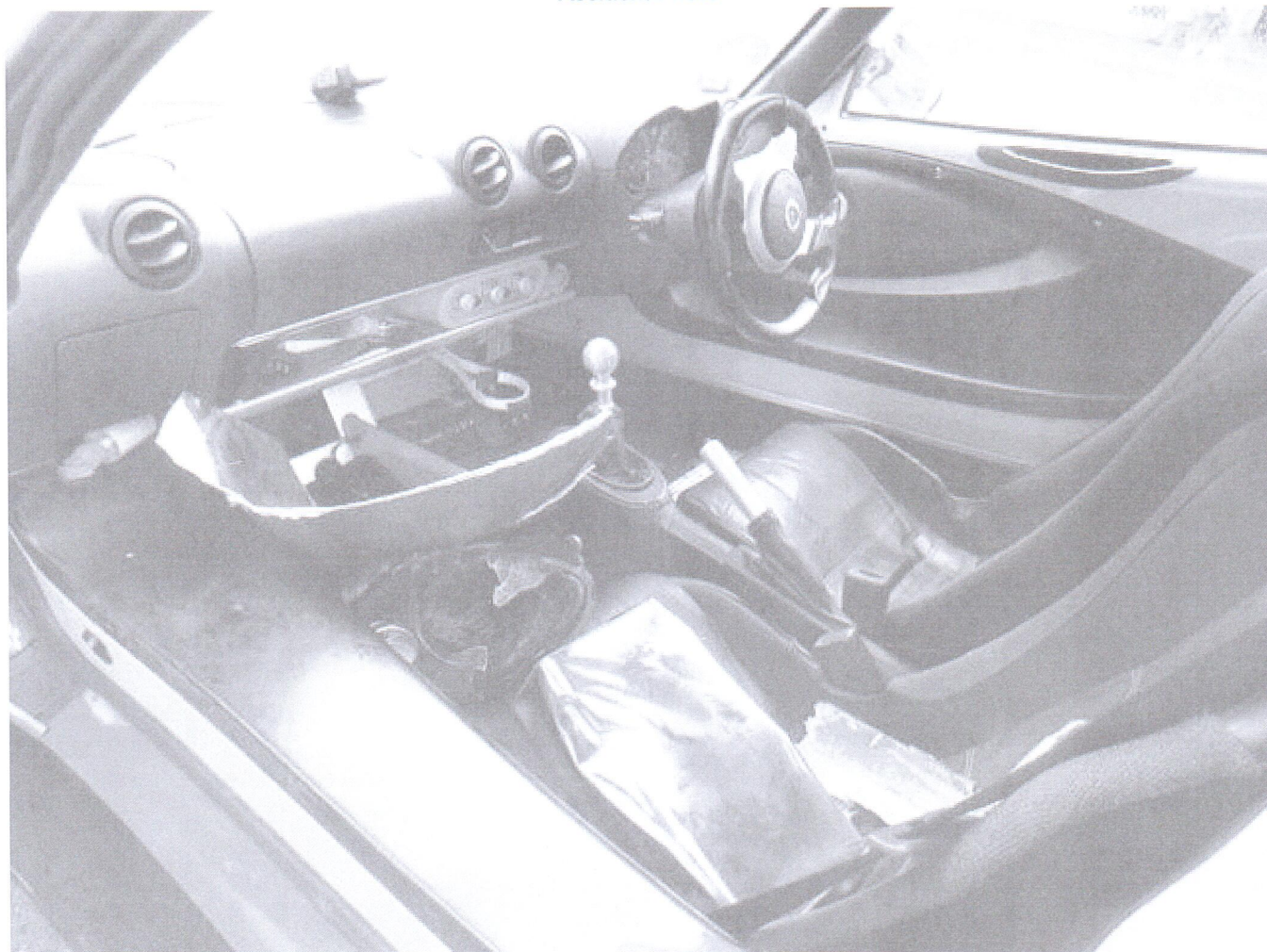


Accident Photo





Accident Photo

