

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	29/08/2020 15:54
Date Of Accident	24/08/2020 16:00
Exact Location Of Accident	MACPHERSON RD
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	SMR3605L
Insured/Policyholder	
Name Of Registered Owner	TEO SIU KUI
NRIC No	SXXXX003I
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-93877603
Alternative Phone No	OFFICE-93877603

Vehicle Particulars

Manufacturer	TOYOTA
Model	LEXUS ES250 4DR SEDAN (AUTO) LUXURY
Exact Purpose for which vehicle was being used at time of accident	PRIVATE 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	MSIG INSURANCE (SINGAPORE) PTE. LTD.
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	A29140509AL2
Cover Note Number	

Driver

Name of Driver	TEO SIU KUI
NRIC No	SXXXX003I
Date Of Birth	31/08/1953
Occupation	OUTDOOR
Date Of Driving Pass	27/06/1972
Driving Experience	48 YEARS AND 1 MONTH
Gender	MALE
Mobile Number	(LOCAL) +65-93877603
Fax Number	
Contact Number	OFFICE-93877603
Email Address	NOEMAIL

Address	BLK 94 GEYLANG BAHRU #12-3098
Postcode	330094
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	HIT BY FALLEN TREE / OTHER OBJECTS
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?	
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)	2
Passenger 1	NAME: : - GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	KOLAM AYER NEIGHBOURHOOD POLICE POST
Police Station Address	ROAD: BLK 72 GEYLANG BAHRU #01-3038 , POSTCODE: 330072 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: 1800-2969999 - FAX NO: 62937659
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER TO POLICE REPORT - T/20200828/2096.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	XB8580U
Vehicle Make/Model/Colour	
Details Of Properties	
Vehicle Category	COMMERCIAL VEHICLE
Name of Driver	
NRIC/Passport Number	

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

Accident Sketch Plan


SKETCH PLAN


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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.

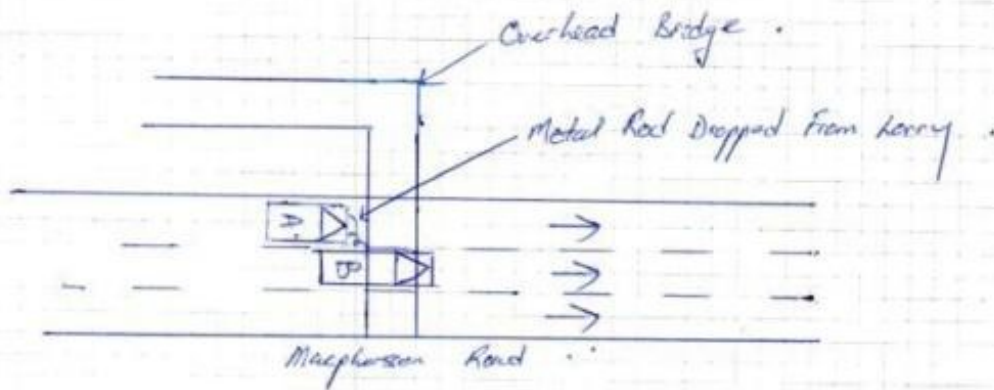

Policyholder's Signature
Date & Time:


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

Pls refer to Police Report
No: T/20200828/2096.

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/20200828/2096

Police Station Of Origin:
Kolam Ayer NPP
72 Geylang Bahru #01-3038 SINGAPORE
330072
Tel No: 1800-2969999

1 of 3

Report No: T/20200828/2096

REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 28/08/2020 18:40	Vide Report No.: A/20200827/2091	Station Diary No.: 30
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Informant's Particulars

