

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 | 20/10/2020 18:40 |
| Date Of Accident | 19/10/2020 20:40 |
| Exact Location Of Accident | BISHAN RD |
| Country/State of Loss | SINGAPORE |

DETAILS OF OWN VEHICLE

| | |
|-----------------------------|----------------------|
| Vehicle Registration Number | SMR5801Z |
| Insured/Policyholder | |
| Name Of Registered Owner | AN LE |
| NRIC No | SXXXX302G |
| Email Address | NOEMAIL |
| Mobile Phone No | (LOCAL) +65-98982102 |
| Alternative Phone No | OFFICE-98982102 |

Vehicle Particulars

| | |
|--|--|
| Manufacturer | BMW |
| Model | X3 XDRIVE35I A/T 4WD S/R DSC NAV LED HUD |
| 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 | NTUC INCOME INSURANCE CO-OPERATIVE LTD |
| Type Of Coverage | COMPREHENSIVE |
| Fleet Policy | NO |
| Policy Number | 5119350485 |
| Cover Note Number | |

Driver

| | |
|----------------------|----------------------|
| Name of Driver | DUAN NI JUN |
| NRIC No | SXXXX031F |
| Date Of Birth | 15/11/1979 |
| Occupation | INDOOR |
| Date Of Driving Pass | 09/11/2019 |
| Driving Experience | 0 YEAR AND 11 MONTH |
| Gender | FEMALE |
| Mobile Number | (LOCAL) +65-98369578 |
| Fax Number | |
| Contact Number | OFFICE-98369578 |
| Email Address | NOEMAIL |

| | |
|---|-------------------------------|
| Address | 33 BISHAN STREET 11 #32-11 |
| Postcode | 579820 |
| Was driver an employee of the Insured's Company | NO |
| If No, Relationship of the Driver with the Insured | SPOUSE |
| Vehicle Registration Number of Driver's Own Vehicle | - - - |
| Insurance Company of Driver's Own Vehicle | - - - |

General Information of the Accident

| | |
|--------------------|----------------------------|
| Type Of Accident | COLLISION - CROSS JUNCTION |
| 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 | BISHAN NEIGHBOURHOOD POLICE CENTRE |
| Police Station Address | ROAD: 20 BISHAN STREET 23 , POSTCODE: 579757 , COUNTRY: SINGAPORE |
| Police Station Contact | TEL NO: 1800-5529999 - FAX NO: 65561905 |
| Was notice of intended Prosecution given? | NO |
| If Yes, against whom? | |

Circumstances of Accident

REFER TO POLICE REPORT - T/20201020/2035.

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 | SLF3915S |
| Vehicle Make/Model/Colour | VOLSWAGEN GOLF |
| 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 | DUAN NI JUN |
| Approximate Age | |
| Injuries Sustain | HEADACHE |
| Injured person in which vehicle? | SMR5801Z |
| Were seat belts worn? | YES |
| Was this injured conveyed to hospital by ambulance? | YES |
| Address | |
| Postcode | |

Accident Sketch Plan

SKETCH PLAN

IMPORTANT NOTICE

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- 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) 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 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.
- 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 the [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 firm, the Monetary Authority of Singapore and any relevant government agency/authority (such as 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) Investigations 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, statement, 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' lawyer/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 insurer and/or GIA to their third party service providers or agents (including their lawyer/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, investigation, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposed stated, or
 - (II) For complying with requirements under my regulations, laws or court orders.



Policy holder's signature
Date / time:



Driver's signature
(if driver is not policy holder)
Date / time:



reporting centre personnel's Signature
Date / time:

Accident Sketch Plan

SKETCH PLAN

A: SMRS8012
B: SLF39155


DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

Refer to Police Report
T/20201020/2035

DECLARATION

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

LSA
Policy holder's signature
Date & time:


Driver's signature
(if driver is not policy holder)
Date & time:

reporting centre personnel's Signature
NRIC/FIN No.:

Police Report



**SINGAPORE
POLICE FORCE**



T/20201020/2035

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

1 of 3

Report No. T/20201020/2035

REPORT OF A TRAFFIC ACCIDENT

| | | |
|--|-------------------------------------|--------------------------|
| Date/Time Report Made: 20/10/2020 11:42 | Vide Report No.: E/20201019/0142 | Station Diary No.: 38 |
|--|-------------------------------------|--------------------------|

Informant's Particulars

| | | | | |
|--|------------|------------------------------|---|----------------------------|
| Name of Informant: DUAN NI JUN | | | Address: 33 BISHAN STREET 11 #32-11 SINGAPORE 579820 | |
| ID Type / ID No.: NRIC NO / S7956031F | | | Contact No.: Home/Office: Mobile: 98369578 | |
| Nationality: CANADIAN | | | Email: | |
| Sex: Female | Age: 40 | Date of Birth: 15/11/1979 | Type of Informant: Driver | |
| Race: Chinese | | | Language: English | Institution / School Name: |
| Occupation: FINANCIAL ADVISOR | | | Driving Licence Information: Class: 3 Date of Expiry: | |

General Information of the Accident

| | | | | |
|--|------------------|---|--|---------------------------------|
| Type of Accident: | Injury Others | Drink Drive: No | Date/Time of Accident: 19/10/2020 20:40 | Type of Location: X-Junction |
| Location: BISHAN STREET 14 | | | | |
| Weather: Clear | | Road Surface: Dry | Road Speed Limit: | |
| Traffic Flow: Dual Carriage Way | | Traffic Control: Traffic Light - Working | Traffic Volume: Moderate | |
| Type of Collision: Between Moving Vehicles - Head To Side | | | Anyone conveyed by ambulance: No | |

Details of Vehicle Involved

| Vehicle No. | Type | Make | Model | Color | Condition | No of Passenger |
|-------------|------|----------------|---|-------|----------------------|-----------------|
| SLF3915S | Car | VOLKSWAGO N | GOLF GTI 2.0 TSI 5G19TY | Red | Seriously Damaged | 0 |
| SMR5801Z | Car | BMW | X3 XDRIVE35I A/T 4WD S/R DSC NAV LED HUD | Black | Seriously Damaged | 0 |

Police Report



**SINGAPORE
POLICE FORCE**



T/20201020/2035

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

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Report No. T/20201020/2035

CONTINUATION OF REPORT

| Details of Person Involved | | | |
|-----------------------------------|------------------------|--|-----------------------------------|
| Any Pedestrian Involved: No | | | |
| No. of Pedestrians Injured: NIL | | Use of Pedestrian Crossing: NA | |
| Driver | | | |
| Name | Ouyang Yan | ID No. | NIL |
| Related Vehicle | SLF3915S (Car) | Contact No. | 92970252 |
| 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 |
| Driver | | | |
| Name | DUAN NI JUN | ID No. | S7956031F |
| Related Vehicle | SMR5801Z (Car) | Contact No. | 98369578 |
| Hospital/Clinic | PRUDENCE FAMILY CLINIC | Class of Driving Licence & Expiry Date | Class: 3 Date of Expiry: NIL |
| Date Treatment | 20/10/2020 | Date Discharge | 20/10/2020 |
| No. of Days granted Medical Leave | 05 | Degree of Injury | Slight |

Brief Details.

On 19/10/2020 at about 8.40pm, I was driving my vehicle SMR5801Z (BMW/ Black) along Bishan Road towards the direction of Braddell Road. When I was crossing the junction of Bishan St 14, the traffic light was in my favor and I proceeded straight. Just as I crossed the stop line, I noticed that a vehicle SLF3915S (Volkswagen/ Red) does not seems to be stopping. I tried to stop to avoid the accident but to no avail. Due to the accident, my vehicle was badly damaged. I was conveyed to the hospital and traffic police attended to the accident scene. I rejected the MC from the hospital as I am working from home. However, I sought treatment again on 20/10/2020 at Prudence Family Clinic. I was then given 5 days of medical leave. I also checked the footage from my in car recording subsequently and confirmed that the red Volkswagen had failed to give way to on coming traffic at a discretional turning junction and caused the accident.

Police Report



**SINGAPORE
POLICE FORCE**



T/20201020/2035

Police Station Of Origin:
Bishan N.P.C
20 Bishan Street 23 SINGAPORE 579757
Tel No: 1800-5529999

3 of 3

Report No. T/20201020/2035

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:
E /
Staff Sgt ONG KIAN KENG

Signature Of Informant:

Signature Of Interpreter:
Not applicable

Date/Time:
20/10/2020 11:42

Officer In Charge Of Case:
TP / AEIT /
Sr Staff Sgt ONG YONG HOCK
Contact No.: 65476436

Classification Of Case:

Authentication Stamp
NP168



SINGAPORE
POLICE FORCE

SN 061

SIGNATURE

Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo



Accident Photo





Accident Photo