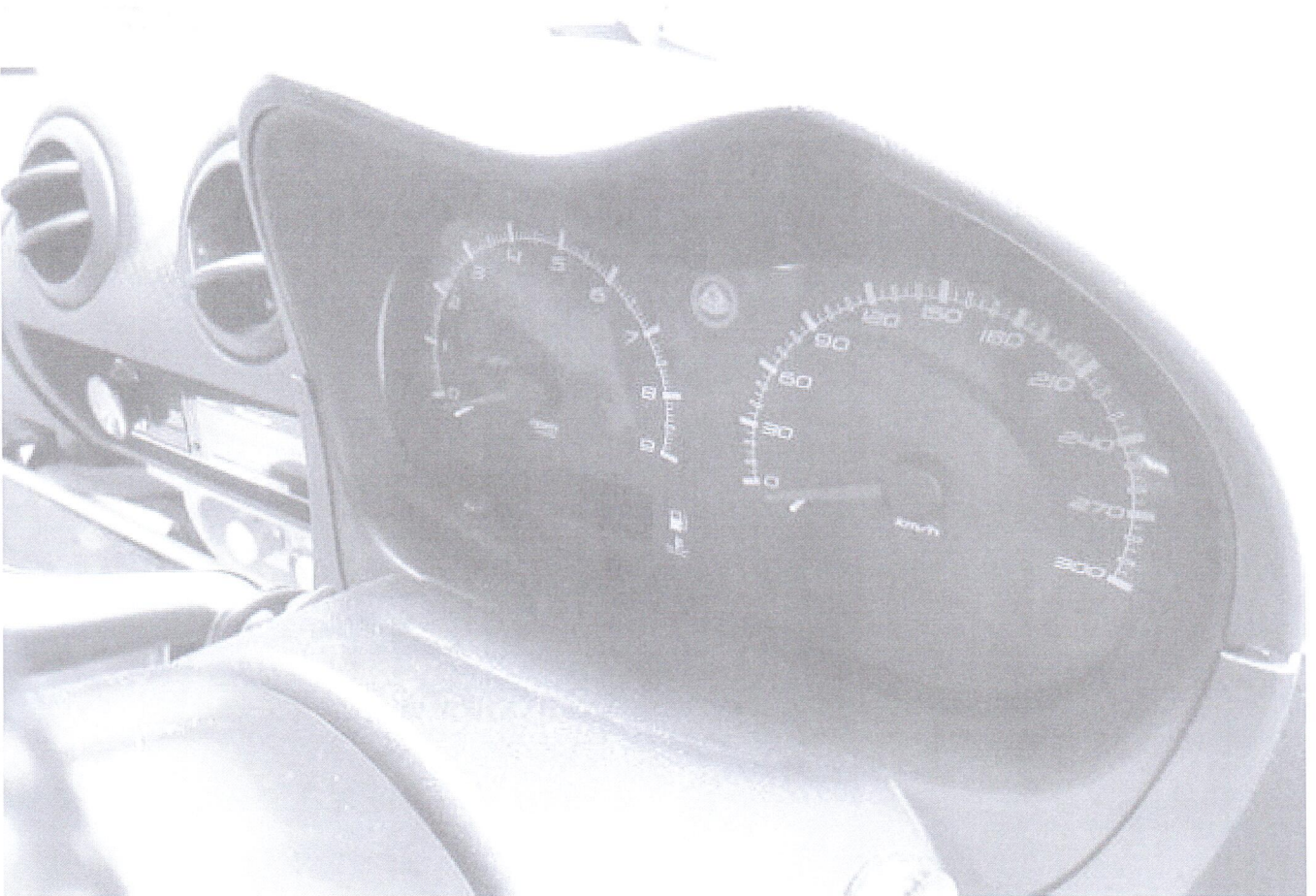




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