Name of Informant: TEO SIU KUI			Address: APT BLK 94 GEYLANG BAHRU #12-3098 SINGAPORE 330094		
ID Type / ID No.: NRIC NO / S20710031			Contact No.: Home/Office: Mobile: 93877603		
Nationality: SINGAPORE CITIZEN			Email:		
Sex: Male	Age: 66	Date of Birth: 31/08/1953	Type of Informant: Driver		
Race: Chinese			Language: English		Institution / School Name:
Occupation: SELF-EMPLOYED			Driving Licence Information: Class: 2B,2A,2,3		
			Date of Expiry:		

General Information of the Accident

General Information of the Accident					
Type of Accident:	Non-Injury		Drink Drive: No	Date/Time of Accident: 24/08/2020 16:00	Type of Location: Straight Road
Location: MACPHERSON ROAD					
Weather: Clear		Road Surface: Dry		Road Speed Limit:	
Traffic Flow: Dual Carriage Way		Traffic Control: Traffic Light - Working		Traffic Volume: Moderate	
Type of Collision: ITEMS FROM THE OTHER VEHICLE FELL OFF				Anyone conveyed by ambulance: No	

Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
SMR3605L	Car	LEXUS	LEXUS ES250 4DR SEDAN (AUTO) LUXURY	Grey	Slightly Damaged	1
XB8580U	Lorry	MITSUBISHI	FV517P2RD EB		No Damage	0

Police Report



**SINGAPORE
POLICE FORCE**



T/20200828/2096

Police Station Of Origin;
Kolam Ayer NPP
72 Geylang Bahru #01-3038 SINGAPORE
330072
Tel No: 1800-2969999

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Report No. T/20200828/2096

CONTINUATION OF REPORT

Details of Vehicle Insurance				
Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
SMR3605L	MSIG INSURANCE (SINGAPORE) PTE. LTD.	A61740778	31/12/2019	30/12/2020

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Driver			
Name	TEO SIU KUI		ID No. S2071003I
Related Vehicle	SMR3605L (Car)		Contact No. 93877603
Hospital/Clinic	NIL		Class of Driving Licence & Expiry Date Class: 2B,2A,2,3 Date of Expiry: NIL
Date Treatment	NIL	Date Discharge	NIL
No. of Days granted Medical Leave	NIL	Degree of Injury	NIL

Brief Details.

On 24/08/2020 at 1600hrs, I was driving my vehicle (SMA3605L) along Macpherson Road towards the direction of Geylang Bahru. I was travelling on the extreme left lane. After the post office of No. 70 Macpherson Road, a metal rod dropped from a lorry (XB 8580U) on my right with over loading. As a result my vehicle went over the metal rod. I then stopped at the road side and found that there were damages on my front bumper.

When I reached home, my son helped me to retrieve the SD Card and watched the video footage. We confirmed that the said lorry was overloaded with metal rods. While passing the overhead bridge, the metal rod dropped and landed in front of my vehicle. My son then made a check online to look for the detail of the lorry company, 'World Metal Industries Pte Ltd;.

I then contacted the said company and informed them about the issue. The staff told me that they will meet me at my working place on 25/08/2020 at 1200hrs.

On 25/08/2020 at 1200hrs, one male Indian subject came and told me that the company has asked him to meet me. He told me that he own a car workshop and asked me to send my car to him. However, we could not come to a neutral compromise and till date, the company did not contact me at all.

I am lodging this report for insurance claims purposes.

Police Report



**SINGAPORE
POLICE FORCE**



T/20200828/2096

Police Station Of Origin:
Kolam Ayer NPP
72 Geylang Bahru #01-3038 SINGAPORE
330072
Tel No: 1800-2969999

3 of 3

Report No. T/20200828/2096

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:

A /

Sgt 2 MOHAMAD SYAFIQ BIN SUKEMI

Signature Of Informant:

Signature Of Interpreter:

Not applicable

Date/Time:

28/08/2020 18:40

Officer In Charge Of Case:

TP / GIA /

Staff Sgt WONG SIEU LUI

Contact No.: 65476151

Classification Of Case:

Authentication Stamp

NP166



SIGNATURE

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo

