

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	05/10/2020 17:29
Date Of Accident	03/10/2020 00:25
Exact Location Of Accident	TOA PAYOH NORTH FLYOVER TOWARDS BRADDELL
Country/State of Loss	SINGAPORE

DETAILS OF OWN VEHICLE

Vehicle Registration Number	GBH6466J
Insured/Policyholder	
Name Of Registered Owner	LEE SING ENGINEERING PTE LTD
Co Reg No	197900254C
Email Address	FINANCE@METALEX.COM.SG
Mobile Phone No	
Alternative Phone No	OFFICE-64819180

Vehicle Particulars

Manufacturer	NISSAN
Model	NV200 DX-2 1.6 AUTO
Exact Purpose for which vehicle was being used at time of accident	COMMERCIAL USE
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	COMMERCIAL VEHICLE

Insurance Company

Name of Insurance Company	LONPAC INSURANCE BHD
Type Of Coverage	COMPREHENSIVE
Fleet Policy	NO
Policy Number	Z20VC05005829
Cover Note Number	16/08/20 - 15/08/21

Driver

Name of Driver	YEO PENG CHOON
NRIC No	S0656569G
Date Of Birth	04/04/1944
Occupation	OUTDOOR
Date Of Driving Pass	13/03/1976
Driving Experience	44 YEARS AND 6 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96813232
Fax Number	
Contact Number	
EEmail Address	NOEMAIL

Address	BLK 108 ANG MO KIO AVE 4 #12-82
Postcode	560108
Was driver an employee of the Insured's Company	YES
If No, Relationship of the Driver with the Insured	
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	RAINING
Road Surface	WET

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?	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)	3
Passenger 1	NAME: : WIFE GENDER: : FEMALE
Passenger 2	NAME: : FRIEND GENDER: : FEMALE

Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	KEBUN BARU NPP
Police Station Address	ROAD: 111 ANG MO KIO AVE 4 , POSTCODE: 560111 , COUNTRY: SINGAPORE
Police Station Contact	TEL NO: - FAX NO:
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

Circumstances of Accident

REFER POLICE REPORT.

Attachment(s)

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

DETAILS OF OTHER VEHICLE PROPERTY 1

Vehicle Registration Number	SMK2101S
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 INJURED PERSON 1	
Name	OWNER (TAN SHI NGUAN)
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SMK2101S
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

DETAILS OF INJURED PERSON 2	
Name	WIFE
Approximate Age	
Injuries Sustain	
Injured person in which vehicle?	SMK2101S
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

Sketch Plan

SKETCH PLAN

1. VEHICLE NO.: GBH 6466J
2. INSURER CO.: LOAPAC
3. ACCIDENT
DATE & TIME: 3/10/20 00:25


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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 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.:

SKETCH PLAN

A: GBH 6466J

B: SMK 2101S

Tan Puch North Flyover → Braddell

DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Ins: Lompac Veh No: DOA: 3/10/20 00:25

Refer 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: NRIC/FIN No.: () Claim Own Policy () Claim Third Party (/) Reporting Only () Claim OD/TP at other workshop ()



**SINGAPORE
POLICE FORCE**



F/20201004/2089

1 of 2

POLICE REPORT (NP299)

Report No. F/20201004/2089

Police Station Of Origin
Kebun Baru NPP
111 Ang Mo Kio Avenue 4 SINGAPORE
560111
Tel No: 1800-4589999

Date/Time Report Made 04/10/2020 19:47	Vide Report No.	Station Diary No. 25
Name Of Informant YEO PENG CHOON	Address APT BLK 108 ANG MO KIO AVENUE 4 #12-82 SINGAPORE 560108	
ID Type / ID No. NRIC NO / S0656569G	Contact No. Home/Office	Mobile 96813232
Nationality SINGAPORE CITIZEN	Email Address	
Occupation RETIRED	Sex Male	Age 76
Institution/School Name	Date of Birth 04/04/1944	Race Chinese
Date/Time Of Incident 03/10/2020 00:25 - 03/10/2020 00:30	Location Of Incident BRADDELL ROAD SINGAPORE	

Brief details.

On 03/10/2020 at about 0025hrs, I was driving my van bearing the number of GBH6466J along braddell road towards bartley road. When I am merging into the main road, the car bearing the number of SMK2101S in front of me move off and he brake again and my van collide with the car. My car front hit the back of the car back bumper. There is no damage to my van and there is some slight damage to the car. We both alight and I gave my particulars to the car and we both agreed to settle privately. There is no injuries with both parties and there was no Traffic Police at Scene.

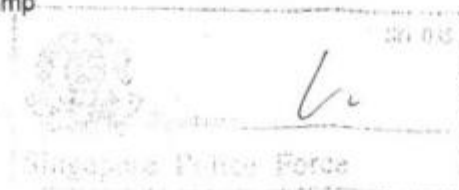
Signature Of Officer Recording The Report:

F / Sgt 2 NG YEE SONG

Signature Of Interpreter:
Not applicable

Officer In-Charge Of Case:
F / Ang Mo Kio Police Divisional Investigation Branch /
Insp TAN YI HUI, XAVIER
Contact No.: 64849999

Authentication Stamp



Signature Of Informant:

Date/Time:
04/10/2020 19:47

Classification Of Case:



**SINGAPORE
POLICE FORCE**



F/20201004/2089

2 of 2


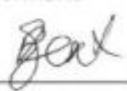
POLICE REPORT (NP299)

CONTINUATION OF REPORT

Report No. F/20201004/2089

On 03/10/2020 at about 2115hrs, I received a text message from the car owner (Tan Shi Nguan, S8334099A, HP: 90305145) and I called back. The car owner said that they have made a police report regarding about the accident and they went for medical checkup.

I am lodging this report for insurance claim purpose.

Signature Of Officer Recording The Report: F / Sgt 2 NG YEE SONG 	Signature Of Informant: 
Signature Of Interpreter: Not applicable	Date/Time: 04/10/2020 19:47
Officer In-Charge Of Case: F / Ang Mo Kio Police Divisional Investigation Branch / Insp TAN YI HUI, XAVIER Contact No.: 64849999	Classification Of Case:

Authentication Stamp



Driving License

REPUBLIC OF SINGAPORE
IDENTITY CARD NO. S0656569G



YEO PENG CHOON

楊 炳 春

Race

CHINESE

Date of Birth

04-04-1944

Sex

M

Country of Birth

SINGAPORE

S0656569G

REPUBLIC OF SINGAPORE DRIVING LICENCE



Licence Number: S0656569G

Name

YEO PENG CHOON

Birth Date: 04 Apr 1944

Issue Date: 27 Jan 2004



001057721H

3186578



NRIC No. S0656569G

Blood Group: Date of issue

O+ 25-08-2000

Address:

APT BLK 108 ANG MO KIO AVENUE 4
#12-82
SINGAPORE 560108

YOU ARE LICENSED TO DRIVE VEHICLES IN THE FOLLOWING CLASS:

PASS DATE

Class 1B Motorcycles <= 200 CC
Class 1A Motorcycles between 201 CC and 400 CC
Class 2 Motorcycles > 400 CC
Class 3 Motor vehicles <= 3000 kg with <= 7 passengers, exclusive of the driver, and motor tractors/vehicles <= 2500 kg

02 Oct 1976
02 Oct 1976
02 Oct 1976
12 Mar 1976

SINGAPORE

S / No. 9000064080

NP 426A



Licence No. S0656569G

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Scene Photo