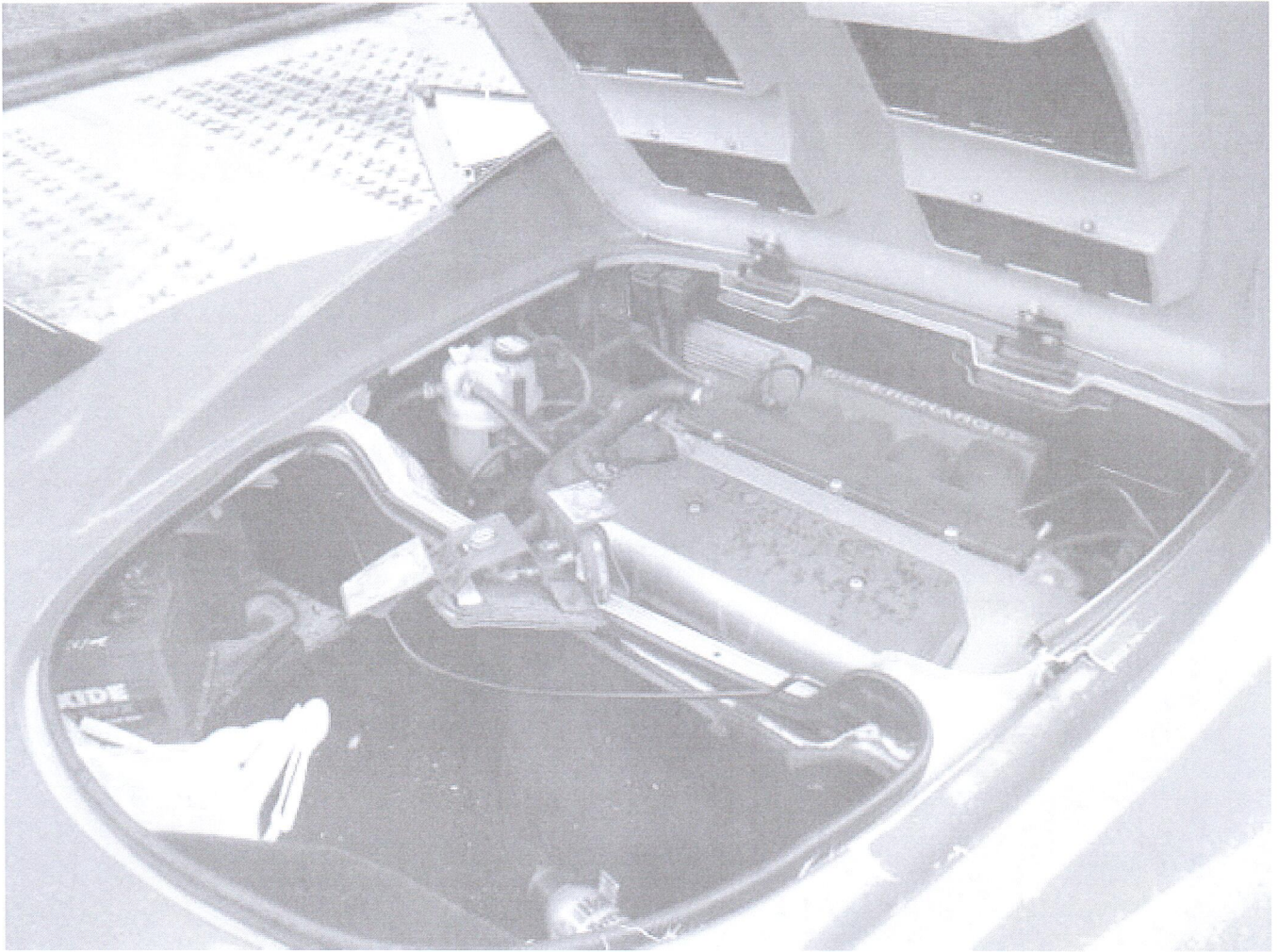


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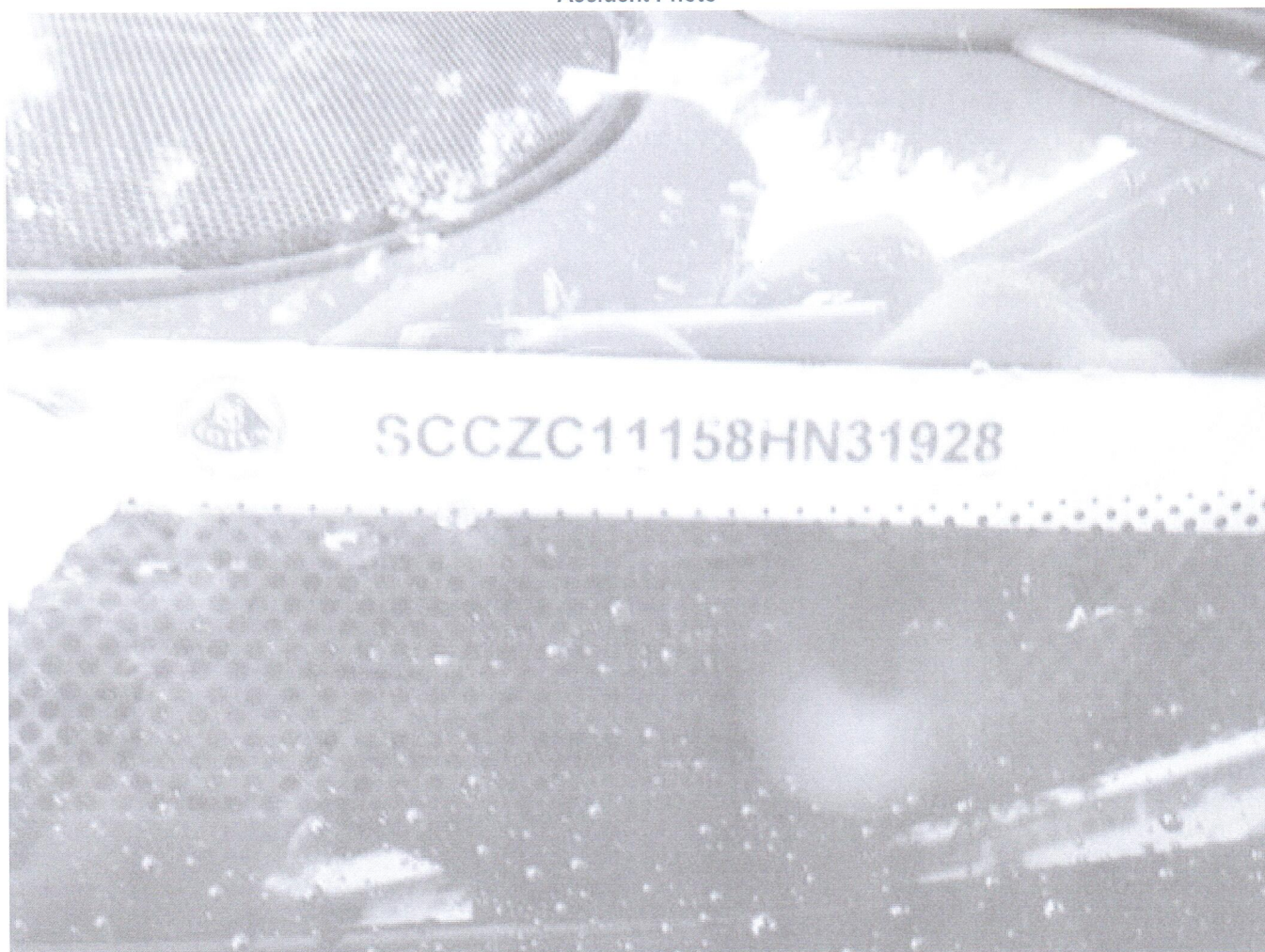




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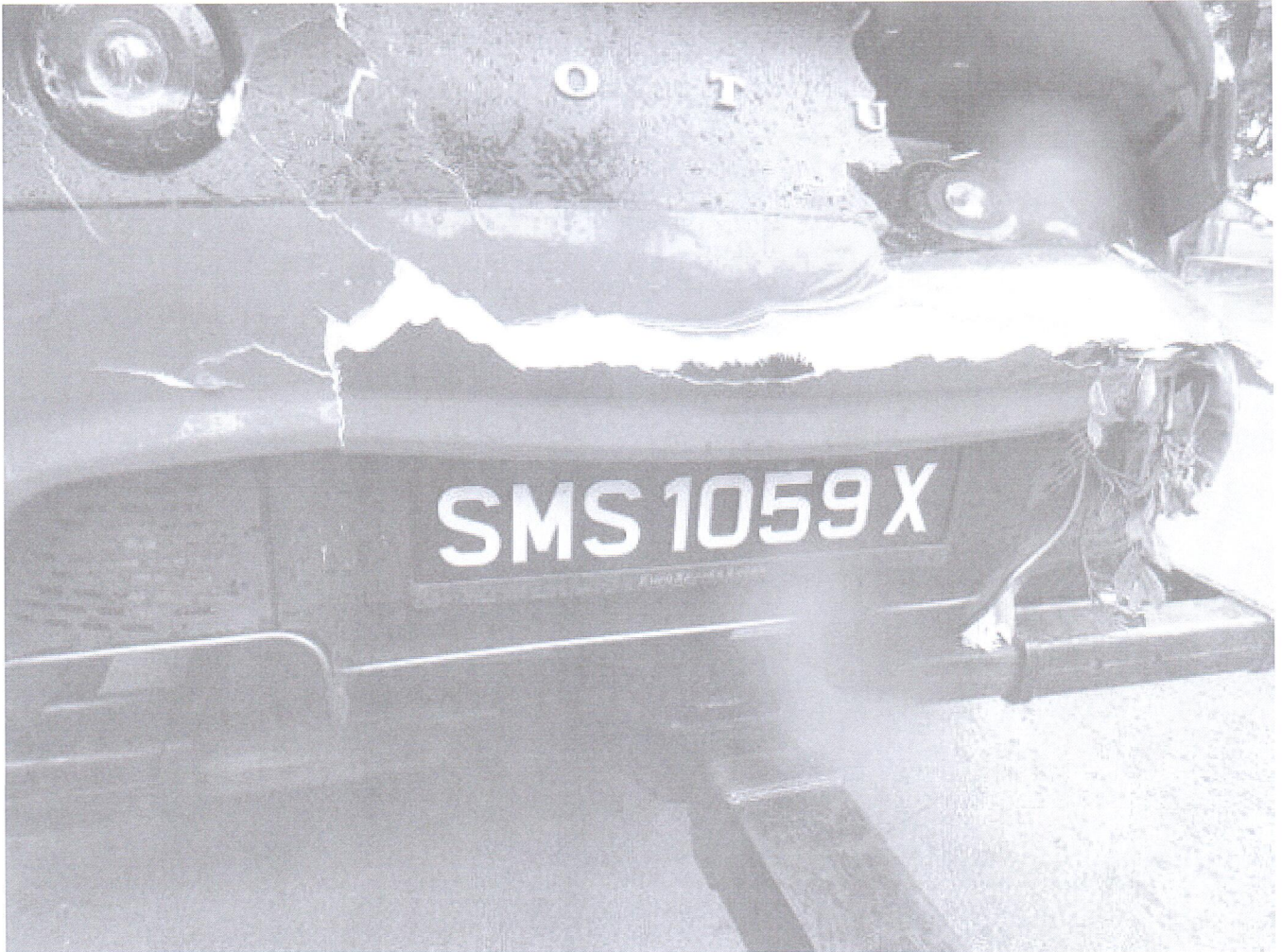


Accident Photo





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